

# DRAFT

## Stormwater Coalition of Albany County Joint Annual Report

SPDES General Permit for Stormwater Discharges  
from Municipal Separate Storm Sewer Systems (MS4s)  
Permit No. GP-0-15-003

### Reporting Period

March 10, 2015 to March 9, 2016

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### BACKGROUND

A requirement of all regulated "MS4" municipalities is the submission of an Annual Report to the New York State Department of Environmental Conservation (NYSDEC) due in FINAL form by June 1. As stated in SPDES General Permit No. GP-0-15-003, Part V. C. 2 and referenced in the MS4 Annual Report Form, "MS4s" may submit a Joint Annual Report provided they have a legally binding agreement with other regulated "MS4s".

Each of the regulated "MS4s" included in this report are co-signatories of the necessary agreements, in particular the Stormwater Coalition of Albany County Inter-municipal Agreement, pursuant to Article 5-G of New York State General Municipal Law for Traditional MS4s and Memorandum Of Understanding for Non-Traditional MS4s.

The submission of a FINAL Joint Annual Report first involves the release of a DRAFT Joint Annual Report, followed by the collection of public comments, if any. These comments are included in the FINAL Joint Annual Report and used to help guide the implementation of program requirements. Comments regarding any aspect of stormwater program implementation, either for the Coalition or individual MS4 Programs are strongly encouraged and welcome. To understand MS4 Permit requirements and related program activities, go to the NYSDEC website and/or the Coalition website: [www.albanycountystormwater.com](http://www.albanycountystormwater.com)

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### HOW TO SUBMIT COMMENTS

1. Electronically using the Stormwater Coalition website "Public Comment" interface, [www.stormwateralbanycounty.org](http://www.stormwateralbanycounty.org).
2. By contacting the Local Stormwater Public Contact listed in the Joint Annual Report for each permit holder (See MCC Form).
3. By contacting the individuals listed as Public Contacts on the Coalition website (see Member pages).
4. By e-mail; [swcoalition@albanycounty.com](mailto:swcoalition@albanycounty.com) or phone; 447-5645.

### OTHER INFORMATION

1. Hard copies of this Draft Joint Annual Report are located at the Stormwater Coalition office, 175 Green Street, Albany, NY 12202 and at local MS4/municipal offices (see Draft Annual Report MCM 2 Page 4 of 6 for address information).
2. Public comments are due 4pm, Friday, May 20, 2016.
3. If interested, prior to May 20 individuals may request a public meeting. Call 447-5645.

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### JOINT ANNUAL REPORT FORMAT

The Annual Report document is a form developed by NYSDEC and as such provides a snapshot of program activities pertaining to individual member and collaborative Coalition activities. This DRAFT Joint Annual Report includes individual Annual Reports organized by MS4 type, see order below with shared Coalition data inserted at the end of each individual report. The SPDES Permit No. of each MS4 is in parenthesis. Goals for the upcoming year are based on an updated Joint Stormwater Management Program Plan document completed in May, 2016 (SWMPv4 2015-2017). To view the SWMP Plan document, see Coalition website.

#### Traditional Non Land Use Control MS4

1. Albany County (NYR20A359)

#### Non-Traditional MS4

2. University at Albany-SUNY (NYR20A234)

#### Traditional Land Use Control MS4s

3. City of Albany (NYR20A464)
4. Town of Bethlehem (NYR20A208)
5. City of Cohoes (NYR20A243)
6. Town of Colonie (NYR20A190)
7. Village of Colonie (NYR20A076)

8. Village of Green Island (NYR20A377)
9. Town of Guilderland (NYR20A211)
10. Village of Menands (NYR20A144)
11. Town of New Scotland (NYR20A463)
12. City of Watervliet (NYR20A087)



**MS4 Annual Report Cover Page**

MCC form for period ending March 9, 

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**This cover page must be completed by the report preparer.  
Joint reports require only one cover page.**

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**Choose one:**

**This report is being submitted on behalf of an individual MS4.**

Fill in SPDES ID in upper right hand corner.

Name of MS4

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**OR**

**This report is being submitted on behalf of a Single Entity**

(Per Part II.E of GP-0-10-002)

Name of Single Entity

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**OR**

**This is a joint report being submitted on behalf of a coalition.**

Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.

Name of Coalition

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**MS4 Annual Report Cover Page**

**MCC form for period ending March 9,**

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Provide SPDES ID of each permitted MS4 included in this report.

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**MS4 Municipal Compliance Certification(MCC) Form**

**MCC form for period ending March 9,**

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Name of MS4 

TOWN OF GUILDERLAND
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Each MS4 must submit an MCC form.

**Section 1 - MCC Identification Page**

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

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**MS4 Municipal Compliance Certification(MCC) Form**MCC form for period ending March 9, 

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Name of MS4 

Town of Guilderland
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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for each of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

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Name of MS4 

Town of Guilderland
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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

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If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

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**MS4 Municipal Compliance Certification (MCC) Form**

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID  

N	Y	R	2	0	A	2	1	1
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**Section 3 - Partner Information**

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S t o r m w a t e r C o a l i t i o n o f

Partner/Coalition Name (con't.)

A l b a n y C o u n t y

SPDES Partner ID - If applicable  

N	Y	R	2	0	3	5	9
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Address

1 7 5 G r e e n S t r e e t - C o u n t y H e a l t h B l d g

City

A l b a n y

State

N Y

Zip

1 2 0 2 2 -

eMail

N a n c y . H e i n z e n @ a l b a n y c o u n t y n y . g o v

Phone

( 5 1 8 ) 4 4 7 - 5 6 4 5

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?  Yes  No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

- MM1 P u b l i c a t i o n s - P r o g r a m s - w e b s i t e
- MM2 S W M P D o c u m e n t - W A V E - P u b l i c I n p u t
- MM3 A I M S I I - O R I K i t G r a n t : S t o r m M a p " g
- MM4 C o n s t r u c t i o n O v r s i g h t - M S 4 F o r m s
- MM5 S W P s G r a n t : I n s p e c t i o n F o r m
- MM6 T r a i n g : S t a f f - O f f i c i a l s - M S 4 S v c s

Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	6
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Name of MS4 

Town of Guilderland
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**Section 4 - Certification Statement**

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name 

P	E	T	E	R															
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 MI 

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 Last Name 

B	A	R	B	E	R														
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Title (Clearly print title of individual signing report)  

S	U	P	E	R	V	I	S	O	R		O	F		T	O	W	N		G	U	I	L	D	E	R	L	A	N	D						
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Signature

Date  

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Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
 Division of Water  
 4th Floor  
 625 Broadway  
 Albany, New York 12233-3505







### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID

N	Y	R	2	0	A	2	1	1
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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- |   |                     |  |   |   |   |   |
|---|---------------------|--|---|---|---|---|
| <input type="radio"/> Construction Site Operators Trained | # Trained           | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |
|   |                     |  |   |   |   |   |
| <input type="radio"/> Direct Mailings                     | # Mailings          | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |
|   |                     |  |   |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations         | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">2</td></tr></table>   |   |   |   | 2 |
|   |                     |  | 2 |   |   |   |
| <input checked="" type="radio"/> List-Serves              | # In List           | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">4</td><td style="width: 20px; height: 20px; text-align: center;">8</td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table> |   | 4 | 8 | 0 |
|   | 4                   | 8  | 0 |   |   |   |
| <input type="radio"/> Mailing List                        | # In List           | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |
|   |                     |  |   |   |   |   |
| <input type="radio"/> Newspaper Ads or Articles           | # Days Run          | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |
|   |                     |  |   |   |   |   |
| <input type="radio"/> Public Events/Presentations         | # Attendees         | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |
|   |                     |  |   |   |   |   |
| <input type="radio"/> School Program                      | # Attendees         | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |
|   |                     |  |   |   |   |   |
| <input checked="" type="radio"/> TV Spot/Program          | # Days Run          | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">1</td><td style="width: 20px; height: 20px; text-align: center;">0</td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table> |   | 1 | 0 | 0 |
|   | 1                   | 0  | 0 |   |   |   |
| <input checked="" type="radio"/> Printed Materials:       | Total # Distributed | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">7</td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table>                      |   |   | 7 | 0 |
|   |                     | 7  | 0 |   |   |   |

Locations (e.g. libraries, town offices, kiosks)

H	a	n	d	e	d	o	u	t	f	l	i	e	r	s	t	o	
R	e	s	i	d	e	n	t	s	i	n	N	o	r	m	a	n	s
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Other:

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**Web Page:** Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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URL

W	W	W	.	S	T	O	R	M	W	A	T	E	R	A	L	B	A	N	Y	C	O	U	N	T	Y	.	O	R	G		



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

KRUMKILL WATERSHED TARGET AUDIENCE WITH INFORMATION. UPDATED TOWN WEBSITE AND TV POSTINGS. MONITOR KIOSH AT TOWN HALL.
--

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

HANDED OUY 70 DOOR HANGERS TO RESIDENTS IN KRUMKILL WATERSHED (WESTLYN CT AREA). CONSTANTLY UPDATE TOWN WEBSITE WITH POSTINGS AND MESSAGES ON TOWN TV. KIOSH TRAFFIC IS MONITOR AND UPDATED AS NEEDED.
--

**C. How many times was this observation measured or evaluated in this reporting period?**

			3
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

DOING A GOOD JOB WITH KRUMKILL WATERSHED, BUT COULD ALWAYS DO MORE. WEBSITE ,TV AND KIOSH MONITORING WILL ALWAYS CONTINUE THROUGH OUT YEAR.
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**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

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**2. URL(s) con't.:**

**Please provide specific address(es) where notice(s) can be accessed - not home page.**

URL

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**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

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**2. URL(s) con't.:**

**Please provide specific address(es) where notices can be accessed - not home page.**

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### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

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**3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?**

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

- MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department  

G	U	I	L	D	E	R	L	A	N	D		H	I	G	H	W	A	Y		D	E	P	A	R	T	M	E	N	T
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Phone  

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- Library  Annual Report  SWMP Plan  Comments

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- Other  Annual Report  SWMP Plan  Comments

Address  

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City  

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- Web Page URL:  Annual Report  SWMP Plan  Comments

W W W . T O W N O F G U I L D E R L A N D . C O M  
S T O R M W A T E R  

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Please provide specific address of page where report can be accessed - not home page.

- eMail  Comments

D A R P I N O K @ T O W N O F G U I L D E R L A N D . O R G  

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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

0	5
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0	5
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2	0	1	6
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**4.b. For how many days was/will this report be posted?**

1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**
 Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

 Yes  No
**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**
 Yes  No

If No, is one planned for each?

 Yes  No
**6. Were comments received during this reporting period?**
 Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

TOWN HAS UPDATED FLOW CHART AND CONTACT LIST. ALSO HAVE POSTED INFORMATION ON TOWN WEBSITE.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

WITH WEBSITE POSTINGS AND TV MESSAGES THE TOWN RESIDENTS ARE BETTER INFORMED ABOUT STORM WATER ISSUES.

**C. How many times was this observation measured or evaluated in this reporting period?**

			3
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

STORM WATER IS GETTING MORE ATTENTION IN THE TOWN. MORE FREQUENT UPDATES ON WEBSITE AND TV POSTINGS. KIOSH ACTIVITIE HAS INCREASE ALSO.

## MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,** 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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### Minimum Control Measure 3. Illicit Discharge Detection and Elimination

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
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**1. Enter the number and approx. percent of outfalls mapped:**

	1	8	0
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 # 

	9	5
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 %

**2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?**

	3	3
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**3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?**

- |  |   |
|--|---|
| <input type="radio"/> Auto Recyclers<br><input checked="" type="radio"/> Building Maintenance<br><input type="radio"/> Churches<br><input type="radio"/> Commercial Carwashes<br><input type="radio"/> Commercial Laundry/Dry Cleaners<br><input checked="" type="radio"/> Construction Vehicle Washouts<br><input type="radio"/> Cross-Connections<br><input type="radio"/> Distribution Centers<br><input type="radio"/> Food Processing Facilities<br><input type="radio"/> Garbage Truck Washouts<br><input type="radio"/> Hospitals<br><input type="radio"/> Improper RV Waste Disposal<br><input type="radio"/> Industrial Process Water<br><input type="radio"/> Other: | <input checked="" type="radio"/> Landscaping (Irrigation)<br><input type="radio"/> Marinas<br><input type="radio"/> Metal Plateing Operations<br><input type="radio"/> Outdoor Fluid Storage<br><input checked="" type="radio"/> Parking Lot Maintenance<br><input type="radio"/> Printing<br><input checked="" type="radio"/> Residential Carwashing<br><input type="radio"/> Restaurants<br><input type="radio"/> Schools and Universities<br><input type="radio"/> Septic Maintenance<br><input checked="" type="radio"/> Swimming Pools<br><input checked="" type="radio"/> Vehicle Fueling<br><input checked="" type="radio"/> Vehicle Maint./Repair Shops<br><input type="radio"/> None |
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Sewersheds:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition TOWN OF GUILDERLAND

SPDES ID NYR 20A 211

3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer, Industrial Connections, Cross Connections, Inflow/Infiltration, Failing Septic Systems, Pump Station Failure, Floor Drains Connected To Storm Sewers, Sanitary Sewer Overflows, Illegal Dumping, Straight Pipe Sewer Discharges, Other: None

Grid for recording other types of discharges.

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

0

5. How many illicit discharges have been confirmed during this reporting period?

0

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

0

7. Has the storm sewershed mapping been completed in this reporting period? If No, approximately what percent was completed in this reporting period?

Yes No 85%

8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

WWW.AIMGIS.ORG / WEBMAP PASSWORD PROTECTED

URL

Grid for providing URL(s).



