Stormwater Coalition of Albany County Joint Annual Report

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

Reporting Period March 10, 2016 to March 9, 2017

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 throughout the year To understand MS4 Permit requirements and related program activities, go to the NYSDEC website and/or the Coalition website: www.albanycountystormwater.com

HOW TO SUBMIT COMMENTS

1. Electronically using the Stormwater Coalition website "Public Comment" interface, <u>www.stormwateralbanycounty.org</u>.

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; <u>swcoalition@albanycounty.com</u> or phone; 447-5645.

OTHER INFORMATION

1. Hard copies of this Joint Annual Report are located at the Stormwater Coalition office, 175 Green Street, Albany, NY 12202 and at local MS4/municipal offices (see Annual Report MCM 2 Page 4 of 6 for address information).

2. If you'd like to learn more or get involved with various stormwater volunteer projects, call 447-5645 or e-mail swcoalition@albanycounty.com.

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 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 April, 2017 (SWMPv5 2015-2018). To view the SWMP Plan document, see Coalition website, Plan & Program tab.

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)



Stormwater Coalition of Albany County, 175 Green Street, Health Department Building, Albany, NY 12202 518-447-5645 www.stormwateralbanycounty.org

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 7

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

SPI	DES	ID				
Ν	Y	R	2	0		

Choose one:

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

Fill in SPDES ID in upper right hand corner.

Name of MS4

OR

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

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

Nar	nec	ofSi	ngle	En	tity		
		_					

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

S	t	0				t	е	r	 С	0		i	t	i	0	n	0	f	A	1	b	a	n	У
С	0	u	n	t	У																			

N Y R 2 0 A 3 5 9 SPDES ID N Y R 2 0 A 2 3 4 SPDES ID N Y R 2 0 A 4 6 4 SPDES ID N Y R 2 0 A 2 0 8 SPDES ID N Y R 2 0 A 2 0 8 SPDES ID N Y R 2 0 A 2 4 3 SPDES ID N Y R 2 0 A 2 4 3 SPDES ID N Y R 2 0 A 1 9 0	SPL	DES	ID													
N Y R 2 0 A 2 3 4 SPDES ID N Y R 2 0 A 4 6 4 SPDES ID N Y R 2 0 A 2 0 8 SPDES ID N Y R 2 0 A 2 0 8 SPDES ID N Y R 2 0 A 2 4 3 SPDES ID SPDES ID ID ID ID ID ID ID ID ID	N	Y	R	2	0	А	3	5	9							
SPDES ID N Y R 2 0 A 4 6 4 SPDES ID N Y R 2 0 A 2 0 8 SPDES ID ID ID ID ID ID ID ID N Y R 2 0 A 2 4 3 SPDES ID ID ID ID ID ID ID ID	SPI	DES	ID													
N Y R 2 0 A 4 6 4 SPDES ID ID ID ID ID ID ID ID ID N Y R 2 0 A 2 0 8 SPDES ID ID ID ID ID ID ID ID	N	Y	R	2	0	A	2	3	4							
SPDES ID N Y R 2 0 A 2 0 8 SPDES ID ID	SPL	SPDES ID														
N Y R 2 0 A 2 0 8 SPDES ID N Y R 2 0 A 2 4 3 SPDES ID SPDES ID ID ID ID ID ID ID	N	Y	R	2	0	A	4	6	4							
SPDES ID N Y R 2 0 A 2 4 3 SPDES ID	SPL	DES	ID													
N Y R 2 0 A 2 4 3 SPDES ID	N	Y	R	2	0	A	2	0	8							
SPDES ID	SPI	DES	ID													
	Ν	Y	R	2	0	A	2	4	3							
NYR20A190	SPI	DES	ID		_			_								
	N	Y	R	2	0	A	1	9	0							

SPL	DES	ID						
Ν	Y	R	2	0	Α	0	7	6
SPL)ES	ID						
N	Y	R	2	0	Α	3	7	7
SPL)ES	ID					-	
N	Y	R	2	0	Α	2	1	1
SPL	DES	ID						
N	Y	R	2	0	A	1	4	4
SPL	DES	D						
Ν	Y	R	2	0	A	4	6	3
SPE	DES	ID						
N	Y	R	2	0	Α	0	8	7

SPE	DES	ID					
Ν	Y	R	2	0	A		
SPI	DES						
Ν	Y	R	2	0	А		
SPL	DES						
Ν	Y	R	2	0	А		
SPL	DES	ID					
Ν	Y	R	2	0	А		
SPL	DES	ID					
Ν	Y	R	2	0	A		
SPI	DES	ID				 	
Ν	Y	R	2	0	A		

Cover Page 1 of 2

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 7

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

SPDE	ES	ID					
N	Y	R	2	0	А		
SPDE	ES	ID					······
N	Y	R	2	0	А		
SPDE	ES	ID					
N	Y	R	2	0	А		
SPDE	<u>ES</u>	ID ,					
N	Y	R	2	0	A		
SPDE	ŝS	ID			1	r	
N	Y	R	2	0	А		
SPDE	ES	ID					······
N	Y	R	2	0	А		
SPDE	<u>ES</u>	ID					
N	Y	R	2	0	A		
SPDE	ES	D				r	
N	Y	R	2	0	А		
SPDE	<u>ES</u>	ID					,
N	Y	R	2	0	A		
SPDE	ES	ID					·
N	Y	R	2	0	A		
SPDE	ES	ID					
N	Y	R	2	0	Α		
SPDE	ES	ID					······
N	Y	R	2	0	A		
SPDE	ES	ID		-			· · · · ·
N	Y	R	2	0	A		
SPDE	ES	ID					
N	Y	R	2	0	А		
SPDE	ES	ID					
N	Y	R	2	0	A		
SPDE	ΞS	ID			· ·		· · · · · · · · · · · · · · · · · · ·
N	Y	R	2	0	А		
SPDI	ES	ID		_			
N	Y	R	2	0	A		
SPDE	ES	ID					
N	Y	R	2	0	A		

							. 1.	
SPD	ES	D						
N	Y	R	2	0	A			
SPD	ES	ID						
Ν	Y	R	2	0	А			
SPD	ES	D						
N	Y	R	2	0	А			
SPD	ES	ID						
N	Y	R	2	0	А			
SPD	ES	ID						
N	Y	R	2	0	А			
SPD	ES	ID						
N	Y	R	2	0	А			
SPD	ES	ID		·····	•	·		······
Ν	Y	R	2	0	А			
SPD	ES	ID		••••••••				
N	Y	R	2	0	А			
SPD	ES	ID						,
N	Y	R	2	0	А			
SPD	ES	ID						
N	Y	R	2	0	А			
SPD	ES	ID						
N	Y	R	2	0	А			
SPD	ES	ID		,				
N	Y	R	2	0	A			
SPD	ES	D			•			
N	Y	R	2	0	A			
SPD	ES	D		•		•	•	l
N	Y	R	2	0	А			
SPD	ES	D			1			L;
N	Y	R	2	0	A			
SPD	ES	ID	L	L	.1	L	1	L!
N	Y	R	2	0	A			
SPD	ES	ID		L	1	í	L]
N	Y	R	2	0	A			
SPD	ES	D	.	ı	1	•		
N	Y	R	2	0	A			
⊾L			<u> </u>	I	.t	1	I	ا ـــــا

	-	-						
SPD		_		~	7		l	
N	Y	R	2	0	A			
SPD					i	1	1	
Ν	Υ	R	2	0	A			
SPD	ES	D						,
N	Y	R	2	0	A			
SPD	ES	ID		r	· · · ·			,;
Ν	Y	R	2	0	A			
SPD	ES	D						·
N	Y	R	2	0	A			
SPD	ES	D					,	
N	Y	R	2	0	A			
SPD	ES	ID						
N	Y	R	2	0	A			
SPD	ES	ID					1	L
Ν	Y	R	2	0	A			
SPD	ES	ID						
N	Y	R	2	0	7			
~`	-	17	2	0	A			
SPD			Ζ.	0	A			
			2	0	A	 		
SPD	ES Y	ID R			 			
SPD N	ES Y	ID R			 			
SPD N SPD	ES Y ES Y	ID R ID R	2	0	A			
SPD N SPD N	ES Y ES Y	ID R ID R	2	0	A			
SPD N SPD N SPD N SPD	ES Y ES Y ES Y	ID R ID R ID R	2	0	A			
SPD N SPD N SPD SPD	ES Y ES Y ES Y	ID R ID R ID R	2	0	A			
SPD N SPD N SPD N SPD	ES Y ES Y ES Y ES Y	ID R ID R ID R ID R	2 2 2	0	A A A			
SPD N SPD N SPD N SPD N	ES Y ES Y ES Y ES Y	ID R ID R ID R ID R	2 2 2	0	A A A			
SPD N SPD N SPD N SPD N SPD N SPD	ES Y ES Y ES Y ES Y ES Y ES Y	ID R ID R ID R ID R ID R	2 2 2 2	0 0 0 0	A A A			
SPD N SPD N SPD N SPD N SPD N	ES Y ES Y ES Y ES Y ES Y ES Y	ID R ID R ID R ID R ID R	2 2 2 2	0 0 0 0	A A A			
SPD N SPD N SPD N SPD N SPD N SPD N	ES Y ES Y ES Y ES Y ES Y ES Y ES Y	ID R ID R ID R ID R ID R ID R	2 2 2 2	0 0 0 0 0	A A A A			
SPD N SPD N SPD N SPD N SPD N SPD	ES Y ES Y ES Y ES Y ES Y ES Y ES Y	ID R ID R ID R ID R ID R ID R	2 2 2 2	0 0 0 0 0	A A A A			
SPD N SPD N SPD N SPD N SPD N SPD N SPD N	ES Y ES Y ES Y ES Y ES Y ES Y ES Y ES Y	ID R ID R ID R ID R ID R ID R ID R ID R	2 2 2 2 2	0 0 0 0 0 0	A A A A			
SPD N SPD N SPD N SPD N SPD N SPD N SPD N SPD	ES Y ES Y ES Y ES Y ES Y ES Y ES Y ES Y	ID R ID R ID R ID R ID R ID R ID R ID R	2 2 2 2 2	0 0 0 0 0 0	A A A A			
SPD N SPD N SPD N SPD N SPD N SPD N SPD N SPD N SPD	ES Y ES Y ES Y ES Y ES Y ES Y ES Y ES Y	ID R ID R ID R ID R ID R ID R ID R ID R	2 2 2 2 2 2 2	0 0 0 0 0	A A A A A			
SPD N SPD N SPD N SPD N SPD N SPD N SPD N SPD N SPD N SPD	ES Y ES Y ES Y ES Y ES Y ES Y ES Y ES Y	ID R ID R ID R ID R ID R ID R ID R ID R	2 2 2 2 2 2 2	0 0 0 0 0	A A A A A			

SPDES ID

Ν

YR

2 0 A

3 5 9

MCC form for period ending March 9, $2 \mid 0 \mid 1 \mid 7$

Name of MS4 ALBANY COUNTY

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:

O 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	0	r	m	w	а	t	е	r	С	0	a	1	ì	t	i	0	n	0	f	А	1	b	а	n	У
С	0	u	n	t	У																					

MCC form for period ending March 9, 2 0 1 7

Name of MS4	ALBANY COUNTY

SPI	DES	JD.						
Ν	Y	R	2	0	Α	3	5	9

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> 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
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

Firs	t Na	ame														МІ		Las	st Na	ame	9									
D	Α	Ν	Ι	Ε	L											P		М	C	C	0	Y								
Titl	е																													
С	0	υ	Ν	Т	Y		Ε	Х	Ε	С	U	т	Ι	v	Ε															
Ado	Ires	S																									_			
1	1	2		S	Т	А	т	Ε		S	Т	R	Ε	Ε	Т															
City	,																			S	state		Zip	`						
-10	1																			2	nuic			,						
A	Ŀ	В	А	Ν	Y															ì	Ŧ	Y	1	2	2	0	7			
A	L	В	A	N	Y												_			ì	Ť.	1			2	0	7			
	L	B N	A I	N E	Y		м	C	C	0	Y	@	A	L	В	A	- N	Y	C	ì	Ť.	1			2 N	0 Y	7		 v	
A eMa	L ail A				[•	M	C.	C	0	Y	@	A	L	В	A	N		C	0	N	Y	1	2	.I	1	T	_] 	 V	

MCC form for period ending March 9, 2 0 1

Name of MS4 ALBANY COUNTY

SPL	JE2	<u>ID</u>						
Ν	Y	R	2	0	Α	3	5	9

7

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:

O Principal Executive Officer/Chief Elected Official

- O Duly Authorized Representative
- O Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

Firs	t Na	ame														М		Las	st Na	ame												
S	С	0	Т	Т												D		D	U	N	C	A	N									
Titl	e																															
Α	С	Т	Ι	Ν	G		С	0	М	М	I	S	S	Ι	0	Ν	E	R	-		Ρ	ប	В	\mathbf{L}	Ι	С		W	0	R	K	S
Add	lres	s																														
4	4	9		N	E	Ŵ		S	А	L	Ε	М		R	0	А	D															
04																				S	tate		Zip	 1				• •••				
Cit	1																			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			- 214									
V	0	0	R	H	E	Е	S	V	I	L	L	Ε										Y	1	1	1	8	6] -				
	0	0	R	H	E	E	S	V	I	L	L	Ε	-										—	1	1	8	6] -		-		
V	0	0	R T	H T	E	E	S U	V N	I C	L	L N	E @	A	L	В	A	N	Y	C				—	1	1 N	8 Y	6] - G	0	v		
V eM	0 ail C				E								A	L	В	A	L	Y Coi	<u> </u>	0		Y	1	2	.t	.I	_I	.] 1	0	V		



1 7 SPDES ID

A 0

3 5 9

NYR2

MCC form for period ending March 9, 2 0 1

Name of MS4 ALBANY COUNTY

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> 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:

O Principal Executive Officer/Chief Elected Official

- O Duly Authorized Representative
- Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- Report Preparer

Firs	st Na	ime														MI	_	Las	t Na	ame						_						
L	А	U	R	Ã												R		D	Е	G	A	E	Т	А	Ν	0						
Titl	e									-																						
S	Е	Ν	Ι	0	R		Ν	Α	Т	U	R	А	L		R	Е	S	0	U	R	С	Е		Ρ	Г	A	Ν	N	E	R		
Add	fres	s																														
1	1	2		S	т	Α	Т	Ε		S	т	R	E	Έ	Т																	
City	y																			S	tate		Zip	,								
					-	1	[Γ.			-		7				
A	L	В	Α	Ν	Y															ľ	N 1	Y	1	2	2	0	7					
A eM:	ł	В	A	N	Y															1	N	Y	1	2	2	0	7					
I	ł	B U	A R	N A	У	D	E	G	A	Е	T	A	N	0	@	A	L	В	A	I N	Y	r C	0	ע 12	2 N	о Т	7 Y	- N	Y	•	G	0
eMa	ail A				Y .	D	E	G	A	Е	T	A	N	0	@	A	L	B		N	1						′]	Y	•	G	0

MCC Page 2

MCC form for period ending March 9, 2 0 1 7

SPDES ID

3 5 9

N Y R 2 0 A

Name of MS4 ALBANY COUNTY

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> 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:

O Principal Executive Officer/Chief Elected Official

- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name	MI Last Name
	H K U B E K
Title	
S T O R M W A T E R P R O G R	A M T E C H N I C I A N
Address	
4 4 7 N E W S A L E M R D	
City	State Zip
V O O R H E E S V I L L E	N Y 1 2 1 8 6 -
V O O R H E E S V I L L E	N Y 1 2 1 8 6 -
VOORHEESVILLE eMail	N Y 1 2 1 8 6 -

MCC form for period ending March 9, 2 0 1 7

Name of MS4 ALBANY COUNTY

SPDES ID N Y R 2 0 A 3

5 9

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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.

Par	tner.	/Co	aliti	onl	Jam	e																										
S	Т	0	R	М	W	A	Т	Е	R		С	0	А	L	I	т	I	0	Ñ		0	F		А	L	в	A	Ν	Y			
Par	tner	/Co	aliti	ion 1	Nam	ne(c	on't	.)																SPI	DES	Par	tne	r ID	- If	app	lica	ble
C	0	U	N	Т	Y																			N	Y	R	2	0				
Add	ires	<u> </u>		r			···																									
1	7	5		G	R	Ε	Ε	Ν		S	Т		-		С	0	U	Ν	Т	Y		Η	Е	A	L	Т	Н		В	L	D	G
Cit	y .						_													St	ate	_	Zip									
A	L	В	Α	N	Y															N	1 Y		1	2	2	0	2	-				
eMa	ail																			,												
N	a	n	С	У		Η	е	i	n	z	е	n	@	a	1	b	а	n	У	С	0	u	n	t	У	n	У		g	о	v	
Pho	ne			1				1	r			, · ·	1						Le	gall	v Bi	indi	ng /	\ ore	em	ent i	n ac	cor	dan	ce		
(5	1	8)	4	4	7	-	5	6	4	5														V.G.			Ye		0	No
ωл	hat :	tac	re/1	rect	nn	eih	:1:+;	60	ore	cho	rec	1	ith	thic	n ng	urtn	er (é a	- M	EN E	1 C	cho	പ	Dro	ara	me	or	$\mathbf{M}_{\mathbf{H}}$	ltir	ا ھا د	Гас	sks)'
** 1	lat	tao.	1.0/1	(CS]		510			are	3110		1 **		¢III.	p po			0.g	,• 1¥.		1.0		01		gra		01	1410	ուդ	<i>л</i> с	rac	
• 1	ИM	1	Ρ	u	b	1	i	С	а	t	i	0	n	ន	-	Ρ	r	0	g	r	а	m	s	-	W	e	b	ន	i	t	е	
• N	ИΜ	2	S	W	М	Р	D	0	С	u	m	е	n	t	_	W	A	v	Е	_	Р	u	b	1	i	С	I	n	p	u	t	
		1			L		L													I					i	I	L		- 1			
• 1	MМ	3	S	W	Ι	М	Ŵ	е	b	М	a	р	р	е	r	R	е	đ	e	ន	i	g	n	-	0	R	I	K.	i.	t	S	
• N	ΜМ	4	S	w	Ι	М	W	е	b	М	a	р	р	е	r	_	S	W	P	P	Р	R	е	v	i	е	w	L	a	y	r	s
												*							 				· · · · · ·			I	 _````	[]	i	<u> </u>		
• 1	MМ	5	Ρ	0	ទ	t	С	0	n	ន	S	Μ	Ρ	ន	-	М	а	р	g	P	r	е	р	-	I	n	v	n	t	0	r	У
• I	MМ	6	т	r	a	i	n	g	:	D	v	D	ន	C	0	u	r	ន	e	ន	P	r	е	ន	е	n	t	r	М	t	g	s
		1			L		L									L								1				1			-	

Additional tasks/responsibilities

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

SPDES ID

0 A

3

5 9

NYR2

MCC form for period ending March 9, 2 0 1 7

Name of MS4 ALBANY COUNTY

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	ΜI	Last Name	
DANIEL	Р	MCCOY	
Title (Clearly print title of individual signing report)			
C O U N T Y E X E C U T I V E	-		
Signature			
Daniel P. Mc Cop		Date	
		051221201	7

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

This report is being submitted for the reporting period ending March 9, 2 0 7

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

SPDES ID YR

Ν

2

0 A

5

9

No

3

ALBANY COUNTY Name of MS4/Coalition

Water Quality Trends

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

On behalf of an individual MS4

 \bigcirc On behalf of a coalition

How many MS4s are contributed to this report?

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. O Yes

If Yes, choose one of the following

O Report(s) attached to the annual report

O 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.

UR	L									 										
																		_		
URI	L.			 			,												·	
UR	L		·	 				 												
																			1	
UR	L.						• • • • • • • • • • • • • • • • • • • •	 	 											
	Ī											-								
	•			 	· · ·	 		 	 	 			·		•	• • • • • •	 .		 	

Water Quality Trends Page 1 of 1

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

Ν

1

Y R 2 0 A

3 5 9

Name of MS4/Coalition ALBANY COUNTY

Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

1.	Targeted	Public	Education	and	Outreach	Best	Managemen	t Practices

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

Construction Sites	• Pesticide and Fertilizer Application
○ General Stormwater Management Information	O Pet Waste Management
O Household Hazardous Waste Disposal	O Recycling
Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
○ Infrastructure Maintenance	Trash Management
O Smart Growth	O Vehicle Washing
Storm Drain Marking	O Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
O Other: Other Other 2. Specific audiences targeted during this reporting period:	O None
Public Employees O Contractors	
• Residential • Developers	
○ Businesses ● General Public	
Restaurants O Industries	
• Other: • Agricultural	
Other	

MCM 1 Page 1 of 4

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 7$

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

Name of MS4/Coalition

ALBANY	CO	UN	Т	Y

SPL	DES	ID						
N	Y	R	2	0	A	3	5	9

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

O Con	• Construction Site Operators Trained #Trained													ed [
O Dire	Direct Mailings #Mailings																														
Kios	P Kiosks or Other Displays # Locations																		1												
O List	List-Serves # In List																														
O Mai	Mailing List # In List																														
New	Newspaper Ads or Articles # Days Run																	2	8												
O Pub	Public Events/Presentations #Attendees																														
⊖ Sch	School Program # Attendees																														
ο tv	> School Program # Attendees > TV Spot/Program # Days Run																														
	• Printed Materials: Total # Distributed																														
I Г	Printed Materials: Iotal # Distributed																														
																										•					
Ĺ																															
○ Oth	er:																		, .												
🖲 Wel) Pa	ige:		Pro	vid	e st	seci	fic	weł	o ad	dre	sse	s - 1	not	hon	ne p	bage	e. (Cont	tinu	e o	n ne	ext	pag	e if	ado	litio	onal	l sp:	ace	is
URL				nee	ded	l. [–]																									
h	t	t	р	:	/	/	w	W	w	•	a	1	b	a	n	У	С	0	u	n	t	У		С	0	m	/	G	0	v	е
r	n	m	е	n	t.	/	D	е	р	а	r	t	m	e	n	t	ន	1	D	е	p	a	r	t	m	е	n	t	0	f	Ρ
u	b	1	i	С	W	0	r	k	ន	1	S	t	0	r	m	w	а	t	е	r	М	a	n	а	g	е	m	e	n	t	·
URL	,																														
a	ន	р	x																												
															1									ĺ							
. L	{		I	L		L	I	l	<u> </u>																l	l	l			L	L

This report is being submitted for the reporting period ending March 9, 2	0	1	7
---	---	---	---

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

	SPE	DES	ID						
Name of MS4/Coalition ALBANY COUNTY	N	Y	R	2	0	A	3	5	9

3. Web Page con't.: Provide specific web addresses - not home page.

URI		·		,			•			_			,								- ~										
h	t	t	p	:	1	/	Ŵ	w	w	•	a	1	b	a	n	У	С	0	u	n	t	У		С	0	m	1	G	0	v	е
r	n	m	e	n	t	1	D	е	p	a	r	t	m	е	n	t	s	1	D	е	p	t		Е	С	0	n	0	m	i	С
D	е	v	е	1	0	p	m	e	n	t	C	0	n	s	е	r	v	a	t	li	0	n	a	n	đ	Р	1	a	n	i	n
URI	,							•		• • • •	****						·				r		L							<i>,</i>	
g	1	S	t	0	r	m	W	a	t	e	r	Р	r	0	g	r	a	m	С	0	0	r	d	i	n	a	t	0	r		а
s	p	x											ļ																		
																				[
URL	,	• • • •								•									r	<u>ا</u>							1				
h	t	t	р	:	/	1	w	w	w	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	а	n	У	G	0	u	n	t
У	•	0	r	g	/	ន	t	0	r	m	w	a	t	е	r	-	С	0	а	1	i	t	i	0	n	1	m	u	n	i	С
i	p	a	1	i	t	i	е	ន	1	a	1	b	a	n	У	_	С	0	u	n	t	У	/								
URL	,																										1				d
URL		L]								L			[l											[
					l																										_
			1																												
URL																															
																												_			
					<u> </u>			1																							
URL							1			1	1		1							·1			1			t		T		<u> </u>	
				Ī																											

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition ALBANY COUNTY

SPL	DES	Ð						
Ν	Y	R	2	0	А	3	5	9

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.

County maintains website with current information about its program, including information regarding stormwater hotline, which is answered 24 hours on a rotating basis by highway foremen. Link back to Coalition website maintained.

Develop an online training module to reach County personnel and contractors in irregular shifts.

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

DPW stormwater page updated to include 24-hour hotline information and link to Coalition website revised to ensure functionality (April 2017).

The feasibility of an online training module for Stormwater Pollution Prevention was discussed but requires further review with Information Services as it may be problematic to reliably administer. Goal may be dropped or revised depending on outcome.

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

				1	
(ex.:	samples.	/par	ticij	pant	s/events)

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

• Yes O No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? OYes • No

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

Continue to maintain updated website, including ensuring that personnel and contact information changes are correctly reflected and new information about the program is added.

Pending determination of feasibility of online training module, continue to rely upon department management to disseminate information regarding stormwater program to subordinate staff.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition ALBANY COUNTY

 SPDES ID

 N
 Y
 R
 2
 0
 A
 3
 5
 9

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.

By 3/9/17, complete Target Audience Analysis outreach activities based on revised Target Audience Analysis process recently updated by the Stormwater Coalition. An educational display will be developed for the Albany County Office Building highlighting water quality issue caused by stormwater runoff and ways to address, with brochures for distribution. At least 9 new stormwater catchbasins stencils will be installed on County roads or properties.

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

Storm drain markers were installed on 20 catchbasins in the Target Audience areas (Fuller, Albany Shaker, Osborne and Everett Roads in the Patroon and Krumkill Creek watersheds), particularly near restaurants, gas stations and dry cleaning businesses. An educational display was developed for the Albany County Office Building highlighting water quality issue caused by stormwater runoff and ways to address them, although brochure distribution was not practical due to space limitations.

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

		1	-
(ex.:	samples/par	ticipants	/events)

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

Yes O No

O Yes ● No

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

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

An additional 10 storm drain markers will be placed in the Target Audience area. Other tasks from the Target Audience Analysis have been dropped, as the County plans to focus resources on employees as its primary public, consistent with the permit. An additional four announcements or tips will appear quarterly in the County Executive weekly newsletter. Location of existing display will rotate between different County facilities to ensure that as many employees as possible view it.

<u>MS4 Annual Report Fo</u>	orm
This report is being submitted for the reporting perio	d ending March 9,

1 7

2 | 0

2 0 A 3 5 9

SPDES ID

Ν

1

YR

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

Name of MS4/Coalition ALBANY COUNTY

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:

O Cleanup Events	# Events										
O Comments on SWMP Received	# Comments										
Community Hotlines	Phone # ()										
Phone # $(5 1 8) 6 5 5 - 7 9 2 4$	Phone # ()										
Phone # ()	Phone # ()										
Phone # ()	Phone # ()										
Phone # ()	Phone # ()										
Phone # ()	Phone # () – –										
O Community Meetings	# Attendees										
O Plantings	Sq. Ft.										
O Storm Drain Markings	#Drains										
O Stakeholder Meetings	# Attendees										
O Volunteer Monitoring # Events											
O Other:											

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?