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.**

THE TOWN IS TRYING TO REMAP OUTFALLS AND IDENTIFY THEM FOR ACCURACY. NEW STAFF (TIM) IS PUTTING A PROGRAM TOGETHER FOR US TO BE MORE INFORMATIVE.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

WE HAVE SET UP A BETTER MAPPING SYSTEM AND IT IS MORE ACCURATE.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

THIS NEW PROGRAM IS A TIMELY PROCEDURE, BUT IT IS MORE ACCURATE. WE WILL BE ABLE TO PUT MORE INFORMATION ON MAPS.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

	1	6
--	---	---

**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

		0
--	--	---

**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No



**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- Notices of Violation # 

					1
--	--	--	--	--	---

 No Authority
- Stop Work Orders # 

					1
--	--	--	--	--	---

 No Authority
- Criminal Actions # 

--	--	--	--	--	--

 No Authority
- Termination of Contracts # 

--	--	--	--	--	--

 No Authority
- Administrative Fines # 

--	--	--	--	--	--

 No Authority
- Civil Penalties # 

--	--	--	--	--	--

 No Authority
- Administrative Orders # 

--	--	--	--	--	--

 No Authority
- Enforcement Actions or Sanctions # 

					1
--	--	--	--	--	---
- Other # 

--	--	--	--	--	--

 No Authority

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		5
--	--	---
  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

	1	6
--	---	---
  3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
---	---	---

 %
  4. What percent of active construction sites were inspected more than once?  NT 

1	0	0
---	---	---

 %
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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Name of MS4/Coalition TOWN OF GUILDERLAND

SPDES ID  
N Y R 2 0 A 2 1 1

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

T O W N O F G U I L D E R L A N D H I G H W A Y D E P

Address

6 3 3 8 F R E N C H ' S M I L L R O A D

City

G U I L D E R L A N D

N Y

Zip

1 2 0 8 5 -

Phone

( 5 1 8 ) 8 6 1 - 5 1 0 8

Library

Address

City

Zip

-

Phone

( ) -

Other

Address

1 7 5 G R E E N S T R E E T - C O U N T Y H E A L T H

City

A L B A N Y

N Y

Zip

1 2 0 2 2 -

Phone

( 5 1 8 ) 4 4 7 - 5 6 4 5

Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

W W W . S T O R M W A T E R C O A L I T I O N

O F A L B A N Y . C O M

URL

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

ALL OF TOWNS CONSTRUCTION SITES ARE MONITORED AND RECORDS KEPT ON FILE, FOR FOLLOW UP.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

WE HAVE WRITTEN PROCEDURES IN PLACE TO MONITOR ALL CONSTRUCTION SITES. RECORDS ARE KEPT ON FILE.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

INSPECTION SITES TO DEC BLUE BOOK AND MAKE SURE ALL CONSTRUCTION SITES FOLLOW IT. MAKE SURE ALL CONTRACTORS HAVE 4 HOUR DEC COURSE.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**

Yes     No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**

Yes     No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**

Yes     No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**

		0
--	--	---

**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

	6	0
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

TOWN PUSHING FOR GREEN INFRASTRUCTURE . WANT TO UPDATE POST CONSTRUCTION ACTIVITIES.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

TOWN HAS BEEN ACTIVE IN PUSHING GREEN INFRASTRUCTURE. WE ARE DOING GOOD JOB OVERALL, WE COULD STILL IMPROVE POST CONSTRUCTION PRACTICES.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

TOWN HAS FOLLOWED DEC CONSTRUCTION SITE ACTIVITIE TO MAKE SURE EVERYONE IS IN CODE. WE HAVE DEFFINATLY GOT BETTER ON THIS WITH DEC'S HELP.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID 

N	Y	R	2	0	A	2	1	1
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
Street Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Bridge Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Other.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No



**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

				2
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

		2	6	0
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		2	0	5
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

			2	1
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

				0
--	--	--	--	---
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

	2	5	0	0
--	---	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

		1	4	.	
--	--	---	---	---	--

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				2
--	--	--	--	---

**4. What was the date of the last training?**

0	3
---	---

 / 

0	9
---	---

 / 

1	0	1	6
---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

	3	9
--	---	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

	3	0
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

TOWN HAS PROGRAM IN PLACE TO CLEAN OUT BASINS AND RETENTION PONDS. WE ALSO SWEEP ROADS ON A CONSITANT BASIS. WE KEEP UP ON FACILITY AUDITS.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

WE CLEAN OUT 205 BASINS THIS YEAR ALONG WITH 21 RETENTION BASINS. OUR STREETS WERE ALL SWEEPED IN THE TOWN LAST YEAR AT LEAST ONCE.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

TOWN WILL COMPLETE ALL TOWN FACILTIE AUDITS EVERY 3 YEARS. OUR ROAD SWEEPING ALONG WITH BASINS AND RETENTION PONDS IS DONE ANNUALLY.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0					
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### Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

1	2
---	---

#### 1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- Construction Sites
- General Stormwater Management Information
- Household Hazardous Waste Disposal
- Illicit Discharge Detection and Elimination
- Infrastructure Maintenance
- Smart Growth
- Storm Drain Marking
- Green Infrastructure/Better Site Design/Low Impact Development
- Other:
- Pesticide and Fertilizer Application
- Pet Waste Management
- Recycling
- Riparian Corridor Protection/Restoration
- Trash Management
- Vehicle Washing
- Water Conservation
- Wetland Protection
- None

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
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Other

#### 2. Specific audiences targeted during this reporting period:

- Public Employees     Contractors
- Residential             Developers
- Businesses               General Public
- Restaurants             Industries
- Other:                     Agricultural

E	l	e	c	t	e	d	s	/	P	u	b	l	i	c	-	C	l	e	a	n	W	a	t	e	r	A	c	t	I	n	f	o
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Other

### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- |  |                     |  |   |   |   |
|--|---------------------|--|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained           |  |   | 6 | 4 |
| <input type="radio"/> Direct Mailings                                | # Mailings          |  |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays            | # Locations         |  |   | 8 |   |
| <input checked="" type="radio"/> List-Serves                         | # In List           |  | 4 | 8 | 0 |
| <input type="radio"/> Mailing List                                   | # In List           |  |   |   |   |
| <input type="radio"/> Newspaper Ads or Articles                      | # Days Run          |  |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations         | # Attendees         |  | 1 | 5 | 0 |
| <input type="radio"/> School Program                                 | # Attendees         |  |   |   |   |
| <input type="radio"/> TV Spot/Program                                | # Days Run          |  |   |   |   |
| <input checked="" type="radio"/> Printed Materials:                  | Total # Distributed |  | 2 | 2 | 8 |

Locations (e.g. libraries, town offices, kiosks)

T	a	b	l	i	n	g	-	M	H	L	C	S	o	l	s	t	i	c	e	
G	o	v	e	r	n	i	n	g		B	o	a	r	d		M	t	g	s	
T	r	a	i	n	i	n	g	s	-	P	u	b	l	i	c	P	r	o	g	

Other:

H	o	s	t	3	C	W	P	W	e	b	c	a	s	t	s
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID

N	Y	R	2	0				
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM1 Coalition goals by BMPs...BMP 1-1 Target Audience Analysis Worksheet (TAAW): add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, create 1 new doc (plant care).

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 1-1 Target Audience Analysis Worksheet (TAAW): add sub-watershed delineations to Map Set; clarify directions-COMPLETED. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info-COMPLETED. BMP 1-7 List Serve: update municipal contacts-NOT COMPLETED (No time/grant writing). BMP 1-4 Publications: maintain inventory-COMPLETED; create 1 new doc (plant care)-NOT COMPLETED (too hard).

**C. How many times was this observation measured or evaluated in this reporting period?**

			4
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 1-1 Target Audience Analysis Wksheet - support MS4 efforts to update their TAAW; id target audience, draft & implement goals; BMP 1-3 Website-post routine Coalition events, update text of Home Page. BMP 1-7 List Serve - update contacts (newly elected, Plan'g Bd, MS4 staff, consultants, webcast audience). BMP 1-6 Public Program-Guest Spker-present Clean Water Act Basics & Green Infrastructure Program to MS4 Electeds/Plan'g Bd.



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  
N Y R 2 0

#### 2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL


URL


URL


URL


URL


URL


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

**3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?**

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department

S t o r m w a t e r C o a l i t i o n - A l b a n y C n t y

Address

1 7 5 G r e e n S t r e e t - C n t y H e a l t h B l d g

City

A l b a n y

Zip

N Y

1 2 2 0 2 -

Phone

( 5 1 8 ) 4 4 7 - 5 6 4 5

Library  Annual Report  SWMP Plan  Comments

Address

City

Zip

-

Phone

( ) -

Other  Annual Report  SWMP Plan  Comments

Address

City

Zip

-

Phone

( ) -

Web Page URL:  Annual Report  SWMP Plan  Comments

w w w . s t o r m w a t e r a l b a n y c o u n t y . o r g

Please provide specific address of page where report can be accessed - not home page.

eMail  Comments

s w c o a l i t i o n @ a l b a n y c o u n t y . c o m



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID  

N	Y	R	2	0					
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

0	5
---	---

 / 

0	6
---	---

 / 

2	0	1	6
---	---	---	---

**4.b. For how many days was/will this report be posted?**

	1	4
--	---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

--	--

 / 

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 / 

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM 2 Coalition goals by BMPs... BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website - PARTIALLY COMPLETED, circulated flyer at public program promoting website, did not highlight public comment portal, did highlight maps posted on website. Increasingly website is used by Coalition members to access internal forms and documents. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers-COMPLETED, time consuming to locate sites, but worth the effort.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 2-2 Annual Report-combine Joint SWMP document update (BMPs/Goals) with prep of Annual Report, meet w/all members, post AR & SWMP on website. BMP 2-8 Student Water Quality Projects-coordinate with U Albany mapping projects named in WQIP Rnd 12 grant workplan, secure professor/student support, start projects, \$/credits. BMP 2-11 WAVE-monitor 4 sites w/volunteers.



**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0					
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**3.b. What types of illicit discharges have been found during this reporting period?**

- Broken Lines From Sanitary Sewer
- Cross Connections
- Failing Septic Systems
- Floor Drains Connected To Storm Sewers
- Illegal Dumping
- Other:
- Industrial Connections
- Inflow/Infiltration
- Pump Station Failure
- Sanitary Sewer Overflows
- Straight Pipe Sewer Discharges
- None

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**4. How many illicit discharges/potential illegal connections have been detected during this reporting period?**

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**5. How many illicit discharges have been confirmed during this reporting period?**

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**6. How many illicit discharges/illegal connections have been eliminated during this reporting period?**

--	--	--

**7. Has the storm sewershed mapping been completed in this reporting period?**  Yes  No

If No, approximately what percent was completed in this reporting period? 

--	--	--

 %

**8. Is the above information available in GIS?**  Yes  No

**Is this information available on the web?**  Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

P	a	s	s	w	o	r	d		P	r	o	t	e	c	t	e	d											
w	w	w	.	a	i	m	s	g	i	s	.	o	r	g	/	w	e	b	m	a	p	/						
*	*	R	e	s	t	r	i	c	t	e	d		A	c	c	e	s	s	*	*								

URL


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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SPDES ID

N	Y	R	2	0					
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM 3 Coalition goals by BMPs... BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 3-2 AIMS: Coalition decides what to do about AIMS-COMPLETED, Board agreed to fund update of mapper, consultant services secured, members responded to survey/attended meetings to id problems with AIMS and design needs, research of current web mapper technology incorporated into grant application and workplan. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures-COMPLETED, Coalition staff will continue to assist if asked.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - support mapper redesign as guided by consultant, organize 2 to 3 design wkshops for members, integrate mapper redesign with other MS4 program needs (grant funded mobile app field inspection forms for ORI, MS4 construction site inspections, post construction sw practices inspections, facility self audits), prep mapper layers, launch mapper. BMP 3-5 Dry Weather (ORI)-manage ORI kits, restock.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County			
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SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No Coalition goals for MCM 4. Instead, Coalition "Procedures" goals are located in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 7-7 Procedures & Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit- PARTIALLY COMPLETED. Coalition services provided to one MS4 led to overhaul by Forms Committee of existing, outdated SWPPP Review Ck List. Replaced with comprehensive Oversight of Construction Activity Permit, Guidance Doc for MS4s, released 3/23/2016. Coalition facilitated.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Procedures-review paper MS4 Construction Inspection Form for conversion to mobile device. BMP 7-7 Procedures & Forms Compendium-develop Coalition wide strategy for using MS4 Oversight/Construction Permit Guidance Document, discuss training in purpose/use for MS4s/consultants, incorporate into existing/future procedures (3 MS4s); note edits for future updates.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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SPDES ID

N	Y	R	2	0					
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No Coalition goals for MCM 5. Instead, Coalition "Procedures" goals are located in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 7-7 Procedures & Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit- PARTIALLY COMPLETED. Coalition services provided to one MS4 led to overhaul by Forms Committee of existing, outdated SWPPP Review Ck List. Replaced with comprehensive Oversight of Construction Activity Permit, Guidance Doc for MS4s, released 3/23/2016. Coalition facilitated.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - load map layers named in Construction Activity Permit/Design Manual (also named in MS4 Guidance Doc - future BMP 4-2/5-5 SWPPP Review Procedures). BMP 5-8 Inventory Post Construction Practices - w/grant fund'g implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - w/ grant fund'g develop inspection forms for mobile devices.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																			
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SPDES ID  

N	Y	R	2	0															
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

	1	2
--	---	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Salt Storage.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parks and Open Space.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Municipal Building.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

--	--	--	--	--
- Streets Swept (Number of miles X Number of times swept) # Miles 

--	--	--	--	--
- Catch Basins Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Pesticide/Herbicide Applied # Acres 

					.	
--	--	--	--	--	---	--

  
 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

			1	3
--	--	--	---	---

**4. What was the date of the last training?**

1	0
---	---

 / 

2	2
---	---

 / 

2	0	1	5
---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

		2
--	--	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

--	--	--

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No specific Coalition goals for MCM 6; instead Coalition staff as requested by individual members, directly assist MS4s in implementing MCM 6 goals. Coalition goals related to training are described in SWMPv3 MCM 8 Training. There various BMPs describe training topics and method of delivery.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

No clear goal statement for Coalition. See individual MS4 goals, for which Coalition staff provided services (Albany County, City of Albany, Village of Menands, Town of New Scotland, City of Watervliet).

**C. How many times was this observation measured or evaluated in this reporting period?**

			0
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): MCM 8 Train'g BMP 8-1 Clean Water Act Basics-Coalition program to 2 MS4 govern'g boards; 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards-1 MS4 Plan'g Board; BMP 8-4/8-5/8-6 replace as needed EXCAL visual DVDs (Spills & Skills, Rain Check, IDDE-A Grate Concern)/circulate to MS4s; BMP 8-17 On-line Training-assist Albany County SW Prog Tech.

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 

2	0	1	6
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Name of MS4 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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Each MS4 must submit an MCC form.

## Section 1 - MCC Identification Page

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y
C	o	u	n	t	y																								

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	6
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Name of MS4 

Village of Menands														
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for *each* of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name	MI	Last Name
M e g a n	M	G r e n i e r

Title
M a y o r

Address
2 5 0 B r o a d w a y

City	State	Zip
M e n a n d s	N Y	1 2 2 0 4 -

eMail
v i l l a g e o f m e n a n d s @ h o t m a i l . c o m

Phone	County
( 5 1 8 ) 4 3 4 - 2 9 2 2	A l b a n y



**MS4 Municipal Compliance Certification (MCC) Form**

MCC form for period ending March 9, 2 0 1 6

Name of MS4 Village of Menands

SPDES ID  
N Y R 2 0 A 1 4 4

**Section 3 - Partner Information**

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name  
S t o r m w a t e r C o a l i t i o n o f

Partner/Coalition Name (con't.) Albany County SPDES Partner ID - If applicable  
N Y R 2 0

Address  
1 7 5 G r e e n S t r e e t - C o u n t y H e a l t h B l d g

City Albany State NY Zip 1 2 2 0 2 -

eMail  
N a n c y . H e i n z e n @ a l b a n y c o u n t y n y . g o v

Phone ( 5 1 8 ) 4 4 7 - 5 6 4 5 Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?  Yes  No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

- MM1 P u b l i c a t i o n s - P r o g r a m s - W e b s i t e
- MM2 S W M P D o c u m e n t - W A V E - P u b l i c I n p u t
- MM3 A I M S I I - O R I K i t G r a n t : S t o r m M a p ' g
- MM4 C o n s t r u c t i o n O v r s i g h t - M S 4 F o r m s
- MM5 S W P s G r a n t : M a p - I n s p e c t i o n F o r m s
- MM6 T r a i n g : S t a f f - O f f i c i a l s M S 4 S v c s

Additional tasks/responsibilities

Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

[Empty text box for additional information]

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 6

Name of MS4 Village of Menands

SPDES ID

N Y R 2 0 A 1 4 4

**Section 4 - Certification Statement**

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name

M e g a n

MI

M

Last Name

G r e e n i e r

Title (Clearly print title of individual signing report)

M a y o r

Signature

[Signature box]

Date

/ /

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505





## MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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### Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

#### 1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input checked="" type="radio"/> Construction Sites</li> <li><input checked="" type="radio"/> General Stormwater Management Information</li> <li><input type="radio"/> Household Hazardous Waste Disposal</li> <li><input type="radio"/> Illicit Discharge Detection and Elimination</li> <li><input type="radio"/> Infrastructure Maintenance</li> <li><input type="radio"/> Smart Growth</li> <li><input type="radio"/> Storm Drain Marking</li> <li><input checked="" type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development</li> <li><input type="radio"/> Other:</li> </ul> | <ul style="list-style-type: none"> <li><input type="radio"/> Pesticide and Fertilizer Application</li> <li><input checked="" type="radio"/> Pet Waste Management</li> <li><input checked="" type="radio"/> Recycling</li> <li><input type="radio"/> Riparian Corridor Protection/Restoration</li> <li><input type="radio"/> Trash Management</li> <li><input checked="" type="radio"/> Vehicle Washing</li> <li><input type="radio"/> Water Conservation</li> <li><input type="radio"/> Wetland Protection</li> <li><input type="radio"/> None</li> </ul> |
|--|---|

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Other

#### 2. Specific audiences targeted during this reporting period:

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li><input checked="" type="radio"/> Public Employees</li> <li><input checked="" type="radio"/> Residential</li> <li><input checked="" type="radio"/> Businesses</li> <li><input type="radio"/> Restaurants</li> <li><input type="radio"/> Other:</li> </ul> | <ul style="list-style-type: none"> <li><input type="radio"/> Contractors</li> <li><input type="radio"/> Developers</li> <li><input checked="" type="radio"/> General Public</li> <li><input type="radio"/> Industries</li> <li><input type="radio"/> Agricultural</li> </ul> |
|---|--|

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Other

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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### 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

- Construction Site Operators Trained 

# Trained				
-----------	--	--	--	--
- Direct Mailings 

# Mailings				
------------	--	--	--	--
- Kiosks or Other Displays 

# Locations				1
-------------	--	--	--	---
- List-Serves 

# In List				
-----------	--	--	--	--
- Mailing List 

# In List				
-----------	--	--	--	--
- Newspaper Ads or Articles 

# Days Run				
------------	--	--	--	--
- Public Events/Presentations 

# Attendees			1	0
-------------	--	--	---	---
- School Program 

# Attendees				
-------------	--	--	--	--
- TV Spot/Program 

# Days Run				
------------	--	--	--	--
- Printed Materials: 

Total # Distributed				
---------------------	--	--	--	--

Locations (e.g. libraries, town offices, kiosks)


Other:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL


URL




**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands
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SPDES ID

N	Y	R	2	0	A	1	4	4
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Targeted Audiences; The Village of Menands continued its efforts to reach homeowners to educate them on the impact of bacteria and lawn runoff into Village catch basins and ultimately the Hudson River.
---

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The Village received about ten inquiries in response to this effort.
--

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village will continue to publish quarterly articles in the Menands Activities (Village bi-weekly newsletter) and will include articles on hazardous waste, including the Town of Colonie Hazardous Waste Collection Day, and continued maintenance of our brochure rack.
--











**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands									
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

--	--

 / 

--	--

 / 

--	--	--	--

**4.b. For how many days was/will this report be posted?**

--	--	--

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**  Yes  No

If Yes, what was the date of the meeting?

0	6
---	---

 / 

2	2
---	---

 / 

2	0	1	5
---	---	---	---

If No, is one planned?

 Yes  No
**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**  Yes  No

If No, is one planned for each?

 Yes  No
**6. Were comments received during this reporting period?**  Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands
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SPDES ID

N	Y	R	2	0	A	1	4	4
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village will continue to develop SWMP goals to improve Public Involvement and Participation. In addition, the Village Board will be briefed about the Annual Report and related information.
--

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

There has been a small but steady increase in the number of hits on the Menands portion of the Joint Annual Report on the Stormwater Coalition website.8
--

**C. How many times was this observation measured or evaluated in this reporting period?**

			8
--	--	--	---

*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village will continue its efforts to develop procedures for the tracking of stormwater queries. This will be done with the staff assistance of the Stormwater Coalition. The Village has purchased additional staff consultant hours for this purpose.
--



**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**3.b. What types of illicit discharges have been found during this reporting period?**

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:  None

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**4. How many illicit discharges/potential illegal connections have been detected during this reporting period?**

		0
--	--	---

**5. How many illicit discharges have been confirmed during this reporting period?**

		0
--	--	---

**6. How many illicit discharges/illegal connections have been eliminated during this reporting period?**

		0
--	--	---

**7. Has the storm sewershed mapping been completed in this reporting period?**

- Yes
- No

If No, approximately what percent was completed in this reporting period?

--	--	--

 %

**8. Is the above information available in GIS?**

- Yes
- No

**Is this information available on the web?**

- Yes
- No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL


URL


## MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**8. URL(s) con't.:**

**Please provide specific address of page where map(s) can be accessed - not home page**

URL


URL


URL


URL


URL


**9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report?**  Yes    No

**10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law?**  Yes    No    NT

**11. What percent of staff in relevant positions and departments has received IDDE training?** 

7	5
---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID

N	Y	R	2	0	A	1	4	4
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village will continue its efforts to verify all outfalls. The storm system map will be updated and coordinated with outfall listings. This effort will be done with the assistance of Stormwater Coalition staff. The Village has purchased additional staff consultant hours for this purpose.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Field observations improve the effectiveness of our program. This work was done with the assistance of the Stormwater Coalition staff.

**C. How many times was this observation measured or evaluated in this reporting period?**

		1	8
--	--	---	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village of Menands Stormwater Coordinator will continue to develop written procedures for IDDE compliance by March 9, 2017. This effort will be with the continued assistance of the Stormwater Coalition staff.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID

N	Y	R	2	0	A	1	4	4
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

		1
--	--	---

**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

		0
--	--	---

**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- Notices of Violation # 

					0
--	--	--	--	--	---

 No Authority
- Stop Work Orders # 

					0
--	--	--	--	--	---

 No Authority
- Criminal Actions # 

--	--	--	--	--	--

 No Authority
- Termination of Contracts # 

--	--	--	--	--	--

 No Authority
- Administrative Fines # 

--	--	--	--	--	--

 No Authority
- Civil Penalties # 

--	--	--	--	--	--

 No Authority
- Administrative Orders # 

--	--	--	--	--	--

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--	--
- Other # 

--	--	--	--	--	--

 No Authority



**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		1
--	--	---

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		1
--	--	---

3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
---	---	---

 %

4. What percent of active construction sites were inspected more than once?  NT 

1	0	0
---	---	---

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT

**If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?**  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

**6. con't.:**

Submit additional pages as needed.

**● MS4/Coalition Office**

Department

Address

City

Zip

-

Phone

(  )  -

**○ Library**

Address

City

Zip

-

Phone

(  )  -

**○ Other**

Address

City

Zip

-

Phone

(  )  -

**○ Web Page URL(s):** Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands
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SPDES ID

N	Y	R	2	0	A	1	4	4
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

During the reporting period, the Village worked with the Stormwater Coalition staff to improve and update our SWMP.
---

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The Village has developed eight updated BMPs that will be continually monitored to improve our SWMP. New procedures and forms will be implemented with the assistance of the Stormwater Coalition staff.
--

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village will continue its efforts to implement all BMPs by March 9, 2017.
---

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID 

N	Y	R	2	0	A	1	4	4
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**Minimum Control Measure 5. Post-Construction Stormwater Management**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

**1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?**

	# Inventoried	# Inspections	# Times Maintained									
<input checked="" type="radio"/> Alternative Practices	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0
		0										
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<input checked="" type="radio"/> Filter Systems	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0
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<input checked="" type="radio"/> Infiltration Basins	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0
		0										
		0										
		0										
<input checked="" type="radio"/> Open Channels	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0
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<input checked="" type="radio"/> Wetlands	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0
		0										
		0										
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<input checked="" type="radio"/> Other	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0	<table border="1"><tr><td> </td><td> </td><td>0</td></tr></table>			0
		0										
		0										
		0										

**2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?**  Yes  No

**3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?**

- Building Codes
- Municipal Comprehensive Plans
- Overlay Districts
- Open Space Preservation Program
- Zoning
- Local Law or Ordinance
- None
- Land Use Regulation/Zoning
- Watershed Plans
- Other Comprehensive Plan

Other: 

S	i	t	e		P	l	a	n		R	e	v	i	e	w											
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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**

Yes     No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**

Yes     No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**

Yes     No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**

		0
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**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

1	0	0
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 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands
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SPDES ID

N	Y	R	2	0	A	1	4	4
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village is undertaking inspections on the one active project that we have.
--

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

In cooperation with the owner's qualified inspector, the Village has monitored any issues that need corrective action by the contractor for the owner.
--

**C. How many times was this observation measured or evaluated in this reporting period?**

		2	0
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village has contracted with a consultant to review our Zoning Code with respect to possible changes affecting the Broadway Corridor. This study will consider and make recommendations on Green Infrastructure for possible inclusion in our Local law..
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**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

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**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

--	--	--	--	--
- Streets Swept (Number of miles X Number of times swept) # Miles 

			2	4
--	--	--	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

			2	0
--	--	--	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Pesticide/Herbicide Applied # Acres 

					.	
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(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				1
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**4. What was the date of the last training?**

0	2
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 / 

1	6
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 / 

2	0	1	6
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**5. How many municipal employees have been trained in this reporting period?**

		9
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**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

1	0	0
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 %



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands
--------------------

SPDES ID

N	Y	R	2	0	A	1	4	4
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village has conducted an updated assessment of municipal operations and facilities. This was done with the assistance of Stormwater Coalition staff. We have begun to implement Third Party Certification forms. We will also schedule a presentation to the Board of Trustees to provide an overview of the Clean Water Act and its requirements. This presentation will be conducted by conducted by Stormwater Coalition staff.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

See A above.

**C. How many times was this observation measured or evaluated in this reporting period?**

			5
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village will continue to schedule video training sessions with appropriate staff.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
---------------------------------------

SPDES ID  

N	Y	R	2	0					
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### Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

1	2
---	---

#### 1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- Construction Sites
- General Stormwater Management Information
- Household Hazardous Waste Disposal
- Illicit Discharge Detection and Elimination
- Infrastructure Maintenance
- Smart Growth
- Storm Drain Marking
- Green Infrastructure/Better Site Design/Low Impact Development
- Other:
- Pesticide and Fertilizer Application
- Pet Waste Management
- Recycling
- Riparian Corridor Protection/Restoration
- Trash Management
- Vehicle Washing
- Water Conservation
- Wetland Protection
- None

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
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Other

#### 2. Specific audiences targeted during this reporting period:

- Public Employees     Contractors
- Residential             Developers
- Businesses              General Public
- Restaurants             Industries
- Other:                     Agricultural

E	l	e	c	t	e	d	s	/	P	u	b	l	i	c	-	C	l	e	a	n	W	a	t	e	r	A	c	t	I	n	f	o
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Other

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID									
N	Y	R	2	0					

### 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

- Construction Site Operators Trained # Trained 

			6	4
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- Direct Mailings # Mailings 

--	--	--	--	--
- Kiosks or Other Displays # Locations 

			8	
--	--	--	---	--
- List-Serves # In List 

		4	8	0
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- Mailing List # In List 

--	--	--	--	--
- Newspaper Ads or Articles # Days Run 

--	--	--	--	--
- Public Events/Presentations # Attendees 

		1	5	0
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- School Program # Attendees 

--	--	--	--	--
- TV Spot/Program # Days Run 

--	--	--	--	--
- Printed Materials: Total # Distributed 

		2	2	8
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Locations (e.g. libraries, town offices, kiosks)

T	a	b	l	i	n	g	-	M	H	L	C	S	o	l	s	t	i	c	e
G	o	v	e	r	n	i	n	g		B	o	a	r	d		M	t	g	s
T	r	a	i	n	i	n	g	s	-	P	u	b	l	i	c	P	r	o	g

Other:

H	o	s	t		3		C	W	P		W	e	b	c	a	s	t	s	
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM1 Coalition goals by BMPs...BMP 1-1 Target Audience Analysis Worksheet (TAAW): add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, create 1 new doc (plant care).