Program (SWMP) Plan provided?										
O List-Serve # In List										
O Newspaper Advertising # Days Run [
O TV/Radio Notices # Days Run										
O Other:										

• Web Page URL: Enter URL(s) on the following two pages.

MCM 2 Page 1 of 6

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 \\ 0 \end{vmatrix} \begin{vmatrix} 1 \\ 2 \end{vmatrix}$

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

Name of MS4/Coalition ALBANY COUNTY

SPI)ES	ID							
N	Y	R	2	0	A	3	5	9	

2. URL(s) con't.:

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

URL a l b a n y tor alt c o u n ty \mathbf{S} m w e|r 0 r g / \mathbf{s} W W W . . a 1 i t i o n / a n n u a l rep or t m w a t e r c o •••• οr t / URL URL URL URL URL URL

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Ine of MS4/Coalition ALBANY COUNTY IN Y R 2 0 A 3 URL(s) con't.: Please provide specific address(es) where notices can be secessed - not home page. IN Y R 0 I <td< th=""><th>(s) con't.: se provide specific address(es) where notices can be secessed - not home page.</th></td<>	(s) con't.: se provide specific address(es) where notices can be secessed - not home page.
URL(s) con't.: Please provide specific address(es) where notices can be secessed - not home page. .RL <t< th=""><th>(s) con't.: se provide specific address(es) where notices can be secessed - not home page.</th></t<>	(s) con't.: se provide specific address(es) where notices can be secessed - not home page.
JRL	
JRL	
	· •

										N	<u>AIS</u>	4	<u> </u>	nu	<u>al</u>	<u>Re</u>	po	<u>rt</u>	Fo	<u>rm</u>	ļ						F	1			
	T			-											-		-	per nalf				~				L	i	L	7 mk		
		11	auo	/1111	ang	5 เม	15 1	01 II	1 03	րու	. 01	aj	om	. 10	JOIL	. OII	001	1411	01	au	am)ES			, 11,	. 010	un.		
Name o	fMS	54/0	Coa	litic	A	LBA	NY	COI	JNT	Y]			N	Y	R	2	0	A	3	5	9
3. W Pr	her ogr										•							-					ter	Ma	ana	gei	mei	nt			
	0					<i>`</i>																			.:.			h ía		1	
	nter neth																												an	1	
wi € MS4							lay	UC	Sut	лп	uu	1 41		at 19	Jua								_						1.000		
_	#/CC Depa				пс	e										瘤	A	nnu	al f	cep	ort	6	101	W IV.	LP I	Plan	l	w (line	ms
	A	L	В	A	N	Y		С	0	ប	Ν	Т	Y		D	Ρ	W		E	N	G	I	N	E	Е	R	I	Ν	G		
	Addi 4	4	9		N	Е	W		S	A	L	Е	М		R	0	A	D													
ľ	City	h														·		······			, , [Zip	y		1]				
1	V Phor		0	R	Η	Ε	Ε	S	V	I	L	L	Ε					1	1	Y	Į	1	2	1	8	6	-				
	. [5	1	6)	6	5	5	-	7	9	2	4																		
O Libr	ary Addi	ress	3													C	A	nnu	al F	۲ep	ort	С	S S	ŴΜ	ΡI	Plar	l	00	Corr	me	nts
																			·												
[<u>City</u>																	Γ		7	ĺ	Zip					_				
L	Phor	 1e						L		L								L]	l						l]	l	1]
	()				-																						
○ Oth			_													C	A	nnu	al F	۲ep	ort	C	S	₩M	ſP I	Plar	1	00	Con	nme	nts
ĺ	Add	ress	\$:																	
L (City	1						·	· · · · · ·	<u> </u>	L	, I						 F				Zip									
																											-				
]	Phor	1e	····			·i												L			ľ					/					
	()				-																						
○ Weł) Pa	.ge	UR	L:					1							C	A	nnu	al I	Rep	ort	0	S	WM	1P I	Plar	1	00	Con	ıme	nts
ĺ																															
• eMa	Ple	ase	pr	ovi	de	spe	cif	ic a	ddı	ress	of	pa	gev	whe	ere	rep	ort	car	ı be	e ac	ces	sed	- r	not	hor	ne			Con		ente
- 01010	T	A	υ	R	A		D	E	G	A	Е	т	A	N	0	@	A	L	В	A	N	Y	С	0	U	N	Т	Y	1	Y	
l ĺ		A	V	I	D		K	l	В	 	K		A	L	l	l I	1	L!	С	0	U		T	Y		Y	•	G	0	v	

<u>MS4 Annual Report Form</u>

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

	SPDES ID
Name of MS4/Coalition ALBANY COUNTY	N Y R 2 0 A 3 5 9
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.	05/05/2017
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 If Yes, what was the date of the meeting?	period? ○ Yes ● No / / / /
If No, is one planned?	O Yes • No
5.b. Was an Annual Report public meeting held for all MS4s con	tributing to this report during
this reporting period?	O Yes 🔍 No
If No, is one planned for each?	O Yes 🛭 🕲 No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.	O Yes 🔍 No

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition ALBANY COUNTY

SPI	DES	ID,	,					
N	Y	R	2	0	A	3	5	9

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.

Stormwater Program Technician receives and responds to 100% of complaints. The Stormwater Committee will continue to meet (at least quarterly) and will persist with implementation of the green infrastructure policy, identification of new priority initiatives, and evaluation of the success of policy implementation. The Committee will review facility assessments performed in 2015 to identify trends and areas for possible improvement and identify strategies for program betterment.

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

Stormwater Program Tech. received complaint from a resident pertaining to catchbasin maintenance, responded by visiting the site and coordinating cleanout with foreman. Also responded to three complaints of illicit discharges. The Stormwater Committee met three times during the reporting year, and an impromptu meeting with part of the Committee was also held in January advance of the program audit. IDDE procedures and regulations were discussed, along with the draft new permit.

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 O No

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

• Yes O 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 Stormwater Committee will meet at least quarterly to review policy and procedure implementation and permit compliance matters. Also, the Stormwater Program Technician will attend meetings of the Infrastructure and Capital Committees to identify green infrastructure policy implementation opportunities. The County will commence tracking of trash removal through its Trail Ambassador program on the Rail Trail. Response will be made to 100% of complaints.

This report is being submitted for the reporting period ending March 9,	2	0	1	7
---	---	---	---	---

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

· · · · · · · · · · · · · · · · · · ·	~ ~ ~ ~ ~ ~ ~	
Name of MS4/Coalition ALBANY	"OF INTY	V I
Name of MOI/Coalition (100/11)		1
NAME OF WIS4/COATHON		

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

1

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

On behalf of an individual MS4

- \bigcirc On behalf of a coalition
 - How many MS4s contributed to this report?
- 1. Enter the number and approx. percent of outfalls mapped:
- 3 4 1 # 9 8 %

N Y R 2 0 A 3 5 9

SPDES ID

- 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	O Landscaping (Irrigation)												
O Building Maintenance	O Marinas												
○ Churches	○ Metal Plateing Operations												
○ Commercial Carwashes	○ Outdoor Fluid Storage												
○ Commercial Laundry/Dry Cleaners	Parking Lot Maintenance												
\bigcirc Construction Vehicle Washouts	\bigcirc Printing												
○ Cross-Connections	O Residential Carwashing												
○ Distribution Centers	Restaurants												
○ Food Processing Facilities	O Schools and Universities												
○ Garbage Truck Washouts	Septic Maintenance												
\bigcirc Hospitals	O Swimming Pools												
\bigcirc Improper RV Waste Disposal	Vehicle Fueling												
O Industrial Process Water	Vehicle Maint./Repair Shops												
Other: Construction	O None s i t e s												
O Sewersheds:													

This	re	port i	is be	ing s	submit	ted	for	• the	e repoi	rtin	g	per	ioc	l ending	Ma	rch 9,	2	0	1	7	
				~		-				-			-								

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

				_		SPE							
Name of MS4/Coalition ALBANY COUNTY						Ν	Y	R	2 0 A 3 5 9				
3.b.What types of illicit discharges have	e been fe	ound d	uring	this re	por	ting	g pe	erio	od?				
O Broken Lines From Sanitary Sewer	○ Indu	istrial C	onnecti	ons									
O Cross Connections	O Inflo	ow/Infilt	ration										
• Failing Septic Systems	O Pum	p Static	n Failu	re									
○ Floor Drains Connected To Storm Sewers ○ Sanitary Sewer Overflows													
Illegal Dumping O Straight Pipe Sewer Discharges													
Other: T U R B I D I T Y F R O	O Non		SI	RU	r C	Т	I	0	N				
4. How many illicit discharges/potentia reporting period?5. How many illicit discharges have been supported as a support of the support of	-												
6. How many illicit discharges/illegal c period?	onnecti	ons hav	e beer	ı elimi	inat	ed o	lur	ing	this reporting				
7. Has the storm sewershed mapping b If No, approximately what percent was		-		-		<u> </u>		od?	OYes ●No				
8. Is the above information available in Is this information available on the If Yes, provide URL(s):									● Yes ○ No ● Yes ○ No				
Please provide specific address of page URL	where r	nap(s) o	an be	access	ed -	not	ho	me	page.				
Password Prot	ec	t e d	R	e s	t	r	i	С	ted				
h t t p s : / / a c v a r	cg	i s	. a 1	b a	n	У	С	0	unty.c				
om/webmap/													

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

annea m

9 5 8

	SPL	JE S	UL (
Name of MS4/Coalition ALBANY COUNTY	N	Y	R	2	0	A	3	5	9

8. URL(s) con't.:

P	Please provide specific address of page where map(s) can be accessed - not home page																										
URI																											
										L	[
[<u> </u>		1				I 	I						1		<u> </u>						 [<u> </u>	
										L																	
URI	.		,	r									,							 	 	 			 		س
<u> </u>																											
																<u> </u>						 					
URI		1	1				1]	!	1	1	1	1	<u> </u>	I	1				 L	 L	I	I	 	L	i
								[<u> </u>					[([.					[
<u> </u>	L I	l F						l	1	1	<u> </u>	1	1	1 T	1	1 1											
URI																											
														:											·		
																				-							
F														1												<u> </u>	
L	<u>.</u>		L!							-		1														<u> </u>	
URI										1	1	1		1		I –						 	<u>}</u>	<u> </u>	 ('	Γ	<u> </u>
												<u> </u>											<u> </u>				
		<u> </u>																									

- 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?
- **10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law?** Yes O NO O NT
- 11. What percent of staff in relevant positions and departments has received IDDE training?

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition ALBANY COUNTY

SPL	DES	Ш						
Ν	Y	R	2	0	Α	3	5	9

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.

Process will be developed to better characterize County Health Department complaint investigations relative to stormwater infrastructure locations. Routine method will be developed for tracking complaints from different types of sources (Health, Field Crews and complaints). Information will be organized into a summary spreadsheet.

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

A summary spreadsheet and complaint standardization form were both completed and are presently in use.

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

				1		
(ex.:	samples/	part	tici,	pant	s/events	J

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

• Yes O No

O No

• Yes

- E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
- F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Additional review of IDDE procedures will take place alongside County Health Department officials to identify overlap in responsibilities and streamline identification of violations and enforcement both within and outside the urbanized area.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition ALBANY COUNTY

SEL)ES	JD.						
N	Y	R	2	0	A	3	5	9

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.

Completion of system mapping will allow for completion of sewershed maps with mapping grant project. System mapping will be completed for New Karner Rd (CR 157) and Cherry/Elm Ave (CR 52). Follow-up on previously assessed outfalls with potential indicators of illicit discharges or elevated nonpoint source pollutants.

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

Progress made on outfall reconnaissance; despite addition/discovery of new outfalls in this reporting year, 14 outfalls have not been inspected within the last 5 years due to access problems. Eleven previously "potential" outfalls revisited. System mapping was completed for CR 157 and CR 52 and is in the process of being digitized in GIS. Areas straddling watershed boundaries along county roads assessed to determine whether drainage conveyances redirect flow to neighboring sewersheds.

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

					1	
(ex.:	samp	les/	pari	tici	pant	s/events)

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

• Yes O No

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

O 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).

Completion of digitizing for field-mapped sections of County Route 157 and 52. Checks and corrections to mapping of County Routes 203, 306 and 204 are planned. The 14 remaining outfalls will be evaluated to determine if access can be reasonably attained. ORI will be completed on remaining outfalls if access is feasible.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition ALBANY COUNTY

SPDES ID													
Ν	Y	R	2	0	А	З	5	9					

2

<u>Minimum Control Measures 4 and 5.</u> <u>Construction Site and Post-Construction Control</u>

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

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

now many WS4s contributed to this report?		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?© YesO 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?O YesO NO

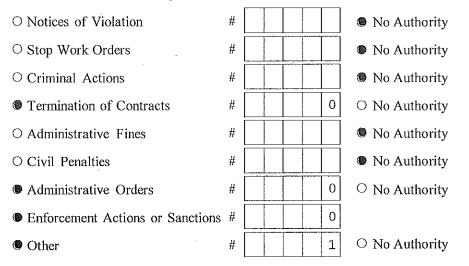
If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 09/2004 003/2006 0 NT

- 2. Does your MS4/Coalition have a SWPPP review procedure in place?
- 3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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

5. Does your MS4/Coalition provide education and training for contractors about the local
 SWPPP process?
 SWPPP process?