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 1-1 Target Audience Analysis Worksheet (TAAW): add sub-watershed delineations to Map Set; clarify directions-COMPLETED. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info-COMPLETED. BMP 1-7 List Serve: update municipal contacts-NOT COMPLETED (No time/grant writing). BMP 1-4 Publications: maintain inventory-COMPLETED; create 1 new doc (plant care)-NOT COMPLETED (too hard).

**C. How many times was this observation measured or evaluated in this reporting period?**

			4
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 1-1 Target Audience Analysis Wksheet - support MS4 efforts to update their TAAW; id target audience, draft & implement goals; BMP 1-3 Website-post routine Coalition events, update text of Home Page. BMP 1-7 List Serve - update contacts (newly elected, Plan'g Bd, MS4 staff, consultants, webcast audience). BMP 1-6 Public Program-Guest Spker-present Clean Water Act Basics & Green Infrastructure Program to MS4 Electeds/Plan'g Bd.



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

www.stormwateralbanycounty.org

URL

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### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																			
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 SPDES ID 

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### 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department  

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n	-	A	l	b	a	n	y	C	n	t	y
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5	1	8
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Library  Annual Report  SWMP Plan  Comments

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Other  Annual Report  SWMP Plan  Comments

Address  

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City  

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Web Page URL:  Annual Report  SWMP Plan  Comments

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Please provide specific address of page where report can be accessed - not home page.

eMail  Comments

s	w	c	o	a	l	i	t	i	o	n	@	a	l	b	a	n	y	c	o	u	n	t	y	.	c	o	m									

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID									
N	Y	R	2	0					

**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

0	5
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 / 

0	6
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 / 

2	0	1	6
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**4.b. For how many days was/will this report be posted?**

	1	4
--	---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

--	--

 / 

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 / 

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM 2 Coalition goals by BMPs... BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website - PARTIALLY COMPLETED, circulated flyer at public program promoting website, did not highlight public comment portal, did highlight maps posted on website. Increasingly website is used by Coalition members to access internal forms and documents. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers-COMPLETED, time consuming to locate sites, but worth the effort.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes     No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes     No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 2-2 Annual Report-combine Joint SWMP document update (BMPs/Goals) with prep of Annual Report, meet w/all members, post AR & SWMP on website. BMP 2-8 Student Water Quality Projects-coordinate with U Albany mapping projects named in WQIP Rnd 12 grant workplan, secure professor/student support, start projects, \$/credits. BMP 2-11 WAVE-monitor 4 sites w/volunteers.



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:
- None

Grid for additional information for question 3.b.

#### 4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

Grid for answer to question 4.

#### 5. How many illicit discharges have been confirmed during this reporting period?

Grid for answer to question 5.

#### 6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

Grid for answer to question 6.

#### 7. Has the storm sewershed mapping been completed in this reporting period?

Yes  No

If No, approximately what percent was completed in this reporting period?

Grid for percent answer to question 7.

#### 8. Is the above information available in GIS?

Yes  No

Is this information available on the web?

Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

Grid for URL: Password Protected www.aimsgis.org/webmap/ Restricted Access

URL

Grid for additional URL information.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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SPDES ID

N	Y	R	2	0					
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM 3 Coalition goals by BMPs... BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 3-2 AIMS: Coalition decides what to do about AIMS-COMPLETED, Board agreed to fund update of mapper, consultant services secured, members responded to survey/attended meetings to id problems with AIMS and design needs, research of current web mapper technology incorporated into grant application and workplan. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures-COMPLETED, Coalition staff will continue to assist if asked.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - support mapper redesign as guided by consultant, organize 2 to 3 design wkshops for members, integrate mapper redesign with other MS4 program needs (grant funded mobile app field inspection forms for ORI, MS4 construction site inspections, post construction sw practices inspections, facility self audits), prep mapper layers, launch mapper. BMP 3-5 Dry Weather (ORI)-manage ORI kits, restock.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County			
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SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No Coalition goals for MCM 4. Instead, Coalition "Procedures" goals are located in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 7-7 Procedures & Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit- PARTIALLY COMPLETED. Coalition services provided to one MS4 led to overhaul by Forms Committee of existing, outdated SWPPP Review Ck List. Replaced with comprehensive Oversight of Construction Activity Permit, Guidance Doc for MS4s, released 3/23/2016. Coalition facilitated.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Procedures-review paper MS4 Construction Inspection Form for conversion to mobile device. BMP 7-7 Procedures & Forms Compendium-develop Coalition wide strategy for using MS4 Oversight/Construction Permit Guidance Document, discuss training in purpose/use for MS4s/consultants, incorporate into existing/future procedures (3 MS4s); note edits for future updates.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County			
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SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No Coalition goals for MCM 5. Instead, Coalition "Procedures" goals are located in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 7-7 Procedures & Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit- PARTIALLY COMPLETED. Coalition services provided to one MS4 led to overhaul by Forms Committee of existing, outdated SWPPP Review Ck List. Replaced with comprehensive Oversight of Construction Activity Permit, Guidance Doc for MS4s, released 3/23/2016. Coalition facilitated.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - load map layers named in Construction Activity Permit/Design Manual (also named in MS4 Guidance Doc - future BMP 4-2/5-5 SWPPP Review Procedures). BMP 5-8 Inventory Post Construction Practices - w/grant fund'g implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - w/ grant fund'g develop inspection forms for mobile devices.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

	1	2
--	---	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Salt Storage.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parks and Open Space.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Municipal Building.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

--	--	--	--	--
- Streets Swept (Number of miles X Number of times swept) # Miles 

--	--	--	--	--
- Catch Basins Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Pesticide/Herbicide Applied # Acres 

					.	
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 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

			1	3
--	--	--	---	---

**4. What was the date of the last training?**

1	0
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 / 

2	2
---	---

 / 

2	0	1	5
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**5. How many municipal employees have been trained in this reporting period?**

		2
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**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

--	--	--

 %



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County			
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SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No specific Coalition goals for MCM 6; instead Coalition staff as requested by individual members, directly assist MS4s in implementing MCM 6 goals. Coalition goals related to training are described in SWMPv3 MCM 8 Training. There various BMPs describe training topics and method of delivery.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

No clear goal statement for Coalition. See individual MS4 goals, for which Coalition staff provided services (Albany County, City of Albany, Village of Menands, Town of New Scotland, City of Watervliet).

**C. How many times was this observation measured or evaluated in this reporting period?**

			0
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): MCM 8 Train'g BMP 8-1 Clean Water Act Basics-Coalition program to 2 MS4 govern'g boards; 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards-1 MS4 Plan'g Board; BMP 8-4/8-5/8-6 replace as needed EXCAL visual DVDs (Spills & Skills, Rain Check, IDDE-A Grate Concern)/circulate to MS4s; BMP 8-17 On-line Training-assist Albany County SW Prog Tech.

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2016

Name of MS4 

Town of New Scotland
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SPDES ID  

NYR2	0A	463							
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Each MS4 must submit an MCC form.

**Section 1 - MCC Identification Page**

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

Stormwater	Coalition	of	Albany																

## MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 

2	0	1	6
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Name of MS4 

Town of New Scotland
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SPDES ID

N	Y	R	2	0	A	4	6	3
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### Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for *each* of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name 

D	o	u	g	l	a	s													
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 Last Name 

L	a	G	r	a	n	g	e												
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Title 

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Address 

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City 

S	l	i	n	g	e	r	l	a	n	d	s																												
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 State 

N	Y
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 Zip 

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eMail 

d	l	a	g	r	a	n	g	e	@	t	o	w	n	o	f	n	e	w	s	c	o	t	l	a	n	d	.	c	o	m									
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Phone 

(	5	1	8	)	4	3	9	-	4	8	8	9
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 County 

A	l	b	a	n	y														
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## MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

Town of New Scotland

SPDES ID

NYR20A463

### Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name	MI	Last Name
Jeremy	E	Cramer

Title  
Building Inspector

Address  
2029 new Scotland Road

City	State	Zip
Slingerland	NY	1 2 1 5 9 -

eMail  
jcramer@townofnewscotland.com

Phone	County
( 5 1 8 ) 4 3 9 - 9 1 5 3	Albany

**MS4 Municipal Compliance Certification (MCC) Form**

MCC form for period ending March 9, 2016

Name of MS4 

SPDES ID

N Y R 2 0 A 4 6 3

**Section 3 - Partner Information**

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S t o r m w a t e r C o a l i t i o n o f

Partner/Coalition Name (con't.)

A l b a n y C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 7 5 G r e e n S t r e e t - C o u n t y H e a l t h B l d g

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

N a n c y . H e i n z e n @ a l b a n y c o u n t y n y . g o v

Phone

( 5 1 8 ) 4 4 7 - 5 6 4 5

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?  Yes  No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

● MM1 P u b l i c a t i o n s - P r o g r a m s - W e b s i t e

● MM2 S W M P D o c u m e n t - W A V E - P u b l i c I n p u t

● MM3 A I M S I I - O R I K i t G r a n t : S t o r m M a p ' g

● MM4 C o n s t r u c t i o n O v r s i g h t - M S 4 F o r m s

● MM5 S W P s G r a n t : M a p - I n s p e c t i o n F o r m s

● MM6 T r a i n g : S t a f f - O f f i c i a l s M S 4 S v c s

Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID

**Section 4 - Certification Statement**

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name  MI  Last Name

Title (Clearly print title of individual signing report)

Signature

Date  
 /  /

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

20	16	
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463				
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### **Minimum Control Measure 1. Public Education and Outreach**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

1	
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### **1. Targeted Public Education and Outreach Best Management Practices**

Check all topics that were included in Education and Outreach during this reporting period:

- |   |   |
|---|---|
| <input checked="" type="radio"/> Construction Sites   | <input checked="" type="radio"/> Pesticide and Fertilizer Application |
| <input checked="" type="radio"/> General Stormwater Management Information                      | <input checked="" type="radio"/> Pet Waste Management                 |
| <input checked="" type="radio"/> Household Hazardous Waste Disposal                             | <input checked="" type="radio"/> Recycling                            |
| <input checked="" type="radio"/> Illicit Discharge Detection and Elimination                    | <input type="radio"/> Riparian Corridor Protection/Restoration        |
| <input checked="" type="radio"/> Infrastructure Maintenance                                     | <input checked="" type="radio"/> Trash Management                     |
| <input type="radio"/> Smart Growth  | <input checked="" type="radio"/> Vehicle Washing                      |
| <input type="radio"/> Storm Drain Marking   | <input type="radio"/> Water Conservation                              |
| <input checked="" type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development | <input type="radio"/> Wetland Protection                              |
| <input type="radio"/> Other:  | <input type="radio"/> None  |

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Other

### **2. Specific audiences targeted during this reporting period:**

- |   |   |
|---|---|
| <input checked="" type="radio"/> Public Employees | <input checked="" type="radio"/> Contractors    |
| <input checked="" type="radio"/> Residential      | <input checked="" type="radio"/> Developers     |
| <input type="radio"/> Businesses                  | <input checked="" type="radio"/> General Public |
| <input type="radio"/> Restaurants                 | <input type="radio"/> Industries                |
| <input type="radio"/> Other:                      | <input type="radio"/> Agricultural              |

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Other



### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- |   |                     |   |  |    |  |  |  |
|---|---------------------|---|--|----|--|--|--|
| <input type="radio"/> Construction Site Operators Trained | # Trained           | <table border="1" style="width: 100%;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>   |  |    |  |  |  |
|   |                     |   |  |    |  |  |  |
| <input checked="" type="radio"/> Direct Mailings          | # Mailings          | <table border="1" style="width: 100%;"><tr><td></td><td>1</td><td></td><td></td><td></td></tr></table>  |  | 1  |  |  |  |
|   | 1                   |   |  |    |  |  |  |
| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations         | <table border="1" style="width: 100%;"><tr><td></td><td>1</td><td></td><td></td><td></td></tr></table>  |  | 1  |  |  |  |
|   | 1                   |   |  |    |  |  |  |
| <input checked="" type="radio"/> List-Serves              | # In List           | <table border="1" style="width: 100%;"><tr><td></td><td>22</td><td></td><td></td><td></td></tr></table> |  | 22 |  |  |  |
|   | 22                  |   |  |    |  |  |  |
| <input type="radio"/> Mailing List                        | # In List           | <table border="1" style="width: 100%;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>   |  |    |  |  |  |
|   |                     |   |  |    |  |  |  |
| <input type="radio"/> Newspaper Ads or Articles           | # Days Run          | <table border="1" style="width: 100%;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>   |  |    |  |  |  |
|   |                     |   |  |    |  |  |  |
| <input type="radio"/> Public Events/Presentations         | # Attendees         | <table border="1" style="width: 100%;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>   |  |    |  |  |  |
|   |                     |   |  |    |  |  |  |
| <input type="radio"/> School Program                      | # Attendees         | <table border="1" style="width: 100%;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>   |  |    |  |  |  |
|   |                     |   |  |    |  |  |  |
| <input type="radio"/> TV Spot/Program                     | # Days Run          | <table border="1" style="width: 100%;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>   |  |    |  |  |  |
|   |                     |   |  |    |  |  |  |
| <input checked="" type="radio"/> Printed Materials:       | Total # Distributed | <table border="1" style="width: 100%;"><tr><td></td><td>24</td><td></td><td></td><td></td></tr></table> |  | 24 |  |  |  |
|   | 24                  |   |  |    |  |  |  |

Locations (e.g. libraries, town offices, kiosks)

Kiosk	TONS	Town Hall																		

Other:

Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL  

http://www.townofnewscotland.com
/162/stormwater-management

URL  

www.stormwateralbanycounty.org

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

3. Web Page cont.: Provide specific web addresses - not home page.

URL

URL

URL

URL

URL

URL

URL

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) 1-9 Produce letter signed by Town Supervisor and dist. septic system publication as direct mailing to approx. 550 residents identified in target audience. 2) 1-3 Staff will update their SW page as part of town website renovation. 3) 1-11 require all post const. SW Practices to require signage per ch. 3 of Design Manual. 4) research best use of town's new facebook page to communicate SW info. 5) Continue to maintain brochure rack.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) 1-9 letter signed by Town Supervisor and dist. septic system publication as direct mailing was distributed to 450 residents identified from Target Audience. 2) 1-3 Town SW page has been updated as part of town website renovation. 3) 1-12 Posted HHWD on Town face book page and website 5/5/2016 4) brochure rack maintained. 24 brochures distributed.