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:



This report is being submitted for the reporting period ending March 9,	2	0	1	7
---	---	---	---	---

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

		 _	SPL		ID
Name of MS4/Coalition	ALBANY COUNTY		N	Y	R

Minimum Control Measure 4.	Construction Site Stormwater Runoff Control

2 0 A 3 5 9

Th	e 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 a during this reporting period?	acre or 1	nore 0
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 8
3.	What percent of active construction sites were inspected during this reporting	period?	
4.	What percent of active construction sites were inspected more than once?	10	0 NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use	the NY:	s
	Construction Stormwater Inspection Manual? O Yes	• No	O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approva		nns
	• Yes	O No	O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?	ailable f • Yes	or O No

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

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition ALBANY COUNTY

SPDES ID NYR2 A 0 5 3 9

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

AN INT	$-\pi/C$	oun	1103	μŲ	/IIIC																										
	Dep	artn	nen	t															•												
	A	L	В	A	Ν	Y		C	0	υ	N	Т	Y		D	Р	W														
	Add	iress	3		,					r.				1			, ,					1					,				
	4	4	9		Ν	Ε	W		S	A	L	Е	Μ		R	D															
	City	, 		,	;													_	-	_		Zip	r				1			<u> </u>	<u>, </u>
	V	I.	0	R	H	E	Ε	S	V	Ι	L	L	Ε					Ν	I	7		1	2	1	8	6	-				
	Pho			1	. r																										
	(5	1	8)	6	5	5	-	7	9	2	4																		
O Lib																															
	Add	iress	;								F					ŀ														r	····
	City	/ 																[Zip				J	1		<u> </u>	,	
																											-				
	Pho	ne																													
	()				-																						
⊖ Oth	1er																														
0.011		lress	l																												
			,																												
	City	,			L																	Zip		I	,		J				
																											-				
	Pho	ne		I		1	l	1				r	1			;		-							<u>ا</u>	9	1			l	L
	()[-																						
O We	b Pa	age	UR	L(s	;):	Р	leas	e p	rov	ide	spe	cifi	c a	ddr	ess	whe	ere S	SW	PPI	Ps c	an	be a	acce	esse	d -	not	hoi	ne	pag	e.	
	URL							_			_																				
	[]				I		. 1																								
	URL																														
					Ī																										
		-+													L		1														
	·			,							······										•										

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 7$

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

		SPD	E2	Ш						
Name of MIS4/Coalition	ALBANY COUNTY	N	Y	R	2	0	Α	3	5	9

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.

At least four active or temporarily shut down project sites will receive permanent stabilization and permit closure.

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

This goal was accomplished as permit coverage was terminated with final stabilization and (where applicable) post-construction stormwater management practices on four sites that had been either active or inactive with stabilization at the end of the last reporting period. The County also sent four of its foremen to the NYSDEC-endorsed 4-hour Erosion & Sediment Control training.

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 O No

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

- Yes O No
- F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Albany County will incorporate new language into its contract documents ensuring that no contractor or inspector will receive final payment for any job requiring coverage under GP-0-15-002 without the site attaining status at which a NOT can be successfully filed.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 7$

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

Name of MS4/Coalition	ALBANY COUNTY
-----------------------	---------------

SPI	DES	ID						
Ν	Y	R	2	0	Α	3	5	9

Minimum Control Measure 5. Post-Construction Stormwater Management

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

On behalf of an individual MS4

 \bigcirc On behalf of a coalition

How many MS4s contributed to this report

ort?		1	

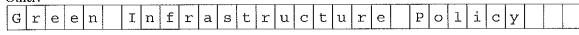
1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

	# Inventoried	# Inspections	# Times Maintained
Alternative Practices	2	2	2
○ Filter Systems			
O Infiltration Basins			
Open Channels	12	1 2	6
Ponds	1	1	1
○ Wetlands			
Other	5	5	

- 2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction
 BMPs, inspections and maintanance?
 Yes O No
- 3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?
- O Building Codes O Municipal Comprehensive Plans
- O Overlay Districts O Open Space Preservation Program
- O Zoning O Local Law or Ordinance
- O None O Land Use Regulation/Zoning

O Watershed Plans O Other Comprehensive Plan





MS4 Annual Report Form
This report is being submitted for the reporting period ending March 9, 2 0 1 7
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.
Name of MS4/Coalition ALBANY COUNTY Image: SPDES ID Image: Non-Section Image: Section Section Image: Section Sectin Sectin Section Sectin Section Section Sectin Section
4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
O Yes 🖷 No
4b. Does the MS4 have a banking and credit system for stormwater management practices?
O 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?
O Yes 🔍 No
4d. How many stormwater management practices have been implemented as part of this system in this reporting period?
 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?

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition ALBANY COUNTY

SPDES ID

NYR

2

0 A

3 5 9

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.

Perform maintenance on 9 additional high-priority post-construction stormwater management practices by March 9, 2017. Re-evaluate maintenance frequencies and procedures for existing practices to develop a more effective plan ensuring that practices receive regular maintenance on a needs-based rotating schedule. For properties owned by County within Ann Lee and Stump Pond watersheds, ensure No Net Increase in P from land use changes for which the County is responsible

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

Maintenance for repair or erosion control (other than routine mowing) was completed on five postconstruction stormwater management practices that had not received maintenance within the last reporting period (2 proprietary, 2 open channel, 1 rain garden); five other practices received mowing or other general regular upkeep maintenance. Albany County coordinates with Town of Colonie to ensure designers evaluate P loading in all proposed projects that drain to or through County system.

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

	-					
					4	
(ex.:	samp	les/	pari	tici	pant	:s/events)

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

• Yes O No

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

• Yes O No

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

Albany County will commence implementation of the NYSDEC guidance document for post-construction stormwater management practice inspection and maintenance and will ensure that Level 1 inspections are up-to-date for all of its facilities. At least three practices that have not received full maintenance within the last three years will be maintained to ensure continued optimal function during this reporting year. 75% of all practices will be inspected for maintenance needs.

This report is being submitted for the reporting period ending March 9	, 2	0	1	7	
--	-----	---	---	---	--

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

mmmo m

3 5 9

	······································	SI	DES				
Name of MS4/Coalition	ALBANY COUNTY	I		R	2	0	Α

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

 \bigcirc 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.

		One	<u>Self-Assessment</u> Operation/Activity/Fac			
			ormed within			
Operation/Activity/Facility	<u>Addressed i</u>		years?			
Street Maintenance	• Yes	0 No	• Yes	O No		
Bridge Maintenance	👁 Yes	0 No	O Yes	🏽 No		
Winter Road Maintenance	🌘 Yes	0 No	• Yes	O No		
Salt Storage	🖲 Yes	0 No	🖲 Yes	\odot No		
Solid Waste Management	🖲 Yes	○ No	• Yes	O No		
New Municipal Construction and Land Disturba	ance. 🖲 Yes	0 No	🖲 Yes	O No		
Right of Way Maintenance	Ses Ses	O No	🖲 Yes	O No		
Marine Operations		• No	O Yes	🖲 No		
Hydrologic Habitat Modification		0 No	• Yes	O No		
Parks and Open Space	🍳 Yes	0 No	🛄 🖲 Yes	O No		
Municipal Building	🕲 Yes	0 No	• Yes	O No		
Stormwater System Maintenance	• Yes	0 No	🖲 Yes	O No		
Vehicle and Fleet Maintenance	• Yes	0 No	🖲 Yes	O No		
Other	○ Yes	• No	O Yes	🔮 No		

This report is being submitted for the reporting period ending March 9, 2 1 7 0

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

		SPL	DES	ID						
Name of MS4/Coalition	ALBANY COUNTY	Ν	Y	R	2	0	А	3	5	9

2. Provide the following information about municipal operations good housekeeping programs:

۲	Parking Lots Swept (Number of acres X Number of times swept)	# Acres			9	Ð
•	Streets Swept (Number of miles X Number of times swept)	# Miles			4 7	7
•	Catch Basins Inspected and Cleaned Where Necessary	#			9 7	7
۲	Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#			1 ()
0	Phosphorus Applied In Chemical Fertilizer	# Lbs.			()
0	Nitrogen Applied In Chemical Fertilizer	# Lbs.			(5
۲	Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)	# Acres		0].[<u>]</u>
3	. How many stormwater management trainings have been provided to	o municipa	l emp	loye	es	_
	during this reporting period?				2	2

> 2 0 1 6

> > 6 2

2 0

0 7

- 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? 5 % 9

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

CDDEC ID

		-			110						
Name of MS4/Coalition	ALBANY COUNTY		Ν	Y	R	2	0	A	3	5	9

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.

Facility self-audits will be completed for any remaining County properties in the urbanized area of Albany County that have not been assessed within the preceding three years. County DPW is updating its pollution prevention procedures for all aspects of its operations and will finalize and institute the revised procedures by March 2017. Responsibility for County parking lot sweeping will be assessed and a plan to improve sweeping frequency will be developed.

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

Facility assessments were completed for two facilities in the urbanized area that had not been assessed to date, and follow-up visits were completed at facilities assessed during the 2013-2014 reporting year. Five satellite highway garages in the non-urbanized portion of the county were also assessed. Development of pollution prevention procedures for DPW operations has been completed, full implementation pending. Sweeping responsibility was determined and assessed for 3 facilities.

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

(ex.: samples/participants/events)

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

• Yes O No

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

O 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).

Follow-up reassessments are planned for the three facilities that were self-audited in 2014-2015 reporting year. County will finalize and utilize a municpal operations assessment form for activities such as winter road maintenance, street sweeping, catchbasin and ditch cleaning, and other activities that are not explicitly tied to fixed facility but have the potential to generate pollution. Implement new BMP to control discharge from salt loading area to a catchbasin at DPW New Scotland facility.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

 Name of MS4/Coalition
 ALBANY COUNTY
 SPDES ID

 N
 Y
 R
 2
 0
 A
 3

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.

Determine how many mapped catchbasins are present in urbanized area, estimate number of unmapped catchbasins, prioritize zones for cleanout.

Develop standardized procedures for 3rd party certification statements to be incorporated into future contracts, and secure signed agreements from vendors whose activities present risk to water quality.

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

Estimated total of 1500-1600 catchbasins in urbanized area. Cleanout zones have been inventoried and tabulated with attention to impaired watersheds, awaiting new permit to complete prioritization process. All requests for bids and proposals are reviewed by purchasing to determine applicability of stormwater language, including General provisions as well as construction-related provisions, and where applicable language is added along with certification statement to be completed by bidder.

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

the I. I. I. I.			2	
-----------------	--	--	---	--

5 9

(ex.: samples/participants/events)

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

• Yes O No

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

- Yes O No
- F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Finalize priority of catchbasin cleanout zones and begin implementation with highest priority roadways. Update exact number of catchbasins based on planned revisions to mapping.

Continue to be diligent in ensuring that required language is incorporated into all contracts and requests for proposals/bids where appropriate, along with third party certification statements.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

N Y R 2

0

Name of MS4/Coalition

Stormwater Coalition of Albany County

Minimum Control Measure 1. Public Education and Outreach

1 2

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

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

How many MS4s contributed to this report?

				n /*
I.	Targeted Public Education a	nd Outreach	Best Management	Practices

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

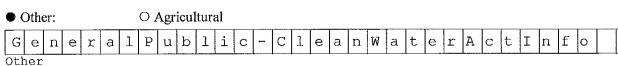
 Construction Sites • Pesticide and Fertilizer Application General Stormwater Management Information Pet Waste Management O Household Hazardous Waste Disposal O Recycling O Illicit Discharge Detection and Elimination Riparian Corridor Protection/Restoration Infrastructure Maintenance O Trash Management • Smart Growth Vehicle Washing O Water Conservation ○ Storm Drain Marking O Wetland Protection O Green Infrastructure/Better Site Design/Low Impact Development O None Other: t Y W С D С 0 1 i t i n е b s i t W h а 0 u а n 0 а 0 e

Other

2. Specific audiences targeted during this reporting period:

0	Public	Employees	•	Contractors
---	--------	-----------	---	-------------

- Residential
 O Developers
- Businesses
 General Public
- O Restaurants O Industries



MCM 1 Page 1 of 4

This report is being submitted for the reporting period ending March 9, $2 \circ 1 7$

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

Name of MS4/Coalition Storm

Stormwater Coalition of Albany County

SPL	DES	ID				
Ν	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			7	0
O Direct Mailings	# Mailings				
Kiosks or Other Displays	# Locations				8
• List-Serves	# In List		2	5	0
O Mailing List	# In List				
O Newspaper Ads or Articles	# Days Run				
Public Events/Presentations	# Attendees		1	1	9
O School Program	# Attendees				
• TV Spot/Program	# Days Run				1
• Printed Materials:	Total # Distributed			5	6
Locations (e.g. libraries, town offices, kiosks)					
C W P W e b c a s t s					

	P	1	а	n	n	i	n	g		В	0	а	r	đ		М	t	g	S	
	Т	r	а	i	n	i	n	g	ន	-	Ρ	u	b	1	i	с	Ρ	r	0	g
	W	A	V	Е	V	0	1	R	е	С	r	u	i	t	m	е	n	t		
Otł	ner:																			

Host 2 CWPWebcasts

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

W	Ŵ	w	•	s	t	0	r	m	a	t	e	r	а	1	b	а	n	У	С	0	u	n	t	У	•	0	r	g	
IRI																													

URL.	,										 	 										
					Ì								1	1								
					1]															
L	• • •																		<u> </u>		 	
		<u> </u>		[L					L	· · · · ·	1			I
			1		-			 		2		 										
																						l l
																						l l
		£				L																

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

tion	Stormwater Coalition of Albany County	
TIME		

SPI	DES	D					
N	Y	R	2	0			

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.

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.

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

BMP 1-1 Target Audience Analysis Worksheet (TAAW): not completed. BMP 1-3 Website: completed. BMP 1-7 List Serve: partially completed; drop/adds and updated emails provided by Coalition members; not entered into ACCESS database. BMP 1-6 Public Program-Guest Speaker: completed-1 CWA Presentation; not completed-Green Infrastructure Program to MS4 Electeds; no time to develop program and staff person organizing program left MS4.

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	0	No

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

۲	No
	۲

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

SWMPv5 (April, 2017) BMP 1-3 Website: continue to maintain Coalition website (post mandated documents; post educational material; post meeting announcements; pay invoice). BMP 1-7 List Serve: update ACCESS database; BMP 1-4 Publications: update door hanger publication; BMP 1-14 Public Programs-Organized By Coalition-host 1 CWP webcast.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Minimum Control Measure 2. Public Involvement/Participation

SPDES ID

N

Y R 2 0

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:

O Cleanup Events	# Events													
Comments on SWMP Received #Comments														
• Community Hotlines	Phone #	(518) 447-5645												
Phone # ()	Phone #													
Phone # ()	Phone #													
Phone # ()	Phone#													
Phone # ()	Phone #	(
Phone # ()	Phone #													
O Community Meetings	Community Meetings # Attendees													
O Plantings		Sq. Ft.												
O Storm Drain Markings		# Drains												
O Stakeholder Meetings		# Attendees												
• Volunteer Monitoring		# Events 7												
• Other: C o a l i t i o n C o m m e	n t s	- D R A F T M S 4 P m t												

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? • Yes

Program (SWMP) Plan provided?	۲	Yes	10	No
List-Serve # In List		2	5 (2
O Newspaper Advertising # Days Run				
O TV/Radio Notices # Days Run				
O Other:				
• Web Page LIRL: Enter LIRL (s) on the following two pages				

/eb Page URL: Enter URL(s) on the following two pages.

MCM 2 Page 1 of 6

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPL)ES	ID				
Ν	Y	R	2	0		

2. URL(s) con't.:

Į

Name of MS4/Coalition

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

Stormwater Coalition of Albany County

URL	,																		_											,,	
W	W	W	•	s	t	0	r	m	W	а	t	e	r	а	1	b	а	n	У	С	0	u	n	t	У	.	0	r	g		
											<u> </u>																				
																													1		
			I	<u> </u>		L .	ł	L	I		<u> </u>	I	ł	<u> </u>	ļ			I	I	<u> </u>	L	I	1		I	1	L	1	1		
URL								1												·									Γ		
			L				 	Ī			 			 						 					1						
			 					 			<u> </u>	 	l 	l 			[<u> </u>	 		<u> </u>	 		1	<u> </u>	<u> </u>				
		l													I			L .			L	ļ			L		<u> </u>]			
URI	í—	·····				_	I		1			I			[[Γ				· ···	<u> </u>		Τ						
					[<u> </u>	L				 		 	<u> </u>			1		<u> </u>	 				1		 	1	\square	
Ŀ								 	 	<u> </u>						<u> </u>										<u> </u>	 T	I T			
																				<u> </u>											
URI																															
																	Ļ					<u> </u>							<u> </u>		<u> </u>
	_													-																	
URI															_	_	_						-	_							
				Ţ																											
			İ	Ì									Í			1															
	1	Γ		1	1	<u> </u>						İ	Ī				Ì		Ī				Ī		Ť					İ	İ
URI		I	<u> </u>		1	1	1	.1	1	\$	- I	.l		1		*	1	1		<u> </u>	1	1	(1		l
							Γ				Γ																				
F				İ				\square	1	1	Ī			1	İ				Ī	İ			Ì	T	1	Ī	Ì	Ì		Ī	
-	<u> </u>	<u> </u>			<u> </u>		<u> </u>	$\frac{1}{1}$	1	1		<u> </u>			<u> </u>	1		<u> </u>	1			<u>+</u>			1	<u> </u>		1	+	<u> </u>	<u>+</u>
		I	L	I	1	<u> </u>			1	1			<u> </u>	1	1	1	l	<u> </u>		1	<u>t</u>	1	1	1	1	1	[1	1	L	<u> </u>
		1	1						 	T					T											<u> </u>	Γ				<u> </u>
	1	<u> </u>	1		<u> </u>	<u> </u>	1	+	$\frac{1}{1}$			1	<u> </u>		$\frac{1}{1}$	<u> </u>		1	T		† ,		<u> </u>	<u> </u>	+	1	+				†
	1	 	<u> </u>	$\frac{1}{1}$	╞	<u> </u> 	1	<u> </u>	<u> </u> 	<u> </u>	1		+		<u> </u>	<u> </u>	 	<u> </u>	<u> </u>	<u> </u>	1		1			1	╈	$\frac{1}{1}$	<u> </u>	1	
[1	1	1	1	1	1			1	1	1	1		1	ł	1	1		1	1	1	1		1		1	1	1	1	i	1

MS4 Annual Report Form													
This report is being submitted for the reporting period ending March 9, $2 0 1 7$													
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID													
Name of MS4/Coalition Stormwater Coalition of Albany County													
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 Department Department													
Stormwater Coaliition-AlbanyCnty													
Address													
1 7 5 G r e e n S t r e e t - C n t y H e a 1 t h B 1 d g City Zip													
A 1 b a n y N Y 1 2 0 2 - -													
Phone Control													
O Library O Annual Report O SWMP Plan O Comments													
City Zip													
O Other O Annual Report O SWMP Plan O Comments													
$\begin{array}{c c} Phone \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ $													
Web Page URL: Annual Report SWMP Plan Comment:													
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													
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													

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

		SPI	DES	ID				
Name of MS4/Coalition Stormwater Coalition of Albany County		Ν	Y	R	2	0		
4.a. If this report was made available on the internet, what da	ate was	it p	oste	d?	1	r-	<u> </u>	3]
Leave blank if this report was not posted on the internet.		0 5]/[0	5	/	2 0	1 7
4.b. For how many days was/will this report be posted?								14
If submitting a report for single MS4, answer 5.a If submitt	ting a jo	oint r	epoi	rt, a	ans	wer	5.b	
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting pe	riod	?] / [。 /[Yes	O No
If No, is one planned?						0	Yes	O No
5.b. Was an Annual Report public meeting held for all MS4s	contri	butir	ng ta	o th	nis :	rep	ort d	uring
this reporting period?						0	Yes	• No
If No, is one planned for each?						0	Yes	• No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.						0	Yes	• No

<u>MS4 Annual Report Form</u>

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

SPI	DES	ID			 		
N	Y	R	2	0			

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.

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.

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

BMP 2-2 Annual Report: completed. BMP 2-8 Student Water Quality Projects: partially completed; contract between UAlbany and County-Coalition completed; recruitment flyer for professors and students 85% completed. BMP 2-11 WAVE-8 sites monitored.

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 O 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).

SWMPv5 (April, 2017) BMP 2-2 Annual Report: Coalition staff prepare for and guide possible transition to "new" MS4 Permit likely to include changes in Annual Report format and annual program evaluation process-no particular goals named in SWMP document. BMP 2-11 WAVE-monitor 4 sites with volunteers.

This report is being submittee	for the reporting perio	d ending March 9,	2	0	1	7
--------------------------------	-------------------------	-------------------	---	---	---	---

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

Name of MS4/Coalition	County N Y R 2 0
3.b.What types of illicit discharges have	been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
O Failing Septic Systems	○ Pump Station Failure
○ Floor Drains Connected To Storm Sewers	○ Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
O Other:	O None
reporting period?	al illegal connections have been detected during this
·	en confirmed during this reporting period?
7. Has the storm sewershed mapping b If No, approximately what percent was	een completed in this reporting period? O Yes O No s completed in this reporting period? \$
 8. Is the above information available in Is this information available on the VII If Yes, provide URL(s): Please provide specific address of page URL 	

URL	<u> </u>																	····-					,					r			r
Ρ	а	s	S	W	0	r	d		Ρ	r	0	t	е	С	t	е	d		R	e	S	t	r	i	С	t	е	d			
h	t	t	р	s	:	1	/	a	С	v	a	r	С	g	i	s	•	a	1	b	а	n	У	С	0	u	n	t	У		С
С	0	m	1	W	е	d	m	а	p	1																					
URL	, 		1				r	r			1				r	Г			r		1		-	1	ł	1	r	1	r	<u> </u>	
																										ļ			<u> </u>		

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPI	DES	ID				
N	Y	R	2	0		

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.

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.

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

BMP 3-2 Coalition Stormwater Program Mapper: completed; re-design includes "Form" considerations; one design workshop, not 3; more complex redesign to include "Forms" pending development of RFP for consultant services. BMP 3-5 Dry Weather (ORI) -completed; kits restocked.

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 O No

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

• Yes O No

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

SWMPv5 (April, 2017) BMP 3-4 Storm Sys-CSO-Sewershed Map'g/BMP 5-8 Inventory Post Const SMPs/BMP 6-1 Inventory MuniFac: continue to implement mapping goals detailed in SWMPv5 (see MCM3, MCM 5, and MCM6); continue to implement objectives and tasks listed in the NYSDEC grant contract C00081GG work plan. See respective documents for details (SWMPv5 and grant work plan). Both explain what is being mapped where, when, and how for all Coalition members.

MCM 3 Page 4 of 4

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

	SPL	DES	ID				
1	N	Y	R	2	0		

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.

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Proceduresreview 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.

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

BMP 4-5 Construction Site Enf & Inspection Procedures: not completed; DRAFT MS4 Permit points to mandated MS4 Construction Inspection Forms, need to know status of DEC forms before proceeding further.

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?

O 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).

SWMPv5 (April, 2017): BMP 4-7 Construction Site Operator Training-4hr: co-host one 4 hr training with ACSWCD.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SP	DES	S ID				
N	Y	R	2	0		

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.

From SWMPv4 document (May, 2016): BMP 5-5 SWPPP Review Procedures - for Coalition Stormwater Program Mapper update/load map layers named in Construction Activity Permit/ NYSDEC SW Mgmt Design Manual. BMP 5-8 Inventory Post Construction Practices - with grant funding implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - with grant funding develop inspection forms for use with mobile devices

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

.BMP 5-5 SWPPP Review Procedures: partially completed, pre-existing layers uploaded, additional layers more difficult to obtain. BMP 5-8 Inventory Post Construction Practices: mapping of post-construction practices implemented as detailed in grant work plan. MP 5-9 Post Construction Practices: not completed.

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 O No

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

O 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 SWMPv5 document (April, 2017): BMP 5-8 Inventory Post Construction Practices - continue to map post construction practices as detailed in grant work plan and various SWMPv5 goals. BMP 5-9 Post Construction Practices-Maintenance: complete RFP for consultant services to develop GIS friendly post-construction stormwater management practice (PC SMPs) inspection forms (mobile devices).

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID N Y R 2 0

2

0 1 6

4 9

9

0

2 2

		,
	Stormwater Coalition of Albany County	
Name of MS4/Coalition		

2. Provide the following information about municipal operations good housekeeping programs:

○ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
O Streets Swept (Number of miles X Number of times swept)	# Miles	
O Catch Basins Inspected and Cleaned Where Necessary	#	
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O 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	

- 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?

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 \\ 0 \end{vmatrix} \begin{vmatrix} 1 \\ 7 \end{vmatrix}$

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

S	SPL	DES	ID				
	N	Y	R	2	0		

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.

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.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

	0	
--	---	--

(ex.: samples/participants/events)

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

Yes O No

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

• Yes O No

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

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

SPDES ID

N Y R 2 0 A 2

3 4

MCC form for period ending March 9, 2 0 1 7

Name of MS4 University at Albany (SUNY) Uptown Campus

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	0	r	m	w	a	t	е	r	C	c	a	1	i	t	i	0	n	0	f	A	1	b	a	n	У
					_																					

MCC form for period ending March 9, 2 0 1 7

Name of MS4 University at Albany (SUNY) Uptown Campus

SPI	DES	ID	1.					
N	Y	R	2	0	A	2	3	4

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

- Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 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).
- 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

- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

Firs	t N	ame		-			_			_	_					MI		Las	t Na	me												
J	a	m	e	55									1.00	1		R		S	t	e	1	1	a	r							T	
Titl	e																		-									-	-	-	_	
А	С	t	i	n	g		Ρ	r	e	s	i	d	e	n	t,																	
Add	ires	s												6							-	-			-	_	-			-	-	-
1	4	Ò	0		W	a	s	h	i	n	g	t	0	n		A	v	e				_										
City	1			_										1.						St	ate		Zip							1-		
А	1	b	a	n	У															N	1	Y	1	2	2	2	2	-				
Ma	nil											-			_		-						1			-	-		-	_		_
p	r	е	s	m	a	i	1	0	a	1	b	a	n	У		е	d	u														
Pho	ne												-	-				Cou	nty						-			-	-	-	-	-
(5	1	8)	9	5	6	-	8	0	1	0						-	1	b	a	n	У			1						
			-			-	-		-	-	-							-	-	-	-	-	-	-			-		-	1	+	-U -

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

Name of MS4 University at Albany (SUNY Uptown Campus)

SPDES ID N Y R 2 0 A 2 3 4

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

- Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 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).
- 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:

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

Firs	st N	ame				_	_	-	-	_	_		_	_		MI		Las	t Na	ame				-				-					
к	a	r	1															K	i	1	t	s				1	1						
Titl	e																	_												-	-		Ĩ
D	i	r	e	C	t	0	r		C	0	d	е		А	d	m	i	n	i	s	t	r	a	t	i	0	n			-00	-		1
Add	ires	s			-												1	-	-									-		-			1
1	4	0	0		W	a	S	h	i	n	g	t	0	n		A	v	e	4														ì
City	r														-					St	tate		Zip					1	-		-	-	1
A	1	b	a	n	У															I	J	Y	1	2	2	2	2] -	1	T			1
eM	ail																			-			-			-	1	1	1	_			ĥ
k	ĸ	i	1	t	s	@	a	1	b	a	n	У		e	d	u														Τ	T	T	1
Pho	ne															-		Cou	nty			-		_	-	-	_	-		_1 _	1	-	1
(5	1	8)	4	4	2	÷	3	4	0	0						А	1	b	a	n	У							T	1		1
10																			-				-		-	-		-	-	-	-	-	4

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

SPDES ID

NYR2

0 A 2 3

4

Name of MS4 University at Albany (SUNY Uptown Campus)

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

- 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).
- 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:

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

Fire	1 N	ame	_	_	-	,		-		_						MI		Las	st N	ame													
F	r	a	n	k			T									S		F	a	z	i	0	1.	1				1					
Titl	е										1					-		-			,												
s	t	0	r	m	W	a	t	е	r	1.1	М	g	m	t	4		C	0	0	r	d	i	n	a	t	0	r						
Add	Ires	s	1														-								1					-			-
1	4	0	0	1	W	a	s	h	i	n	g	t	0	n		A	v	е				T											1
City	1															-				S	tate	1	Zir	,		-	-	-	1	-	-	10	-
A	1	b	a	n	У															ľ	V	Y	1	2	2	2	2	1-		1			
eMa	ail									-											-		-			-	1		-				_
f	£	a	z	i	0	0	a	1	b	a	n	У		e	d	u												1					Ĩ
Pho	ne																-	Cou	inty		_		-				-			1	-	-	-
(5	1	8)	4	4	2	-	3	4	0	0						Α	1	b	a	n	У										

MCC form for period ending March 9, 2 0 1 7

Name of MS4 University at Albany (SUNY) Uptown Campus

PI	JES	iD	_	_	-		_		
N	Y	R	2	0	A	2	3	4	

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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/C	oalii	tion	Nar	ne												-	_			_		-								
Sto	r	m	W	a	t	e	r		C	0	a	1	i	t	i	0	n	T	0	f		A	1	b	a	n	Y			
Partner/C	oali	tion	Na	ne(con	't.)	_		1					_								SP	DE	S Pa	rtne	er II)-1	fap	plic	able
COU	ı n	t	У																			N	Y	R	2	0				
Address	-	1		_		_				-		_						_	-			_						-		
1 7 5		G	r	e	e	n		S	t		1																			
City		-			_		10	_	-	_						_		S	tate		Zip)			_	-	_		-	-
Alb	a	n	У	1			_											1	1	Y	1	2	2	0	2	-				
eMail	_	-					_									_	_													
N a n	C	У	Ŀ	H	e	i	n	Z	e	n	@	a	1	b	a	n	У	C	0	u	n	t	У	n	Y		C	0	m	
What tas	sks/	res	pon b	sib	ilit 1	ies c	arc	sh t	arec	l w	ith n	thi s	s pa	artn P	r	(e.g	g. N	IM r	l S a	cho m	ool s	Pro	gra W	e ms	or b	Mi	altij i	ple t		No sks)
• MM2	s	W	M	P	D		-					-	0	7.7			-				1	-		103				1.5		
	5	W	IM	P	10	0	C	u	m	е	n	t	-	W	A	V	Ε	-	Ρ	u	b	1	i	C	I	n	p	u	t	
• MM3	S	W	I	М	W	e	b	М	a	p	р	e	r	R	e	d	e	s	i	g	n	-	0	R	Ι	K	i	t	s	
MM4	S	w	I	М	W	e	b	М	a	р	р	е	r	÷	s	W	Ρ	P	Ρ	R	е	v	i	e	w	L	a	У	r	s
• MM5	P	0	s	t	C	0	n	s	S	Μ	Ρ	s	-	М	a	p	Ρ	r	e	p	g	-	I	n	v	n	t	o	r	У
• MM6	т	r	a	i	n	g	:	D	V	D	s	С	Ó	u	r	5	e	s	P	r	e	s	е	n	t	r	М	t	g	s
i i i i i i																	-													

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(I	<u>MCC) Form</u>
MCC form for period ending March 9, 2	0 1 6
	SPDES ID
Name of MS4 University at Albany (SUNY) Uptown Campus	N Y R 2 0 A

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 Karl		MI Last Nan Ki	ne 1 t s	
Title (Clearly print title of	f individual signing report)			
	r Code Ad	m i n i	s t r a t i o n	
Signature	Cen		Date 0 5 / 2 2	

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

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

Vater Quality Tren	de	

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 2

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. \bigcirc Yes

Yes No

SPDES ID

NYR

2

0 A

23

4

If Yes, choose one of the following

O 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													_										
			1.1			1																	
							-												-				
		+		-	+		-		-		-		-	-	-	-	-	-				-	_
		1																					
URL				-	1	-		-	 	_		 _			_	_	_	-	_	_	-	_	
														1									
																			-				
URL				_																			
								1															
URL																							
				10																			
					1			1				1		1				-				1	
	1.0	1000	- 13	_		1.21		1		1000					1		_			1			

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

NYR20A234

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

Minimum Control Measure 1. Public Education and Outreach

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

- On behalf of an individual MS4
- O 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:

Construction Sites		O Pesticide and Fertilizer Application
General Stormwate	r Management Information	O Pet Waste Management
O Household Hazardo	ous Waste Disposal	
Illicit Discharge De	etection and Elimination	O Riparian Corridor Protection/Restoration
• Infrastructure Main	atenance	O Trash Management
C Smart Growth		• Vehicle Washing
O Storm Drain Marki	ng	O Water Conservation
Green Infrastructur	e/Better Site Design/Low Impact Development	O Wetland Protection
O Other: Other 2. Specific audien	ces targeted during this reporting period:	O None
Public Employees	○ Contractors	
O Residential	O Developers	
O Businesses	○ General Public	
○ Restaurants	○ Industries	
O Other:	○ Agricultural	
Other		

MCM 1 Page 1 of 4

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

SPI	DES	ID						
N	Y	R	2	0	A	2	3	4

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

	ruci	tion	Sit	e O	per	alo	rs T	rai	ned											#Tr	ainec					
irect	M	aili	ngs																ł	Mai	lings	1				
iosk	s or	Ot	her	Dis	spla	ys													#	Loca	tions			1		1
ist-S	erve	es																		# Ir	n List			1		
ailir	ng I	ist																		# Ir	List	1				
ewsj	pape	er A	ds	or a	Arti	icles	5												#	Days	Run	Ĺ	Ì			
blic	Ev	/ent	s/Pi	rese	enta	tion	S												#.	Atter	dees				5	0
hoo	l Pr	ogr	am																#.	Atter	dees	-				
																						-	1	1	1	-
V Sp	ot/l	Prog	gran	n															#	Days	Run					
inte	i M	late	rial	s:	5			7.		1								Total				-				
inte	i M	late	rial e.g. 1	s:	ries. C	, tow	n of		s, ki	osks i) 1	d	i	n	g	A		Total				-				
inteo Loc	d M ation	late 15 (e	rial e.g. 1	s: libra	С		n of					d	i	n	a	A		Total				-				
inter Loc S	ation e a	late ns (e r	rial a.g. 1 V	s: ibra i l	c i	e t		В	u			d	i	n	a	A		Total				-				
Loc S F	ation e a	late ns (e r	rial e.g. 1 v i	s: ibra i l	c i	e t	i	B e	u s			d	i	n	a	A		Total				-				

URL edu/facilit W W W a 1 b a n y i е S . 1 × s t 0 r m W ater URI.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

																		SPI	DES	ID		_				
ne of MS4/Co	alition	Univ	ersity	at Al	lbany	(SUN	Y) U	ptown	n Car	npus								N	Y	R	2	0	A	2	3	-
Web Page	con't	.:	Pro	ović	le sp	occit	fic v	veb	ade	dre	sses	5 - 1	not	hor	ne	pag	e.									
			1																							1
		-	T	1		+		1	1		1	1	-									-	-			-
		-	-		-	+	+	-	-	-	-	-		-	-				_			_	_			
URL	1 1	-	-	-	-	-	1	1	-	-	-		-		_		_		-			_		-	_	-
																						_				
					4	1	1	-	-	-		-		L						_		-				-
	11																									
	11	-	1			1	+	1				1	-				-			-			-			
	+		-	+	-	+	-	+			-	-	-			_	-		-	-		_	-		_	-
																				_		_				_
JRL			-	т. т.			-	-	_	1	-	_							1	_		1	_			_
JRL	1 1	-	1	L				-		-	-						-			-					_	_
		T															-									
		-			-		1		-					-	-	-	-		-	-		-	-	-	-	-
						_	-	-	-						_	_	_		_	-	-	-	_	_	_	_
												_	_													
JRL					_	-		1	_		_		_		_		_		_				_			
								_																		
																										1
						1	1	1																T	Ť	T
					_	_	-	-		-					_	_			-	-		-				-
JRL						1	T	1		-				-			1							-		-
		-		-	-	+	-	-							-	_	-			-	_	_	_	-	-	
		_															_			_	_					

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

NYR20A234

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

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 IILC.1. Submit additional pages as needed.

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

- 1) Complete Target Audience Analysis Worksheet.
- 2) Monitor website and update when required.
- 3) Install more drain markers on the campus.

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

- 1) Target Audience Analysis Worksheet not completed.
- 2) Website was updated when required.
- 3) Drain markers not installed due to area under construction.

4) Educational tours of Indian Pond as it's function relates to stormwater management for the Campus conducted.

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 O No

O No

• Yes

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

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during

- the next reporting cycle (including an implementation schedule).
- 1) Review/adopt stormwater sinage for treatment practices
- 2) Monitor website and update when required.

3) Install more drain markers on the campus.

4) Conduct educational tour of Indian Pond if incoming freshman orientation program continues.

5) Continuc use of water quality message in webcast for campus cleanup activity.

<u>MS4 Annual Report For</u> This report is being submitted for the reporting period		2	0 1		7	
If submitting this form as part of a joint report on behalf of a c		-	_	1	_	
	SPDES ID		-		1	
Name of MS4/Coalition University at Albany (SUNY) Uptown Campus	NYR 2	: C	A	2	3	4
Minimum Control Measure 2. Public Invol	vement/Particip	ati	on			
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. What opportunities were provided for public participation development, evaluation and improvement of the Stormwar (SWMP) Plan during this reporting period? Check all that	ter Management P		ran	n		
Cleanup Events	# Events		1			
Comments on SWMP Received	#Comments					
○ Community Hotlines Phone # ()	1_				
Phone # () Phone # (-				
Phone # () - Phone # ()	Ī				
Phone # () Phone # (j j	Í.				ī
Phone # () Phone # (j j					
Phone # () Phone # (i i i i i i i i i i i i i i i i i i i	1.				
Community Meetings	# Attendees					-
⊖ Plantings	Sq. Ft.	-				
C Storm Drain Markings	#Drains					T
Stakeholder Meetings	# Attendees				1	T
O Volunteer Monitoring	# Events				T	٦
Other:				-		
2 Was public notice of quailability of this second se	· · · · · · · · · · · · · · · · · · ·		ا مىر		_	_
2. Was public notice of availability of this annual report and S Program (SWMP) Plan provided?	otormwater Manag		Yes		01	No
List-Serve	# In List	1	8	0	0	0
O Newspaper Advertising	# Days Run					

O TV/Radio N	otices		# Days Run	
O Other:				
~ W 1 0 1	DI	 		

○ Web Page URL: Enter URL(s) on the following two pages.

MCM 2 Page 1 of 6

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 3
 4

2. URL(s) con't.:

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

URL																		-								
							1																			
T	11	11					1				-	1	1	t	1	1		-	-	-	-	-	-	1		
			-	-	_					_	_	-	1	Į.	-			_	_	_	_	_	-			
URL	TT				-	1	1			T	T	-	-	-	-	-	-	-	-	-	-	-	_			-
			-		_	-	-		_	-	-	-							-							
															1											
URL		-1							-				1					-	-					_		-
		TT				1							T	1				1	1	1	T	1				-
			-		+	1		-		+		+	+	-	-	1		-	-	+	-	-	-	-	_	_
			-		-	-		-		+	_	+	-	_				-	_	_	-	-		_	_	
						-																				
URL										_																
																					1	1				
			1			-		-		-	-	1	-			-	-	+	1	1	+	+	-	-	-	-
			-		_	-				-		-	-		-	_	1	_	_	_				_	-	
URL						1		-		-	1	1	1	-	-1	-	1	-	-	-	-	-	-	-	1	_
					-			-		-	_													1		
																		1								
URL					-1	1				1	-															_
											T	T						1	T	T	Τ	T	T	1		٦
			1		1	-			-	1		t				1	+	-	+	+	+	+	+	+	1	-
-			-		+		-		-	+	+	+		-	-	-	-	+	-	-	+	+	+	-	-	
			_						_																	
JRL.			-		1		-1	1	1	1	1	-		T	- 1	- 1-		-	1	1	1		- 1-	-12		_
																							1			
					1					T	1									1	T	1	T	T	T	-
			1	· · · · · · · · ·	1.0						-	1			- A											

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition	University at Albany (SUNY) Uptown Campus
-----------------------	---

SPI	DES	ID						
Ν	Y	R	2	0	А	2	3	4

2. URL(s) con't.:

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

URL																			- P					
										T														Γ
		-			1	1		-	+	T	t	1	-			-	1	+	+	-	-	-	-	t
		-	+ +	-	-	-		-	-	_	-		_		_	_	-	-	-	_	-			
														_										ł
URL							_																	
					1	1		1	T	T	T	1	-		-		1		1	1	-		-	F
		-		+	-			+	-	-	-	+	-		-	-	-		-	-	-		-	
										_		_				_								
JRL											_				=			15						
				d fa																				
																1	1	T	T	1				-
		-	1-1-		-			-	1	-			-	-	-	-	-	-	-	-			-	-
		_	1		1			1									1							
JRL					-						_													
													1											
			1		1	11											1	1				1	-	-
		-		-	-			-			-	-	-	-	-	+	-	+	+		_	-	_	_
								1			-												_	
JRL				-	_	_		T		-	_	-					-	-	-					_
																		11						
							TH																	
	17			+	1		-	1					1	-	-		1	-	-	-	-	-	+	-
		-		-	-	-	_	_		_	-		_	_				-	_	_		_		_
RL.		-		-		-	-	1	1	-	_		_		_	_	1	1	- 1		_	-	_	_
		_																						
										T				T	T			T				-	1	-
				_			_	-		-	-			_	-	-	-						1	_
RL			- 1	1		1	1	T					-	- 1-	-			1		1	T	1	-	_
										_					-									
														T			1						1	-
																			1					

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

NYR20A

2

3 4

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

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.