**C. How many times was this observation measured or evaluated in this reporting period?**

	1		
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) 1-3 Staff will continue to maintain and update SW website. 2) 1-11 all post construction practices to require signage as per ch.3 of design manual by 3/9/17 and photos be placed in SW file cabinet. 3) 1-12 SW staff will continue to post SW related posts to town facebook page. 4) 1-16 HHWD flyer with water quality message inserted to be displayed on town's SW web page and on bulliten board in Town Hall. 5) 1-17 Continue to maintain brochure rack and track amount distributed.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

**Minimum Control Measure 2. Public Involvement/Participation**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

**1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:**

- Cleanup Events # Events
- Comments on SWMP Received # Comments
- Community Hotlines
 

Phone # ( <input type="text" value="0"/> <input type="text" value="0"/> ) <input type="text" value="0"/> <input type="text" value="0"/> - <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	Phone # ( <input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="8"/> ) <input type="text" value="4"/> <input type="text" value="4"/> <input type="text" value="7"/> - <input type="text" value="5"/> <input type="text" value="6"/> <input type="text" value="4"/> <input type="text" value="5"/>
Phone # ( <input type="text" value="0"/> <input type="text" value="0"/> ) <input type="text" value="0"/> <input type="text" value="0"/> - <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	Phone # ( <input type="text" value="0"/> <input type="text" value="0"/> ) <input type="text" value="0"/> <input type="text" value="0"/> - <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>
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Phone # ( <input type="text" value="0"/> <input type="text" value="0"/> ) <input type="text" value="0"/> <input type="text" value="0"/> - <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	Phone # ( <input type="text" value="0"/> <input type="text" value="0"/> ) <input type="text" value="0"/> <input type="text" value="0"/> - <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>
Phone # ( <input type="text" value="0"/> <input type="text" value="0"/> ) <input type="text" value="0"/> <input type="text" value="0"/> - <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	Phone # ( <input type="text" value="0"/> <input type="text" value="0"/> ) <input type="text" value="0"/> <input type="text" value="0"/> - <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>
- Community Meetings # Attendees
- Plantings Sq. Ft.
- Storm Drain Markings # Drains
- Stakeholder Meetings # Attendees
- Volunteer Monitoring # Events
- Other:

**2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?**  Yes  No

- List-Serve # In List
- Newspaper Advertising # Days Run
- TV/Radio Notices # Days Run
- Other:

Web Page URL: Enter URL(s) on the following two pages.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

**2. URL(s) con't.:**

**Please provide specific address(es) where notice(s) can be accessed - not home page.**

URL

URL

URL

URL

URL

URL

URL

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

20	16		
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID 

NYR20A463				
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**2. URL(s) con't.:**

**Please provide specific address(es) where notices can be accessed - not home page.**

URL


URL


URL


URL


URL


URL


URL


### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition  SPDES ID

### 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

- MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department

Address

City  NY Zip

Phone

- Library  Annual Report  SWMP Plan  Comments

Address

City  Zip

Phone

- Other  Annual Report  SWMP Plan  Comments

Address

City  Zip

Phone

- Web Page URL:  Annual Report  SWMP Plan  Comments

Please provide specific address of page where report can be accessed - not home page.

- eMail  Comments

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland

SPDES ID

NYR20A46B

**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

05 / 04 / 2015

**4.b. For how many days was/will this report be posted?**

365

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**
 Yes  No

If Yes, what was the date of the meeting?

0 / 0 /

If No, is one planned?

 Yes  No
**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**
 Yes  No

If No, is one planned for each?

 Yes  No
**6. Were comments received during this reporting period?**
 Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6		
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) Update SWMP data managed using MS4web (CBI). 2) BMP 2-6 Clean up activities: Update Hazardous Household waste Day flier to include water quality message.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) Updated SWMP version 2 document for permit ending 2015 and developed SWMP version 3 for 2016 & 2017. 2) Included water quality message on HHWD flier and added manifest document of 2015 event to SW file cabinet. 3) 2-1 Updated public contact information for 2016 annual report. 4) 2-2 provided Town board with draft joint annual report and posted final joint annual report on town's SW website. 5) Reviewed existing written complaint procedures. No complaints or changes were made

**C. How many times was this observation measured or evaluated in this reporting period?**

	1		
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) 2-1 Update public contact infor for 2017 Annual report. 2) 2-2 Provide Town board with copy of Draft annual report and post final version of 2016 joint annual report for 2016. 3) Continue to include Water Quality Message on HHWD fliers.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition:

SPDES ID:

### Minimum Control Measure 3. Illicit Discharge Detection and Elimination

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. Enter the number and approx. percent of outfalls mapped:  #  %

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

- Auto Recyclers
- Building Maintenance
- Churches
- Commercial Carwashes
- Commercial Laundry/Dry Cleaners
- Construction Vehicle Washouts
- Cross-Connections
- Distribution Centers
- Food Processing Facilities
- Garbage Truck Washouts
- Hospitals
- Improper RV Waste Disposal
- Industrial Process Water
- Landscaping (Irrigation)
- Marinas
- Metal Plateing Operations
- Outdoor Fluid Storage
- Parking Lot Maintenance
- Printing
- Residential Carwashing
- Restaurants
- Schools and Universities
- Septic Maintenance
- Swimming Pools
- Vehicle Fueling
- Vehicle Maint./Repair Shops
- Other:
- None

Other: Residential Subdivisions

Sewersheds: Helderale Sewer District

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition:

SPDES ID: 

N	Y	R	2	0					
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#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:  None

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4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

0	
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5. How many illicit discharges have been confirmed during this reporting period?

0	
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6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

0	
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7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No  
If No, approximately what percent was completed in this reporting period?

100		%
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8. Is the above information available in GIS?  Yes  No  
Is this information available on the web?  Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

www.aimsgis.org/webmap/
** Restricted Access**
** Password Protected**

URL


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  
NYR20A463

**8. URL(s) con't.:**

Please provide specific address of page where map(s) can be accessed - not home page

URL


URL


URL


URL


URL


9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? ● Yes ○ No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? ● Yes ○ No ○ NT

11. What percent of staff in relevant positions and departments has received IDDE training?  %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) Continue to address complaints for failing septic systems and utilize ACDOH as needed. 2) Continue to be on alert for cross connections during routine building and fire inspections. 3) 3-5 Utilize ACSWC staff to locate and test any new or existing outfalls. 4) continue to monitor progress of floor drain discharge elimination and report back to D.E.C. when any progress occurs and notify them when discharge is eliminated. 5) 3-1 Confirm presence of existing and new outfalls and load into GIS system. 6) 3-4 Update storm system manning as needed

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) No new complaints of failing septic systems or cross connections found during this reporting cycle. 2) All new and existing outfalls were located and uploaded into GIS System (AIMS) and conducted ORI fieldwork for each. 3) Storm system mapping was updated and loaded into GIS system. (AIMS) 4) Town has system designed for floor drain discharge elimination in Town's highway garage and is currently working towards obtaining SPEDES permit through D.E.C. before installing oil water separator

**C. How many times was this observation measured or evaluated in this reporting period?**

	3		
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) Continue to monitor for failing septic systems and utilize ACDOH as needed. 2) Continue to be on alert for cross connections during routine building and fire inspections. 3) 3-4 review and update GIS system of storm system mapping for any new infrastructure built as needed. 4) 3-5 review and update outfall maps and inventory as needed.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

1	
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**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

5	
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**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

0	
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**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- Notices of Violation # 

		1		
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 No Authority
- Stop Work Orders # 

--	--	--	--	--

 No Authority
- Criminal Actions # 

--	--	--	--	--

 No Authority
- Termination of Contracts # 

--	--	--	--	--

 No Authority
- Administrative Fines # 

		1		
--	--	---	--	--

 No Authority
- Civil Penalties # 

--	--	--	--	--

 No Authority
- Administrative Orders # 

		1		
--	--	---	--	--

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--
- Other # 

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 No Authority

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

1		
---	--	--

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

3		
---	--	--

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

8		
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3. What percent of active construction sites were inspected during this reporting period?  NT 

87	
----	--

 %

4. What percent of active construction sites were inspected more than once?  NT 

63	
----	--

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

**6. con't.:**

Submit additional pages as needed.

● MS4/Coalition Office

Department

Address

City

Zip

Phone

○ Library

Address

City

Zip

Phone

○ Other

Address

City

Zip

Phone

○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) Conduct SWPPP reviews, site inspections, and enforcement of construction sites as described in our procedures and maintain records. 2) 4-7 post availability of NYSDEC approved 4 hour E-SC training for contractors on website and post on Town Hall bulliten board.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) Several projects were submitted for review with 3 SWPPP's receiving approvals. One complaint received from in house. 2) One verbal Notice of Violation and consent order administered. Project is currently seeking appropriate site plan approvals from the town and will be submitting SWPPP as part of the process. 3) All other active sites had zero complaints, inspections were made and verbal direction given to insure compliance. 4) 4-7 Two training events posted on town hall bulliten board.

**C. How many times was this observation measured or evaluated in this reporting period?**

	1	1		
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) Town will continue to conduct it's SWPPP reviews, site inspections, and enforcement as described in our procedures and maintain records in SW file located in town building dept. 2) 4-7 Continue to post availabilty of NYSDEC approved 4 hour E&SC training for contractors on website and post on town hall bulliton board.

### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,** 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of New Scotland

SPDES ID  
NYR20A463

### Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 1

**1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?**

	# Inventoried	# Inspections	# Times Maintained
<input type="radio"/> Alternative Practices			
<input type="radio"/> Filter Systems			
<input checked="" type="radio"/> Infiltration Basins	5	5	7
<input checked="" type="radio"/> Open Channels	4	4	3
<input checked="" type="radio"/> Ponds	3	3	0
<input type="radio"/> Wetlands			
<input type="radio"/> Other			

**2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?**  Yes  No

**3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?**

- Building Codes       Municipal Comprehensive Plans
- Overlay Districts     Open Space Preservation Program
- Zoning                   Local Law or Ordinance
- None                     Land Use Regulation/Zoning
- Watershed Plans       Other Comprehensive Plan

Other:

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**  
 Yes  No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**  
 Yes  No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**  
 Yes  No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**  

1	
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**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**  

75	
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 %

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) 5-3 TONS SW staff will use related updates to inform members of relevant boards of MS4 permit requirements regarding non structural stormwater management tools. 2) 5-4 TONS staff, when evaluating and possibly updating existing code language, will recommend utilizing the green infrastructure code language developed by "GILLAC" where considered appropriate. 3) 5-8 TONS SW Staff will update the inventory of post-construction practices and document.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) 5-3 Training of local officials is ongoing by SWO and certified zoning training seminars. 2) 5-4 Recommended green infrastructure code language developed by "GILLAC" to CDTC study of commercial zoning district update project. 3) 5-8 post-construction practices inventory updated 4) 5-9 TONS SW staff has started to develop a set of documents to describe maintenance procedures for post construction practices. 5) 5-12 TONS SW staff continues to maintain necessary post-construction records as necessary

**C. How many times was this observation measured or evaluated in this reporting period?**

	5		
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) 5-3 TONS SW staff will work with Coalition to conduct a training seminar to update town boards of non structural SW tools with emphasis on Clean water act basics. 2) 5-4 TONS SW staff will continue to utilizing the green infrastructure code language developed by "GILLAC" where appropriate and when updating existing code. 3) 5-8 Staff will continue to update the inventory of post const. practices when new practices are dedicated. 4) 5-9 Continue to develop maintenance procedures for post const. practices. 5) 5-12 Staff will cont. to maintain post-const. practice records

### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9, 2016**

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

### Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9, 2016**

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres
  - Streets Swept (Number of miles X Number of times swept) # Miles
  - Catch Basins Inspected and Cleaned Where Necessary #
  - Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #
  - Phosphorus Applied In Chemical Fertilizer # Lbs.
  - Nitrogen Applied In Chemical Fertilizer # Lbs.
  - Pesticide/Herbicide Applied # Acres
- (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

**4. What was the date of the last training?**   /   /

**5. How many municipal employees have been trained in this reporting period?**

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**   %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

20	16		
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

NYR20A463					
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) 6-1 evaluate town facility inventory, determine if self audit is necessary. 2) 6-2 evaluate new facilities, add inventory, determine if self-audit is necessary. 3) 6-3 SW staff document # of town catch basins and inspect 50% and clean if necessary. 4) 6-4 staff to doc. total town rd miles, parking lots, and sweep 50%. 5) 6-8 staff track # of HHWD events, collect data reports. 6) 6-11 SW staff will consider G.I. for conveyance upgrades. 7) 6-15 Continue to sweep, remove salt from loading area after storms 8) 6-19 evaluate issue design at HW garage 9) 6-25 review Third party cert

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) 6-1 All facilities have been evaluated within 3 years. 2) 6-2 No new facilities. 3) Town inspected 25 catch basins and cleaned if necessary. 4) 6-4 Town swept 100 road miles. 5) 6-8 One HHWD event, data report collected. 6) 6-11 no new conveyance upgrades. 7) Salt loading area swept and salt removed after storms. 8) 6-19 Design for HW garage developed and working towards obtaining SPEDES permit before construction of upgrades. 9) 6-25 continued to document 3rd party certification

**C. How many times was this observation measured or evaluated in this reporting period?**

	7	
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) 6-1 & 6-2 evaluate all new and existing town facilities and conduct self audit as necessary. 2) 6-3 update and document the # of town catch basins. Inspect 50% and clean as necessary. 3) 6-4 update and document total road miles and parking lot acres and sweep at least 50%. 4) continue to document # of HHWD events and collect data reports for file. 5) 6-15 continue to sweep and remove excess salt from loading areas as described in HW BMP. 6) 6-19 Obtain SPEDES permit for HW garage and construct design for eliminating floor drain discharge issue. 7) Indate. doc 3rd party cert.