De	part	mer	nt	-		-			_		· ·		_		_	_		Gui	Re					-		n			Com	
C	100		e		A	d	m	li	n	i	S	t	r	a	t	i	. 0	n		S	e	r	v		В	13	1	d	g	
Ac	Idres	s	1		-	-	-	-	-	-	-	_	-	-	-	-			-	_	-		-		1	1	-			
1		0	0		W	a	S	h	i	n	g	t	0	n		A	v	e												
Ci	ly	_	_	_	-	-	_	1	-			1	1	1	1	1	-	-	-		Zip)	-	-	-	-	-		-	
A	1	b	a	n	У													N	Y		1	2	2	2	2	-	-			
Ph	one	-	-	1.	_	-	-	i	-	-	1	-	1																	
(1																						
rar	v														1	21	Inn	lei	Ret	ort		20	11/1	MP	Pla	13		1	Com	ma
Ad	dres	s	-	-	-	-	-	_	-	1	1	-	_	-	-	1	Jun	uai	Rep			10		VIL	r la			-	Join	me
														1																
Cit	Y	-	T	-	-	-	-	-	-	-	-	-	-		-	1	F	Ē	-		Zip	-	-	-	-	1	-	_		_
																					1					-	•			
Ph	one	_	-	1	_	-		1	_	_		_																		
(-		1																				
er Ad	dres	s				-				T	1	1	-	1	(A	nnu	lal	Rep	ort		S	WM	ЛΡ	Pla	n	C		Com	me
		S													(A	Innu	al	Rep	ort	Zip		WM	ЛР	Pla	n	C		Com	men
Ad		s														A	Anni	lal	Rep	ort			WM	MP	Pla	n -			Com	
Ad	y	S																lal	Rep	ort			WN	мр	Pla	n -			Com	
Ad Cit	y	S)				-								A C		lal	Rep	ort			WM	мР	Pla	n] -			Com	
Ad Cit Pho	y one)				-													Zip] -		I		
Ad Cit Pho	y)				-										[a]	Rep	ort	Zip	S			Plan] -		I	Com	
Ad Cit Pho	y one))	1	b	a	- n	У		e	d	u	1							Zip] -		I		
Ad Cit Pho Pho P	y one age	UR	L: r		1 w	ba	a	- n e	y r		e	d	u	1				[a]	Rep	ort	Zip	S	WN	AP	Plar] -		I		
Ad Cit Pho (v	y one age w	UR						-	-		e	d	u					[a]	Rep	ort	Zip	S	WN	AP	Plar] -		I		
Ad Cit Pho Pho V S	y one age w t	URWO	r	m	w	a	t	e	r						f	A	.nni	ual i	Rep	ort	Zip	s	WN	AP s	Plar]				
Ad Cit Pho (v s Ple	y one age w t	URWO	r	m	w	a	t	e	r						f	A	.nni	ual i	Rep	ort	Zip	s	WN	AP s	Plar]	ge.		om:	
Ad Cit Pho Pho V S	y one age w t	URWO	r	m	w	a	t	e	r					/	f	A	.nni	ual i	Rep	ort	Zip	s	WN	AP s	Plar]	ge.			
Ad Cit Pho (v s Ple	y one age w t	URWO	r	m	w	a	t	e ddr	r		pa		whe	/ /	f	A a ort	.nni	ual i	Rep	ort	Zip	s	WN	AP s	Plar]	ge.		om:	
Ad Cit Pho Pho (w s Ple iil	y one age w t	UR w o	r ovi	m de s	w	a cifi	t ic a	e ddr	r ess	: of	pa	ge v Y	whe	e	f	A a ort	.nni	al l i n be	Rep	ort	Zip	s	WN	AP s	Plar]	ge.		om:	

	MS4 Annual Report Fo	rm						
	This report is being submitted for the reporting period	d ending	g Ma	arch 9	9, 2	0 1	L 7	
	If submitting this form as part of a joint report on behalf of	a coalitic	on lea	ave SF	DE	S ID bl	lank	
			SPD	ES ID				
Nam	ne of MS4/Coalition University at Albany (SUNY) Uptown Campus		N	Y R	2	0 A	2	3 4
4.a	. If this report was made available on the internet, what da	te was i	it po	sted?	÷			
	Leave blank if this report was not posted on the internet.	0	5	/ 0	5	/ 2	0	1 7
4.b	. For how many days was/will this report be posted?						1	1 4
	If submitting a report for single MS4, answer 5.a If submitt	ing a joi	nt re	port,	ansv	wer 5.1	b	
5.a.	. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ing peri	od?	1		○ Ye /	s	• No
	If No, is one planned?					○ Ye	s	• No
5.b.	. Was an Annual Report public meeting held for all MS4s o	ontribu	ting	to th	nis r	eport	duı	ing
	this reporting period?					O Ye		• No
	If No, is one planned for each?					○ Ye	s (• No
	Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					○ Yes	5 1	• No

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

N Y R 2 0 A 2 3

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

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) Continue engagement of students for research within the coalition community.

2) Review public contact information and modify as required.

3) Continue notification to volunteers of benefits of campus cleanup on storm system and receiving waters.

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

1) Students are in the process of performing mapping and information gathering work for the Coalition.

2) Public contact information reviewed with no changes made.

3) Volunteers were notified of benefits of campus clean up on the stormwater facilities by campus cleanup posting on website.

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

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

Yes ONo

1

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

• Yes O 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 engagement of students for research within the coalition community.

2) Review public contact and complaint information and modify as required.

3) Continue notification to volunteers of benefits of campus cleanup on storm system and receiving waters.

MCM 2 Page 6 of 6

	for the reporting period ending March 9, 2 0 1 7						
If submitting this form as part of a	joint report on behalf of a coalition leave SPDES ID blank.						
	SPDES ID						
Name of MS4/Coalition University at Albany (SUNY) U	N Y R 2 0 A 2 3 4						
Minimum Control Measure	3. Illicit Discharge Detection and Elimination						
The information in this section is being repor	ted (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. perc	ent of outfalls mapped: 1 3 # 1 0 0 %						
2. How many of these outfalls have bee reporting period (outfall reconnaiss	en screened for dry weather discharges during this ance inventory)?						
3.a.What types of generating sites/sewer reporting period?	rsheds were targeted for inspection during this						
C Auto Recyclers	○ Landscaping (Irrigation)						
C Building Maintenance	O Marinas						
○ Churches	O Metal Plateing Operations						
O Commercial Carwashes	ashes O Outdoor Fluid Storage						
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance						
O Construction Vehicle Washouts	© Printing						
O Cross-Connections	ns O Residential Carwashing						
O Distribution Centers	© Restaurants						
○ Food Processing Facilities	Schools and Universities						
○ Garbage Truck Washouts	○ Septic Maintenance						
O Hospitals	O Swimming Pools						
○ Improper RV Waste Disposal	○ Vehicle Fueling						
O Industrial Process Water	ndustrial Process Water C Vehicle Maint./Repair Shops						
O Other:	○ None						
© Sewersheds:							

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

	SPDES ID					
Name of MS4/Coalition University at Albany (SUNY) U	ptown Campus N Y R 2 0 A 2 3 4					
3.b.What types of illicit discharges have	e been found during this reporting period?					
O Broken Lines From Sanitary Sewer	O Industrial Connections					
○ Cross Connections	C Inflow/Infiltration					
O Failing Septic Systems	© Pump Station Failure					
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows					
O Illegal Dumping	O Straight Pipe Sewer Discharges					
© Other:	None					
4. How many illicit discharges/potentia reporting period?	al illegal connections have been detected during this					
5. How many illicit discharges have been	en confirmed during this reporting period?					
6. How many illicit discharges/illegal co period?	onnections have been eliminated during this reporting					
7. Has the storm sewershed mapping be If No, approximately what percent was						
8. Is the above information available in Is this information available on the v	a second s					
If Yes, provide URL(s): Please provide specific address of page URL	where map(s) can be accessed - not home page.					

Ρ ord Protect icted e d R str as S w е http arcgis ty S 1 1 /acv a 1 b a n y C 0 u n C . . O m 1 W e b m a p URL

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

	100	1.1.1	1000	1.00		1.11		
NI -	V	D	2	0	A	2	2	1

10%

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?
- 10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? O Yes O No • NT
- 11. What percent of staff in relevant positions and departments has received IDDE training?

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

N	Y	R	2	0	A	2	3	4
-		-		-	-	-	-	-

SPDES ID

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 IDDE training and convey to staff the importance of observation and quickly reporting incidents.

2) Revise and up-date IDDE Policy as needed

3) Update GIS mapping with new outalls.

4) Perform dry weather flow monitoring of outfalls to detect for illicit discharge. (ORI)

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

1) IDDE training provided to staff.

2) IDDE policy reviewed and no updates required.

3) No new outfalls installed that required mapping.

4) Dry weather flow monitoring not performed.

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

(ex.: samples/participants/events)

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

Yes ONo

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

• Yes O 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 IDDE training and convey to staff the importance of observation and quickly reporting incidents.

2) Revise and up-date IDDE Policy as needed

3) Update GIS mapping with new oufalls.

4) Perform dry weather flow monitoring of outfalls to detect for illicit discharge. (ORI)

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

1.		-	-	0		~	-	
N	Y	R	2	0	A	2	3	4

2

anna m

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?
- 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? \bigcirc Yes \bigcirc No

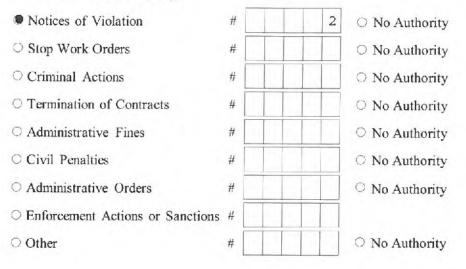
If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. © 09/2004 © 03/2006 © NT

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

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

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:



This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

Ŋ	Y	R	2	0	A	2	3	4
		-		-		-		-

SPDES ID

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?
- 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?
- 3. What percent of active construction sites were inspected during this reporting period? ONT

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

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

1

0 %

0 0 %

0

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?

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

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

SPDES ID NYR20A234

6. con't.:

0

Submit additional pages as needed.

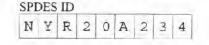
۲	MS4/Coalition	Office

	parti	nent																											
C	0	d	e	A	d	m	i	n	i	s	t	r	a	t	i	0	n									1	T	T	ī
Add	ires	s				-	-					-				-			-	-	-	-	-	-	-	-		-	-
S	В	A	1	4	0	0		W	a	s	h	i	n	g	t	0	n	Z	TA	7	e		1		Γ	T	T		-
City	,													-	-			-	Zi		-	-		-	-	-	-	_	-
A	1	b	a n	Y												N	Y			- 1	2	2	2	2	1	T		T	
Pho	ne		-	-	-		1							-		-	1	1	-		-		-	-	1	-		-	
(5	1	7)	4	4	2	-	3	4	0	0																		
orary											-																		
Add																													
				-													1		1	T					-	Τ	T	T	
City				_1				_			-	-		-					Zi	p	-	-	-	-	-	-	_	-	-
																	1.								-	Γ	1	1	
Phor	ne						-			-				_		-	-		-					-		-	1	_	
()				-																						
ier																													
Add																													
Auu	1035	T	T			1			1	1	1			1		T		1	T	T	T	1	1	-		1	1	T	_
City		_	1	1			_	_	-	_	4.					-		-	-	1	4	1							
	T	T	T			T	T	1	1	T			T			-			Zij		1		T	1		-	1	1	-
DI			-																										
	e					-	-	-	-	_			-			-									-	Ļ			
Phon			1		T	-		-			1														-				

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus



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) Adopt use of new SWPPP review checklist for project review.

2) Review compliance and complaint procedures.

3) Continue insertion of Stormwater Policy in construction documents.

4) Maintain SWPPP Project Summary Sheets.

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

1) SWPPP review checklist used to review projects.

2) Compliance and complaint procedures reviewed with no changes.

3) Stormwater Policy is included in construction documents.

4) SWPPP Summary Sheets are current.

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

(ex : samples/participants/events)

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

Yes ONo

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

• Yes O 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 use of SWPPP Checklist and examine procedures, and modify as necessary.
- Review SWPPP Inspection Reports from consultants.
- 3) Perform site visits at construction sites as needed.
- 4) Confirm insertion of Stormwater Policy in contract documents.
- 5) Examine new methods of erosion control.