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID  

N	Y	R	2	0					
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### Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

	1	2
--	---	---

#### 1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- Construction Sites
- General Stormwater Management Information
- Household Hazardous Waste Disposal
- Illicit Discharge Detection and Elimination
- Infrastructure Maintenance
- Smart Growth
- Storm Drain Marking
- Green Infrastructure/Better Site Design/Low Impact Development
- Other:
- Pesticide and Fertilizer Application
- Pet Waste Management
- Recycling
- Riparian Corridor Protection/Restoration
- Trash Management
- Vehicle Washing
- Water Conservation
- Wetland Protection
- None

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
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Other

#### 2. Specific audiences targeted during this reporting period:

- Public Employees
- Residential
- Businesses
- Restaurants
- Other:
- Contractors
- Developers
- General Public
- Industries
- Agricultural

E	l	e	c	t	e	d	s	/	P	u	b	l	i	c	-	C	l	e	a	n	W	a	t	e	r	A	c	t	I	n	f	o
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Other

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																			
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SPDES ID  

N	Y	R	2	0					
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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- Construction Site Operators Trained # Trained 

			6	4
--	--	--	---	---
- Direct Mailings # Mailings 

--	--	--	--	--
- Kiosks or Other Displays # Locations 

				8
--	--	--	--	---
- List-Serves # In List 

		4	8	0
--	--	---	---	---
- Mailing List # In List 

--	--	--	--	--
- Newspaper Ads or Articles # Days Run 

--	--	--	--	--
- Public Events/Presentations # Attendees 

		1	5	0
--	--	---	---	---
- School Program # Attendees 

--	--	--	--	--
- TV Spot/Program # Days Run 

--	--	--	--	--
- Printed Materials: Total # Distributed 

		2	2	8
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Locations (e.g. libraries, town offices, kiosks)

T	a	b	l	i	n	g	-	M	H	L	C	S	o	l	s	t	i	c	e
G	o	v	e	r	n	i	n	g		B	o	a	r	d		M	t	g	s
T	r	a	i	n	i	n	g	s	-	P	u	b	l	i	c	P	r	o	g

Other:

H	o	s	t		3		C	W	P		W	e	b	c	a	s	t	s	
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID

N	Y	R	2	0				
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM1 Coalition goals by BMPs...BMP 1-1 Target Audience Analysis Worksheet (TAAW): add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, create 1 new doc (plant care).

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 1-1 Target Audience Analysis Worksheet (TAAW): add sub-watershed delineations to Map Set; clarify directions-COMPLETED. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info-COMPLETED. BMP 1-7 List Serve: update municipal contacts-NOT COMPLETED (No time/grant writing). BMP 1-4 Publications: maintain inventory-COMPLETED; create 1 new doc (plant care)-NOT COMPLETED (too hard).

**C. How many times was this observation measured or evaluated in this reporting period?**

			4
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 1-1 Target Audience Analysis Wksheet - support MS4 efforts to update their TAAW; id target audience, draft & implement goals; BMP 1-3 Website-post routine Coalition events, update text of Home Page. BMP 1-7 List Serve - update contacts (newly elected, Plan'g Bd, MS4 staff, consultants, webcast audience). BMP 1-6 Public Program-Guest Spker-present Clean Water Act Basics & Green Infrastructure Program to MS4 Electeds/Plan'g Bd.



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

www.stormwateralbanycounty.org

URL

URL

URL

URL

URL

URL

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition  SPDES ID 

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### 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department  
S t o r m w a t e r C o a l i t i o n - A l b a n y C n t y

Address  
1 7 5 G r e e n S t r e e t - C n t y H e a l t h B l d g

City Albany NY Zip 1 2 2 0 2 -

Phone ( 5 1 8 ) 4 4 7 - 5 6 4 5

Library  Annual Report  SWMP Plan  Comments

Address

City Zip

Phone ( ) -

Other  Annual Report  SWMP Plan  Comments

Address

City Zip

Phone ( ) -

Web Page URL:  Annual Report  SWMP Plan  Comments

w w w . s t o r m w a t e r a l b a n y c o u n t y . o r g

Please provide specific address of page where report can be accessed - not home page.

eMail  Comments

s w c o a l i t i o n @ a l b a n y c o u n t y . c o m

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID									
N	Y	R	2	0					

**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

0	5
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 / 

0	6
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 / 

2	0	1	6
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**4.b. For how many days was/will this report be posted?**

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

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 / 

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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SPDES ID

N	Y	R	2	0					
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM 2 Coalition goals by BMPs... BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website - PARTIALLY COMPLETED, circulated flyer at public program promoting website, did not highlight public comment portal, did highlight maps posted on website. Increasingly website is used by Coalition members to access internal forms and documents. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers-COMPLETED, time consuming to locate sites, but worth the effort.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 2-2 Annual Report-combine Joint SWMP document update (BMPs/Goals) with prep of Annual Report, meet w/all members, post AR & SWMP on website. BMP 2-8 Student Water Quality Projects-coordinate with U Albany mapping projects named in WQIP Rnd 12 grant workplan, secure professor/student support, start projects, \$/credits. BMP 2-11 WAVE-monitor 4 sites w/volunteers.



### **MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,** 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  

N	Y	R	2	0				
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### **Minimum Control Measure 3. Illicit Discharge Detection and Elimination**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 12

**1. Enter the number and approx. percent of outfalls mapped:**  #  %

**2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?**

**3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?**

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input type="radio"/> Auto Recyclers</li> <li><input type="radio"/> Building Maintenance</li> <li><input type="radio"/> Churches</li> <li><input type="radio"/> Commercial Carwashes</li> <li><input type="radio"/> Commercial Laundry/Dry Cleaners</li> <li><input type="radio"/> Construction Vehicle Washouts</li> <li><input type="radio"/> Cross-Connections</li> <li><input type="radio"/> Distribution Centers</li> <li><input type="radio"/> Food Processing Facilities</li> <li><input type="radio"/> Garbage Truck Washouts</li> <li><input type="radio"/> Hospitals</li> <li><input type="radio"/> Improper RV Waste Disposal</li> <li><input type="radio"/> Industrial Process Water</li> <li><input type="radio"/> Other:</li> </ul> | <ul style="list-style-type: none"> <li><input type="radio"/> Landscaping (Irrigation)</li> <li><input type="radio"/> Marinas</li> <li><input type="radio"/> Metal Plateing Operations</li> <li><input type="radio"/> Outdoor Fluid Storage</li> <li><input type="radio"/> Parking Lot Maintenance</li> <li><input type="radio"/> Printing</li> <li><input type="radio"/> Residential Carwashing</li> <li><input type="radio"/> Restaurants</li> <li><input type="radio"/> Schools and Universities</li> <li><input type="radio"/> Septic Maintenance</li> <li><input type="radio"/> Swimming Pools</li> <li><input type="radio"/> Vehicle Fueling</li> <li><input type="radio"/> Vehicle Maint./Repair Shops</li> <li><input type="radio"/> None</li> </ul> |
|--|---|

Sewersheds:

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:
- None

Grid for other discharge types

#### 4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

Grid for number of discharges

#### 5. How many illicit discharges have been confirmed during this reporting period?

Grid for number of confirmed discharges

#### 6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

Grid for number of eliminated discharges

#### 7. Has the storm sewershed mapping been completed in this reporting period? Yes No

If No, approximately what percent was completed in this reporting period?  %

#### 8. Is the above information available in GIS? Yes No

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

Grid for URL: Password Protected www.aimsgis.org/webmap/ Restricted Access

URL

Grid for additional URL

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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SPDES ID  

N	Y	R	2	0					
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM 3 Coalition goals by BMPs... BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 3-2 AIMS: Coalition decides what to do about AIMS-COMPLETED, Board agreed to fund update of mapper, consultant services secured, members responded to survey/attended meetings to id problems with AIMS and design needs, research of current web mapper technology incorporated into grant application and workplan. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures-COMPLETED, Coalition staff will continue to assist if asked.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes     No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes     No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - support mapper redesign as guided by consultant, organize 2 to 3 design wkshops for members, integrate mapper redesign with other MS4 program needs (grant funded mobile app field inspection forms for ORI, MS4 construction site inspections, post construction sw practices inspections, facility self audits), prep mapper layers, launch mapper. BMP 3-5 Dry Weather (ORI)-manage ORI kits, restock.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No Coalition goals for MCM 4. Instead, Coalition "Procedures" goals are located in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 7-7 Procedures & Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit- PARTIALLY COMPLETED. Coalition services provided to one MS4 led to overhaul by Forms Committee of existing, outdated SWPPP Review Ck List. Replaced with comprehensive Oversight of Construction Activity Permit, Guidance Doc for MS4s, released 3/23/2016. Coalition facilitated.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Procedures-review paper MS4 Construction Inspection Form for conversion to mobile device. BMP 7-7 Procedures & Forms Compendium-develop Coalition wide strategy for using MS4 Oversight/Construction Permit Guidance Document, discuss training in purpose/use for MS4s/consultants, incorporate into existing/future procedures (3 MS4s); note edits for future updates.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County			
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SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No Coalition goals for MCM 5. Instead, Coalition "Procedures" goals are located in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 7-7 Procedures & Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit- PARTIALLY COMPLETED. Coalition services provided to one MS4 led to overhaul by Forms Committee of existing, outdated SWPPP Review Ck List. Replaced with comprehensive Oversight of Construction Activity Permit, Guidance Doc for MS4s, released 3/23/2016. Coalition facilitated.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - load map layers named in Construction Activity Permit/Design Manual (also named in MS4 Guidance Doc - future BMP 4-2/5-5 SWPPP Review Procedures). BMP 5-8 Inventory Post Construction Practices - w/grant fund'g implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - w/ grant fund'g develop inspection forms for mobile devices.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																			
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SPDES ID  

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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

	1	2
--	---	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Salt Storage.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parks and Open Space.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Municipal Building.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID

N	Y	R	2	0				
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

--	--	--	--	--
- Streets Swept (Number of miles X Number of times swept) # Miles 

--	--	--	--	--
- Catch Basins Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

					.	
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**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

			1	3
--	--	--	---	---

**4. What was the date of the last training?**

1	0	/	2	2	/	2	0	1	5
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**5. How many municipal employees have been trained in this reporting period?**

		2
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**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

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 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No specific Coalition goals for MCM 6; instead Coalition staff as requested by individual members, directly assist MS4s in implementing MCM 6 goals. Coalition goals related to training are described in SWMPv3 MCM 8 Training. There various BMPs describe training topics and method of delivery.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

No clear goal statement for Coalition. See individual MS4 goals, for which Coalition staff provided services (Albany County, City of Albany, Village of Menands, Town of New Scotland, City of Watervliet).

**C. How many times was this observation measured or evaluated in this reporting period?**

			0
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): MCM 8 Train'g BMP 8-1 Clean Water Act Basics-Coalition program to 2 MS4 govern'g boards; 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards-1 MS4 Plan'g Board; BMP 8-4/8-5/8-6 replace as needed EXCAL visual DVDs (Spills & Skills, Rain Check, IDDE-A Grate Concern)/circulate to MS4s; BMP 8-17 On-line Training-assist Albany County SW Prog Tech.



**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	6
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Name of MS4 

City of Watervliet
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SPDES ID

N	Y	R	2	0	A	0	8	7
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Each MS4 must submit an MCC form.

**Section 1 - MCC Identification Page**

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y	
C	o	u	n	t	y																									

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	6
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Name of MS4 

City of Watervliet
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SPDES ID  

N	Y	R	2	0	A	0	8	7
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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name 

M	i	c	h	a	e	l								
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 MI 

P
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 Last Name 

M	a	n	n	i	n	g								
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Title 

M	a	y	o	r															
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Address 

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City 

W	a	t	e	r	v	l	i	e	t						
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 State 

N	Y
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 Zip 

1	2	1	8	9	-			
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eMail 

m	m	a	n	n	i	n	g	@	w	a	t	e	r	v	l	i	e	t	.	c	o	m					
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Phone 

(	5	1	8	)	2	7	0	-	3	8	0	0
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 County 

A	l	b	a	n	y									
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# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 

2	0	1	6
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Name of MS4

SPDES ID  

N	Y	R	2	0	A	0	8	7
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## **Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name  MI  Last Name

Title

Address

City  State  Zip  -

eMail

Phone   -  County

# MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4 City of Watervliet

SPDES ID  
N Y R 2 0 A 0 8 7

## Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S t o r m w a t e r C o a l i t i o n o f A l b a n y

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 7 5 G r e e n S t e e t - C o u n t y H e a l t h B l d g

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

N a n c y . H e i n z e n @ a l b a n y c o u n t y n y . g o v

Phone

( 5 1 8 ) 4 4 7 - 5 6 4 5

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?  Yes  No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

- MM1 P u b l i c a t i o n s - P r o g r a m s - W e b s i t e
- MM2 S W M P D o c u m e n t - W A V E - P u b l i c I n p u t
- MM3 A I M S I I - O R I K i t G r a n t : S t o r m m a p ' g
- MM4 C o n s t r u c t i o n O v r s i g h t - M S 4 F o r m s
- MM5 S W P s G r a n t : M a p - I n s p e c t i o n f o r m s
- MM6 T r a i n g : S t a f f - O f f i c i a l s M s 4 S v c s

Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 6

Name of MS4

SPDES ID  
N Y R 2 0 A 0 8 7

**Section 4 - Certification Statement**

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name  MI  Last Name

Title (Clearly print title of individual signing report)

Signature

Date  
 /  /

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505

# MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet																			
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SPDES ID  

N	Y	R	2	0	A	0	8	7
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## Water Quality Trends

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s are contributed to this report? 

		1
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**1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One.**

Yes     No

If Yes, choose one of the following

- Report(s) attached to the annual report
- Web Page(s) where report(s) is/are provided below

Please provide specific address of page where report(s) can be accessed - not home page.

URL


URL


URL


URL




### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
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SPDES ID  

N	Y	R	2	0	A	0	8	7
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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- |  |                     |  |   |   |   |   |   |
|--|---------------------|--|---|---|---|---|---|
| <input type="radio"/> Construction Site Operators Trained    | # Trained           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Direct Mailings             | # Mailings          | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td>9</td><td>0</td><td>0</td></tr></table> |   |   | 9 | 0 | 0 |
|  |                     | 9  | 0 | 0 |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays    | # Locations         | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td>1</td></tr></table> |   |   |   |   | 1 |
|  |                     |  |   | 1 |   |   |   |
| <input type="radio"/> List-Serves                            | # In List           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Mailing List                           | # In List           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Newspaper Ads or Articles              | # Days Run          | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees         | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td>1</td><td>8</td><td> </td></tr></table> |   |   | 1 | 8 |   |
|  |                     | 1  | 8 |   |   |   |   |
| <input type="radio"/> School Program                         | # Attendees         | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> TV Spot/Program             | # Days Run          | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td>3</td><td>6</td><td>5</td></tr></table> |   |   | 3 | 6 | 5 |
|  |                     | 3  | 6 | 5 |   |   |   |
| <input checked="" type="radio"/> Printed Materials:          | Total # Distributed | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td>2</td><td>8</td><td> </td></tr></table> |   |   | 2 | 8 |   |
|  |                     | 2  | 8 |   |   |   |   |

Locations (e.g. libraries, town offices, kiosks)

C	i	t	y		H	a	l	l		B	r	o	c	h	u	r	e			
K	e	e	p		V	l	i	e	t		N	e	a	t		D	a	y		

Other:

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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet
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SPDES ID

N	Y	R	2	0	A	0	8	7
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The city was able to update and complete the Target Audience Analyst Worksheet (TAAW) to include the entire city. City still displays its stormwater brochure rack at city hall and hands out a stormwater info packet to all the volunteers at the "Keep Vliet Neat Day" event. City was able to stencil some of the catch basins as part of self audit. City continues to broadcast stormwater info on its dedicated Ch. 17 tv station.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

By completing the TAAW city will have a better plan for educating the public with the pollutants of concerns that are relative to the city as a whole. The City had 18 participants for the "Keep Vliet Neat Day" Spring cleanup event. City Stenciled various catch basins around their municipal buildings. It also handed out 900 door hangers to random residential and businesses throughout the city.

**C. How many times was this observation measured or evaluated in this reporting period?**

			4
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City will add a stormwater message to its promotion of the annual clean up event and electronic recycling days. The city will distribute a stormwater informational packet to participants of the spring cleanup and electronic recycling days. City will give Building Dept. various types of info pamphlets for people who come in for certain types of permits (ie Swimming pools, construction ect)

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

**Minimum Control Measure 2. Public Involvement/Participation**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

**1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:**

- Cleanup Events # Events
- Comments on SWMP Received # Comments
- Community Hotlines Phone # (    )   -
- Phone # (    )   -   Phone # (    )   -
- Phone # (    )   -   Phone # (    )   -
- Phone # (    )   -   Phone # (    )   -
- Phone # (    )   -   Phone # (    )   -
- Phone # (    )   -   Phone # (    )   -
- Community Meetings # Attendees
- Plantings Sq. Ft.
- Storm Drain Markings # Drains
- Stakeholder Meetings # Attendees
- Volunteer Monitoring # Events
- Other:

**2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?**  Yes  No

- List-Serve # In List
- Newspaper Advertising # Days Run
- TV/Radio Notices # Days Run
- Other:

Web Page URL: Enter URL(s) on the following two pages.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 0 8 7

#### 2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

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**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID								
N	Y	R	2	0				

**2. URL(s) con't.:**

**Please provide specific address(es) where notices can be accessed - not home page.**

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### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet																			
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SPDES ID

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### 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department  

W	a	t	e	r	v	l	i	e	t		F	i	l	t	e	r		P	l	a	n	t					
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 Zip

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Library  Annual Report  SWMP Plan  Comments

Address  

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City  

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Phone  

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Other  Annual Report  SWMP Plan  Comments

Address  

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City  

W	a	t	e	r	v	l	i	e	t																			
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 Zip

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Phone  

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Web Page URL:  Annual Report  SWMP Plan  Comments

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Please provide specific address of page where report can be accessed - not home page.

eMail  Comments


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
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SPDES ID

N	Y	R	2	0	A	0	8	7
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The City has updated its procedures on how to respond to question/complaints within the City's organization. The City continued its annual "Keep Vliet Neat Day" clean up event.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The updated procedures have helped the city process questions/complaints in a more effective way. The city had 18 volunteers for its spring clean up event.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The city will continue to organize and track number of volunteers for its annual spring cleanup event.



### **MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,** 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition City of Watervliet

SPDES ID

N Y R 2 0 A 0 8 7

### **Minimum Control Measure 3. Illicit Discharge Detection and Elimination**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?     1

**1. Enter the number and approx. percent of outfalls mapped:**     3 3 # 1 0 0 %

**2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?**   1 9

**3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?**

- |   |   |
|---|---|
| <input type="radio"/> Auto Recyclers                  | <input type="radio"/> Landscaping (Irrigation)    |
| <input checked="" type="radio"/> Building Maintenance | <input type="radio"/> Marinas                     |
| <input type="radio"/> Churches                        | <input type="radio"/> Metal Plateing Operations   |
| <input type="radio"/> Commercial Carwashes            | <input type="radio"/> Outdoor Fluid Storage       |
| <input type="radio"/> Commercial Laundry/Dry Cleaners | <input type="radio"/> Parking Lot Maintenance     |
| <input type="radio"/> Construction Vehicle Washouts   | <input type="radio"/> Printing                    |
| <input type="radio"/> Cross-Connections               | <input type="radio"/> Residential Carwashing      |
| <input type="radio"/> Distribution Centers            | <input type="radio"/> Restaurants                 |
| <input type="radio"/> Food Processing Facilities      | <input type="radio"/> Schools and Universities    |
| <input type="radio"/> Garbage Truck Washouts          | <input type="radio"/> Septic Maintenance          |
| <input type="radio"/> Hospitals                       | <input type="radio"/> Swimming Pools              |
| <input type="radio"/> Improper RV Waste Disposal      | <input type="radio"/> Vehicle Fueling             |
| <input type="radio"/> Industrial Process Water        | <input type="radio"/> Vehicle Maint./Repair Shops |

Other:  None

C o n s t r u c t i o n   S i t e s

Sewersheds:



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet																								
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SPDES ID  

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**8. URL(s) con't.:**

Please provide specific address of page where map(s) can be accessed - not home page

URL


URL


URL


URL


URL


**9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report?**       Yes    No

**10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law?**       Yes    No    NT

**11. What percent of staff in relevant positions and departments has received IDDE training?**

9	0
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 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	0	8	7
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The City had 1 sewer main backup that was caused by a blockage from various sanitary debris buildup and one IDDE of sediment that came from a small construction site.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The Sewer main backup was found and eliminated immediately. The construction site owner was made aware of the IDDE of sediment through a Notice of Violation. He then rectified the problem. The City has received a letter from it's attorney stating its IDDE local law is equivalent to DEC's modal law. The City has better tracking procedures for IDDE when they arise.

**C. How many times was this observation measured or evaluated in this reporting period?**

			3
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes     No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes     No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City will continue to review and update its existing outfall mapping. The City will review, update, track, and file IDDEs as they will arise. The City plans on continuing to work towards finishing the GIS of the storm system.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watevliet
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SPDES ID

N	Y	R	2	0	A	0	8	7
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
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**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

		0
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**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

		0
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**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- |  |   |   |  |   |  |  |   |                                    |
|--|---|---|--|---|--|--|---|------------------------------------|
| <input checked="" type="radio"/> Notices of Violation  | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table> |  |   |  |  | 1 | <input type="radio"/> No Authority |
|  |   |   |  | 1 |  |  |   |                                    |
| <input type="radio"/> Stop Work Orders                 | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Criminal Actions                 | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Termination of Contracts         | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Administrative Fines             | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Civil Penalties                  | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Administrative Orders            | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   |                                    |
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| <input type="radio"/> Other                            | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		0
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  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		0
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  3. What percent of active construction sites were inspected during this reporting period?  NT 

		0
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 %
  
  4. What percent of active construction sites were inspected more than once?  NT 

		0
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 %
  
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

**6. con't.:**

Submit additional pages as needed.

**● MS4/Coalition Office**

Department

Address

City

Zip

Phone

(  )  -

**○ Library**

Address

City

Zip

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Phone

(  )  -

**○ Other**

Address

City

Zip

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Phone

(  )  -

**○ Web Page URL(s):** Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The coalition was able to put together a new SWPPP review checklist packet. The city has incorporated this checklist and updated their SWPPP review procedures. The City is in the process of obtaining a letter from the attorney with regards to certifying our local law with respect to DEC's model law. The City had 0 SWPPPs for this reporting year.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Even though the City had 0 SWPPPs this year it did have to send a Notice of Violation to a developer of a small parcel lot due to sediment from his sight getting into the storm system.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

If the city has any new projects that require a SWPPP the city will look to use the new SWPPP review checklist packet as part of the review process.

### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9, 2016**

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition City of Watervliet

SPDES ID  
NYR20A087

### Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?   1

**1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?**

	# <b>Inventoried</b>	# <b>Inspections</b>	# Times <b>Maintained</b>
<input type="radio"/> Alternative Practices	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>
<input type="radio"/> Filter Systems	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>
<input type="radio"/> Infiltration Basins	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>
<input type="radio"/> Open Channels	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>
<input type="radio"/> Ponds	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>
<input type="radio"/> Wetlands	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span>
<input checked="" type="radio"/> Other	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;">0</span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;">3</span>	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;"> </span> <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px;">3</span>

**2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?**  Yes  No

**3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?**

- Building Codes       Municipal Comprehensive Plans
- Overlay Districts       Open Space Preservation Program
- Zoning                       Local Law or Ordinance
- None                           Land Use Regulation/Zoning
- Watershed Plans       Other Comprehensive Plan

Other:

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
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SPDES ID  

N	Y	R	2	0	A	0	8	7
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**

Yes     No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**

Yes     No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**

Yes     No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**

		0
--	--	---

**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

	7	5
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 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The City did not receive any new SWPPPs for the past year so no new practices were inventoried. The City did update their post construction practices inventory procedures. It is also in the process of obtaining a letter from the attorney stating the its local law is equivalent to DEC's model law. City continues to maintain the practices they are responsible for.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The City's practices they are responsible for (3 floatable treatment facilities) are cleaned each year pulling large amounts of floatables and sediment from storm system. The newly updated procedures will help streamline the effectiveness of collecting and inventorying new practices that come about.

**C. How many times was this observation measured or evaluated in this reporting period?**

			3
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City will continue to update its inventory list when new projects arise. It will also continue to clean any practices it owns and operates.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
--------------------

SPDES ID  

N	Y	R	2	0	A	0	8	7
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watevliet
-------------------

SPDES ID  

N	Y	R	2	0	A	0	8	7
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

				8
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

		8	7	0
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		1	0	5
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

				3
--	--	--	--	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

				0
--	--	--	--	---
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

			5	8
--	--	--	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

			2	.	3
--	--	--	---	---	---

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				1
--	--	--	--	---

**4. What was the date of the last training?**

0	3
---	---

 / 

0	3
---	---

 / 

2	0	1	6
---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

		9
--	--	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

	9	0
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The City now has 101 organic waste participants. It did 2 electronic recycling days. The city continues its street sweeping, parking lot and catch basin cleaning programs. City continues to review and complete BMP's that came from the facilities self audit. Training was conducted for municipal employees.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The facilities self audit BMP's that have been completed/updated this period were: Stenciling of various catch basins, written procedures for vehicle washing, written procedures for salt storage and handling, improved spill clean up kits. The City had 105 catch basins and 3 floatable treatment systems cleaned. The city had Nancy Heinzen (Stormwater Coalition Coordinator) do a "Clean Water Act Training" session at one of the City Council meetings. 9 Municipal employees trained.

**C. How many times was this observation measured or evaluated in this reporting period?**

			4
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP's from facility self audit's will continue to be evaluated and completed. City will hold trainings for its employees more geared toward facility maintenance, and IDDE. City will maintain sweeping and catch basin cleaning programs and their log books.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0					
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### Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

1	2
---	---

#### 1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- Construction Sites
- General Stormwater Management Information
- Household Hazardous Waste Disposal
- Illicit Discharge Detection and Elimination
- Infrastructure Maintenance
- Smart Growth
- Storm Drain Marking
- Green Infrastructure/Better Site Design/Low Impact Development
- Other:
- Pesticide and Fertilizer Application
- Pet Waste Management
- Recycling
- Riparian Corridor Protection/Restoration
- Trash Management
- Vehicle Washing
- Water Conservation
- Wetland Protection
- None

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
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Other

#### 2. Specific audiences targeted during this reporting period:

- Public Employees     Contractors
- Residential             Developers
- Businesses               General Public
- Restaurants             Industries
- Other:                     Agricultural

E	l	e	c	t	e	d	s	/	P	u	b	l	i	c	-	C	l	e	a	n	W	a	t	e	r	A	c	t	I	n	f	o
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Other



### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
---------------------------------------

SPDES ID  

N	Y	R	2	0					
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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- |  |                     |   |   |   |   |   |
|--|---------------------|---|---|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained           | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px; text-align: center;">6</td><td style="width: 20px; text-align: center;">4</td></tr></table>                      |   |   | 6 | 4 |
|  |                     | 6   | 4 |   |   |   |
| <input type="radio"/> Direct Mailings                                | # Mailings          | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>  |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays            | # Locations         | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px; text-align: center;">8</td></tr></table>   |   |   |   | 8 |
|  |                     |   | 8 |   |   |   |
| <input checked="" type="radio"/> List-Serves                         | # In List           | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">8</td><td style="width: 20px; text-align: center;">0</td></tr></table> |   | 4 | 8 | 0 |
|  | 4                   | 8   | 0 |   |   |   |
| <input type="radio"/> Mailing List                                   | # In List           | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>  |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input type="radio"/> Newspaper Ads or Articles                      | # Days Run          | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>  |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations         | # Attendees         | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">5</td><td style="width: 20px; text-align: center;">0</td></tr></table> |   | 1 | 5 | 0 |
|  | 1                   | 5   | 0 |   |   |   |
| <input type="radio"/> School Program                                 | # Attendees         | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>  |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input type="radio"/> TV Spot/Program                                | # Days Run          | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>  |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input checked="" type="radio"/> Printed Materials:                  | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td style="width: 20px;"></td><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">8</td></tr></table> |   | 2 | 2 | 8 |
|  | 2                   | 2   | 8 |   |   |   |

Locations (e.g. libraries, town offices, kiosks)

T	a	b	l	i	n	g	-	M	H	L	C	S	o	l	s	t	i	c	e	
G	o	v	e	r	n	i	n	g		B	o	a	r	d		M	t	g	s	
T	r	a	i	n	i	n	g	s	-	P	u	b	l	i	c	P	r	o	g	

Other:

H	o	s	t	3	C	W	P	W	e	b	c	a	s	t	s
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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URL


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID

N	Y	R	2	0				
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM1 Coalition goals by BMPs...BMP 1-1 Target Audience Analysis Worksheet (TAAW): add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, create 1 new doc (plant care).

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 1-1 Target Audience Analysis Worksheet (TAAW): add sub-watershed delineations to Map Set; clarify directions-COMPLETED. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info-COMPLETED. BMP 1-7 List Serve: update municipal contacts-NOT COMPLETED (No time/grant writing). BMP 1-4 Publications: maintain inventory-COMPLETED; create 1 new doc (plant care)-NOT COMPLETED (too hard).

**C. How many times was this observation measured or evaluated in this reporting period?**

			4
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 1-1 Target Audience Analysis Wksheet - support MS4 efforts to update their TAAW; id target audience, draft & implement goals; BMP 1-3 Website-post routine Coalition events, update text of Home Page. BMP 1-7 List Serve - update contacts (newly elected, Plan'g Bd, MS4 staff, consultants, webcast audience). BMP 1-6 Public Program-Guest Spker-present Clean Water Act Basics & Green Infrastructure Program to MS4 Electeds/Plan'g Bd.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,** [2][0][1][6]

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition [Stormwater Coalition of Albany County]

SPDES ID  
[N][Y][R][2][0][ ][ ][ ][ ][ ]

**Minimum Control Measure 2. Public Involvement/Participation**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? [ ] [1][ ] [2][ ]

**1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:**

- Cleanup Events # Events [ ][ ][ ][ ][ ][ ]
- Comments on SWMP Received # Comments [ ][ ][ ][ ][ ]0
- Community Hotlines  
Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ] Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ]  
Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ] Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ]  
Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ] Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ]  
Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ] Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ]  
Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ] Phone # ( [ ][ ][ ][ ] ) [ ][ ][ ][ ] - [ ][ ][ ][ ][ ]
- Community Meetings # Attendees [ ][ ][ ][ ][ ]
- Plantings Sq. Ft. [ ][ ][ ][ ][ ]
- Storm Drain Markings # Drains [ ][ ][ ][ ][ ]
- Stakeholder Meetings # Attendees [ ][ ][ ][ ][ ]
- Volunteer Monitoring # Events [ ][ ][ ][ ][ ]4
- Other: [C][o][o][r][d][i][n][a][t][e][ ] [w][/][ ] [D][E][C][ ] [W][A][V][E][ ] [P][r][o][g][r][a][m][ ]

**2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?**

Yes  No

- List-Serve # In List [ ][ ] [4][ ] [8][ ] [0][ ]
- Newspaper Advertising # Days Run [ ][ ][ ][ ][ ]
- TV/Radio Notices # Days Run [ ][ ][ ][ ][ ]
- Other: [ ]

● Web Page URL: Enter URL(s) on the following two pages.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  
N Y R 2 0

#### 2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

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URL


URL


URL


URL


URL


URL


### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition  SPDES ID

### 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

- MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department

Address

City   Zip

Phone

- Library  Annual Report  SWMP Plan  Comments

Address

City   Zip

Phone

- Other  Annual Report  SWMP Plan  Comments

Address

City   Zip

Phone

- Web Page URL:  Annual Report  SWMP Plan  Comments

Please provide specific address of page where report can be accessed - not home page.

- eMail  Comments

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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 SPDES ID 

N	Y	R	2	0					
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

0	5
---	---

 / 

0	6
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 / 

2	0	1	6
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**4.b. For how many days was/will this report be posted?**

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

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 / 

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM 2 Coalition goals by BMPs... BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website - PARTIALLY COMPLETED, circulated flyer at public program promoting website, did not highlight public comment portal, did highlight maps posted on website. Increasingly website is used by Coalition members to access internal forms and documents. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers-COMPLETED, time consuming to locate sites, but worth the effort.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 2-2 Annual Report-combine Joint SWMP document update (BMPs/Goals) with prep of Annual Report, meet w/all members, post AR & SWMP on website. BMP 2-8 Student Water Quality Projects-coordinate with U Albany mapping projects named in WQIP Rnd 12 grant workplan, secure professor/student support, start projects, \$/credits. BMP 2-11 WAVE-monitor 4 sites w/volunteers.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**Minimum Control Measure 3. Illicit Discharge Detection and Elimination**

The information in this section is being reported (check one):

On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report? 

	1	2
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1. Enter the number and approx. percent of outfalls mapped: 

--	--	--	--	--	--

 # 

--	--	--	--

 %

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? 

--	--	--

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

- |  |   |
|--|---|
| <input type="radio"/> Auto Recyclers<br><input type="radio"/> Building Maintenance<br><input type="radio"/> Churches<br><input type="radio"/> Commercial Carwashes<br><input type="radio"/> Commercial Laundry/Dry Cleaners<br><input type="radio"/> Construction Vehicle Washouts<br><input type="radio"/> Cross-Connections<br><input type="radio"/> Distribution Centers<br><input type="radio"/> Food Processing Facilities<br><input type="radio"/> Garbage Truck Washouts<br><input type="radio"/> Hospitals<br><input type="radio"/> Improper RV Waste Disposal<br><input type="radio"/> Industrial Process Water<br><input type="radio"/> Other:<br><table border="1" style="width: 100%; height: 20px; margin-top: 5px;"></table> | <input type="radio"/> Landscaping (Irrigation)<br><input type="radio"/> Marinas<br><input type="radio"/> Metal Plateing Operations<br><input type="radio"/> Outdoor Fluid Storage<br><input type="radio"/> Parking Lot Maintenance<br><input type="radio"/> Printing<br><input type="radio"/> Residential Carwashing<br><input type="radio"/> Restaurants<br><input type="radio"/> Schools and Universities<br><input type="radio"/> Septic Maintenance<br><input type="radio"/> Swimming Pools<br><input type="radio"/> Vehicle Fueling<br><input type="radio"/> Vehicle Maint./Repair Shops<br><input type="radio"/> None |
|--|---|

Sewersheds:

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### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:
- None

Grid for other discharge types

#### 4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

Grid for number of discharges

#### 5. How many illicit discharges have been confirmed during this reporting period?

Grid for number of confirmed discharges

#### 6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

Grid for number of eliminated discharges

#### 7. Has the storm sewershed mapping been completed in this reporting period? Yes No

If No, approximately what percent was completed in this reporting period?  %

#### 8. Is the above information available in GIS? Yes No

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

Grid for URL: Password Protected www.aimsgis.org/webmap/ Restricted Access

URL

Grid for additional URL information

## MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																			
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SPDES ID

N	Y	R	2	0							
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### 12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). Some MCM 3 Coalition goals by BMPs... BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

#### B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

BMP 3-2 AIMS: Coalition decides what to do about AIMS-COMPLETED, Board agreed to fund update of mapper, consultant services secured, members responded to survey/attended meetings to id problems with AIMS and design needs, research of current web mapper technology incorporated into grant application and workplan. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures-COMPLETED, Coalition staff will continue to assist if asked.

#### C. How many times was this observation measured or evaluated in this reporting period?

			2
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(ex.: samples/participants/events)

#### D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes     No

#### E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes     No

#### F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - support mapper redesign as guided by consultant, organize 2 to 3 design wkshops for members, integrate mapper redesign with other MS4 program needs (grant funded mobile app field inspection forms for ORI, MS4 construction site inspections, post construction sw practices inspections, facility self audits), prep mapper layers, launch mapper. BMP 3-5 Dry Weather (ORI)-manage ORI kits, restock.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County			
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SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No Coalition goals for MCM 4. Instead, Coalition "Procedures" goals are located in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 7-7 Procedures & Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit- PARTIALLY COMPLETED. Coalition services provided to one MS4 led to overhaul by Forms Committee of existing, outdated SWPPP Review Ck List. Replaced with comprehensive Oversight of Construction Activity Permit, Guidance Doc for MS4s, released 3/23/2016. Coalition facilitated.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Procedures-review paper MS4 Construction Inspection Form for conversion to mobile device. BMP 7-7 Procedures & Forms Compendium-develop Coalition wide strategy for using MS4 Oversight/Construction Permit Guidance Document, discuss training in purpose/use for MS4s/consultants, incorporate into existing/future procedures (3 MS4s); note edits for future updates.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County			
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SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No Coalition goals for MCM 5. Instead, Coalition "Procedures" goals are located in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

BMP 7-7 Procedures & Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit- PARTIALLY COMPLETED. Coalition services provided to one MS4 led to overhaul by Forms Committee of existing, outdated SWPPP Review Ck List. Replaced with comprehensive Oversight of Construction Activity Permit, Guidance Doc for MS4s, released 3/23/2016. Coalition facilitated.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - load map layers named in Construction Activity Permit/Design Manual (also named in MS4 Guidance Doc - future BMP 4-2/5-5 SWPPP Review Procedures). BMP 5-8 Inventory Post Construction Practices - w/grant fund'g implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - w/ grant fund'g develop inspection forms for mobile devices.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																			
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SPDES ID  

N	Y	R	2	0															
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

	1	2
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**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Salt Storage.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parks and Open Space.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Municipal Building.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

--	--	--	--	--
- Streets Swept (Number of miles X Number of times swept) # Miles 

--	--	--	--	--
- Catch Basins Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Pesticide/Herbicide Applied # Acres 

					.	
--	--	--	--	--	---	--

  
 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

			1	3
--	--	--	---	---

**4. What was the date of the last training?**

1	0
---	---

 / 

2	2
---	---

 / 

2	0	1	5
---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

		2
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**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

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 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	6
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Coalition has an updated Joint SWMP Plan SWMPv3 (2015-2017). No specific Coalition goals for MCM 6; instead Coalition staff as requested by individual members, directly assist MS4s in implementing MCM 6 goals. Coalition goals related to training are described in SWMPv3 MCM 8 Training. There various BMPs describe training topics and method of delivery.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

No clear goal statement for Coalition. See individual MS4 goals, for which Coalition staff provided services (Albany County, City of Albany, Village of Menands, Town of New Scotland, City of Watervliet).

**C. How many times was this observation measured or evaluated in this reporting period?**

			0
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

From SWMPv4 document (May, 2016): MCM 8 Train'g BMP 8-1 Clean Water Act Basics-Coalition program to 2 MS4 govern'g boards; 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards-1 MS4 Plan'g Board; BMP 8-4/8-5/8-6 replace as needed EXCAL visual DVDs (Spills & Skills, Rain Check, IDDE-A Grate Concern)/circulate to MS4s; BMP 8-17 On-line Training-assist Albany County SW Prog Tech.

### MS4 Annual Report Form

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Name of MS4/Coalition Stormwater Coalition of Albany County

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N Y R 2 0          

### Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?   1 2

**MS4s must answer the questions or check NA as indicated in the table below.**

MS4 Description	Answer	Check NA	(POC)
<b>NYC EOH Watershed</b>			
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
<b>Onondaga Lake Watershed</b>			
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
<b>Greenwood Lake Watershed</b>			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
<b>Oyster Bay</b>			
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
<b>Peconic Estuary</b>			
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
<b>Oscawana Lake Watershed</b>			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
<b>LI 27 Embayments</b>			
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

**1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?**  Yes  No  N/A

**2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?**  Yes  No  N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.       %

Estimate what percentage was mapped in this reporting period.       %



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Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program?  Yes  No  N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period? 

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 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more?  Yes  No  N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards?  Yes  No  N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading?  Yes  No  N/A

7b. How many projects have been sited in this reporting period? 

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7c. What percent of the projects included in 7b have been completed in this reporting period? 

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 %

7d. What percent of projects planned in previous years have been completed? 

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 %  
 No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands?  Yes  No  N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands?  Yes  No  N/A

### MS4 Annual Report Form

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Name of MS4/Coalition 

Stormwater Coalition of Albany County																													
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SPDES ID									
N	Y	R	2	0					

- 9. Has your MS4/Coalition developed and implemented a program of native planting?  
 Yes    No    N/A
  
- 10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?  
 Yes    No    N/A
  
- 11. Does your MS4/Coalition have a pet waste bag program?  
 Yes    No    N/A
  
- 12. Does your MS4/Coalition have a program to manage goose populations?  
 Yes    No    N/A