MCM 4 Page 3 of 3

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

			ļ

SPDES ID

NYR20A234

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?

 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
• Alternative Practices	19	7	0
○ Filter Systems			
Infiltration Basins	6	0	0
O Open Channels			
Ponds	8	0	0
○ Wetlands			
• Other	4	0	0

- Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance?
- 3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?
- O Building Codes O Municipal Comprehensive Plans

O Overlay Districts O Open Space Preservation Program

- © Zoning © Local Law or Ordinance
- None Land Use Regulation/Zoning
- O Watershed Plans O Other Comprehensive Plan
- Other:

University Stormwater Poliicy

MS4 Annual Report Form	
This report is being submitted for the reporting period end	ling March 9, 2 0 1 7
If submitting this form as part of a joint report on behalf of a coali	ition leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition University at Albany (SUNY) Uptown Campus	N Y R 2 0 A 2 3 4
4a. Are the MS4s contributing to this report involved in a regional/wate	ershed wide planning effort?
	• Yes O No
4b. Does the MS4 have a banking and credit system for stormwater man	nagement practices?
	🔾 Yes 🔍 No
4c. Do the SWMP Plans for each MS4 contributing to this report includ and approval of banking and credit of alternative siting of a stormw	
	C Yes 9 No
4d. How many stormwater management practices have been implement reporting period?	ed as part of this system in this
reporting period.	4
5. What percent of municipal officials/MS4 staff responsible for progra training on Low Impace Development (LID), Better Site Design (BSI	
Infrastructure principles in this reporting period?	0 %

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

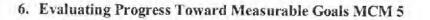
N

YR

20A2

3

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus



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) Review Stormwater Management Policy procedures for post- construction practices, revise if necessary.

2) Review Green Infrastructure design guidelines, modify if needed.

Inventory new post-construction practices.

4) Inspect all post-construction practices.

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

1) Stormwater Management Policy reviewed with no changes.

2) Green Infrastructure Guidelines reviewed with no changes.

3) New Post-Construction practices added to inventory.

Inspected 7 post-construction practices.

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

(ex.: samples/participants/rvents)

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

Yes ONo

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

• Yes O 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) Review Stormwater Management Policy procedures for post- construction practices, revise if necessary.

2) Review Green Infrastructure design guidelines, modify if needed.

Inventory new post-construction practices.

Inspect post-construction practices not examines in last reporting year.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

1.1	3.0	n	0	~		0	2	10
N	Y	R	2	0	A	2	3	14

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?

d	to	this rej	port?		
			the second second	 	

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.

			Self-Assess peration/Activ rformed within	ity/Facilit	
Operation/Activity/Facility	Addressed i		years	· · · · · · · · · · · · · · · · · · ·	-
Street Maintenance	• Yes	© No	O Yes	• No	
Bridge Maintenance		C No	O Yes	O No	
Winter Road Maintenance			Yes	C No	
Salt Storage		O No	O Yes	O No	
Solid Waste Management	• Yes	O No	Yes	O No	
New Municipal Construction and Land Disturba	nce O Yes	O No	O Yes	O No	
Right of Way Maintenance	····· O Yes	O No	O Yes	O No	
Marine Operations	O Yes	O No	O Yes	O No	
Hydrologic Habitat Modification		O No	© Yes	O No	
Parks and Open Space	O Yes	© No	O Yes	O No	
Municipal Building	GYes	© No	O Yes	O No	
Stormwater System Maintenance	• Yes	© No	O Yes	O No	
Vehicle and Fleet Maintenance		O No	⊃Yes	O No	
Other	O Yes	© No	○ Yes	O No	

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

1.1	1	1		1.000	1	-	1	1
M	V	R	2	0	Δ	2	2	A

2. Provide the following information about municipal operations good housekeeping programs:

 Parking Lots Swept (Number of acres X Number of times swept) 	# Acres			6	6
Streets Swept (Number of miles X Number of times swept)	# Miles		1	9	5
Catch Basins Inspected and Cleaned Where Necessary	#		2	5	8
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#				7
Phosphorus Applied In Chemical Fertilizer	# Lbs.			3	8
Nitrogen Applied In Chemical Fertilizer	# Lbs.	3	8	0	0
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.) 	# Acres		2 5	5].[4

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

0 2

2 7

2017

4 6

0 %

- 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?

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

YR

2

0 A

23

N

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

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) Conduct facility self-audit.
- 2) Continue use of AiMS for facility maintenance including sweeping and CB cleaning.
- Continue use of utilizing GIS for improvements and new facilities.

4) Develop summary records for use in preparation of Annual report.

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

1) Facility self-audit not performed

2) Use of AiMS system has assisted in tracking the work performed and also helped with scheduling and monitoring.

3) GIS mapping has been updated and base maps improved.

4) Summary records have been prepared and assist in completing the annual report.

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

(ex.: samples/participants/events)

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

Yes ONo

1

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

• Yes O 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) Conduct facility self-audit.
- 2) Continue use of AiMS for facility maintenance including sweeping and CB cleaning.
- 3) Continue use of utilizing GIS for improvements and new facilities.
- 4) Provide stormwater management training.
- 5) Examine additional methods for maintenance monitoring.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

N Y R 2

0

Name of MS4/Coalition

Stormwater Coalition of Albany County

Minimum Control Measure 1. Public Education and Outreach

1 2

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

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

How many MS4s contributed to this report?

				n /*
I.	Targeted Public Education a	nd Outreach	Best Management	Practices

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

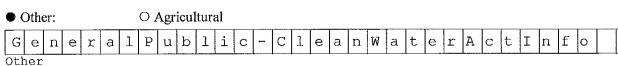
 Construction Sites • Pesticide and Fertilizer Application General Stormwater Management Information Pet Waste Management O Household Hazardous Waste Disposal O Recycling O Illicit Discharge Detection and Elimination Riparian Corridor Protection/Restoration Infrastructure Maintenance O Trash Management • Smart Growth Vehicle Washing O Water Conservation ○ Storm Drain Marking O Wetland Protection O Green Infrastructure/Better Site Design/Low Impact Development O None Other: t Y W С D С 0 1 i t i n е b s i t W h а 0 u а n 0 а 0 e

Other

2. Specific audiences targeted during this reporting period:

0	Public	Employees	•	Contractors
---	--------	-----------	---	-------------

- Residential
 O Developers
- Businesses
 General Public
- O Restaurants O Industries



MCM 1 Page 1 of 4

This report is being submitted for the reporting period ending March 9, $2 \circ 1 7$

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

Name of MS4/Coalition Storm

Stormwater Coalition of Albany County

SPL	DES	ID				
Ν	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			7	0
O Direct Mailings	# Mailings				
Kiosks or Other Displays	# Locations				8
• List-Serves	# In List		2	5	0
O Mailing List	# In List				
O Newspaper Ads or Articles	# Days Run				
Public Events/Presentations	# Attendees		1	1	9
O School Program	# Attendees				
• TV Spot/Program	# Days Run				1
• Printed Materials:	Total # Distributed			5	6
Locations (e.g. libraries, town offices, kiosks)					
C W P W e b c a s t s					

	P	1	а	n	n	i	n	g		В	0	а	r	đ		М	t	g	S	
	Т	r	а	i	n	i	n	g	ន	-	Ρ	u	b	1	i	с	Ρ	r	0	g
	W	A	V	Е	V	0	1	R	е	С	r	u	i	t	m	е	n	t		
Otł	ner:																			

Host 2 CWPWebcasts

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

W	Ŵ	w	•	s	t	0	r	m	a	t	e	r	а	1	b	а	n	У	С	0	u	n	t	У	•	0	r	g	
IRI																													

URL.	,										 	 										
					Ì								1	1								
					1]															
L	• •																		<u> </u>		 	
		<u> </u>		[L					L	· · · ·	1			I
			1		-			 		2		 										
																						i i
																						l l
		£				L																

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

tion	Stormwater Coalition of Albany County	
TIME		

SPI	DES	D					
N	Y	R	2	0			

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.

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.

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

BMP 1-1 Target Audience Analysis Worksheet (TAAW): not completed. BMP 1-3 Website: completed. BMP 1-7 List Serve: partially completed; drop/adds and updated emails provided by Coalition members; not entered into ACCESS database. BMP 1-6 Public Program-Guest Speaker: completed-1 CWA Presentation; not completed-Green Infrastructure Program to MS4 Electeds; no time to develop program and staff person organizing program left MS4.

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	0	No

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

۲	No
	۲

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

SWMPv5 (April, 2017) BMP 1-3 Website: continue to maintain Coalition website (post mandated documents; post educational material; post meeting announcements; pay invoice). BMP 1-7 List Serve: update ACCESS database; BMP 1-4 Publications: update door hanger publication; BMP 1-14 Public Programs-Organized By Coalition-host 1 CWP webcast.



This report is being submitted for the reporting period ending March 9, 2 0 1 7

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
 N
 Y
 R
 2
 0

Minimum Control Measure 2. Public Involvement/Participation

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

- \bigcirc 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:

\bigcirc Cleanup Events	# Events										
• Comments on SWMP Received	# Comments	0									
• Community Hotlines Phone # (518) 447											
Phone # ()	Phone # ()										
Phone # ()	Phone # ()										
Phone # ()	Phone # ()										
Phone # ()	Phone # ()										
Phone # ()	Phone # ()										
○ Community Meetings	# Attendees										
○ Plantings	Sq. Ft.										
\bigcirc Storm Drain Markings	#Drains										
\bigcirc Stakeholder Meetings	# Attendees										
• Volunteer Monitoring #Events											
$ \bullet \text{ Other: } C \circ a 1 i t i o n C \circ m m e $	n t s - D R A F T M S 4 P r	n t									

 Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?

Program (SWMP) Plan provided?	۲	s (\bigcirc No		
• List-Serve # In List			1	9	1
○ Newspaper Advertising # Days Run					
○ TV/Radio Notices # Days Run					
O Other:					

• Web Page URL: Enter URL(s) on the following two pages.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPL)ES	ID				
Ν	Y	R	2	0		

2. URL(s) con't.:

Į

Name of MS4/Coalition

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

Stormwater Coalition of Albany County

URL	,																		_											,,	
W	W	W	•	s	t	0	r	m	W	а	t	e	r	а	1	b	а	n	У	С	0	u	n	t	У	.	0	r	g		
											<u> </u>																				
																													1		
			I	<u> </u>		L .	ł	L	I		<u> </u>	I	ł	<u> </u>	ļ			I	I	<u>I</u>	L	I	1	1	I	1	L	1	1		
URL								1																					Γ		
			L				 	Ī			 			 						 					1						
			 					 			<u> </u>	 	l 	l 			[L	 		<u> </u>	 		1	<u> </u>	<u> </u>				
		l													I			L .			L	ļ			L		<u> </u>]			
URI	í—	·····				_	I		1			I			[[Γ				· ···	<u> </u>		Τ						
					[<u> </u>	L				 		 	<u> </u>			1		<u> </u>	 				1		 	1	\square	
Ŀ								 	 	<u> </u>						<u> </u>										<u> </u>	 T	I T			
																				<u> </u>											
URI	, T		T	1	r	1		·	1	1	1	1	1	r		1		1	1	r	1	1	1	1	1	1	<u> </u>	.		—	
																	Ļ					<u> </u>							<u> </u>		<u> </u>
	_													-																	
URI															_	_	_						-	_			_				
				Ţ																											
			İ	Ì									Í			1															
	1	Γ		1	1	<u> </u>						İ	Ī				Ì		Ī				Ī		Ť					İ	İ
URI		I	<u> </u>		1	1	1	.1	1	\$	- I	.l		1		*	1	1		<u> </u>	1	1	(1		l
							Γ				Γ																				
F				İ				\square	1	1				1	İ				Ī	İ			Ì	T	1	Ī	Ì	Ì		Ī	
-	<u> </u>	<u> </u>			+		1	$\frac{1}{1}$	1	1		<u> </u>			<u> </u>	1		<u> </u>	1			<u>+</u>			1	<u> </u>		1	+	<u> </u>	<u>+</u>
		I	L	I	1	<u> </u>			1	1			<u> </u>	1	1	1	l	<u> </u>		1	<u>t</u>	1	1	1	1	1		1	1	L	<u> </u>
		1							 	T					T											<u> </u>	Γ				<u> </u>
	1	<u> </u>	1		<u> </u>	<u> </u>	1	+	$\frac{1}{1}$			1	<u> </u>		$\frac{1}{1}$	<u> </u>		1	1		† ,		<u> </u>	<u> </u>	+	1	+				†
	1	 	<u> </u>	$\frac{1}{1}$	╞	<u> </u> 	1	<u> </u>	<u> </u> 	<u> </u>	1		+		<u> </u>	<u> </u>	 	<u> </u>	<u> </u>	<u> </u>	1		1			1	╈	$\frac{1}{1}$	<u> </u>	1	
[1	1	1	1	1	1			1	1	1	1		1	ł	1	1		1	1	1	1		1		1	1	1	1	i	1

MS4 Annual Report Form												
This report is being submitted for the reporting period ending March 9, $2 0 1 7$												
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID												
Name of MS4/Coalition Stormwater Coalition of Albany County 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 Department Department												
Stormwater Coaliition-AlbanyCnty												
Address												
1 7 5 G r e e n S t r e e t - C n t y H e a 1 t h B 1 d g City Zip												
A 1 b a n y N Y 1 2 0 2 - -												
Phone Control												
O Library O Annual Report O SWMP Plan O Comments												
City Zip												
O Other O Annual Report O SWMP Plan O Comments												
$\begin{array}{c c} Phone \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ $												
Web Page URL: Annual Report SWMP Plan Comment:												
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												
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												

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

		SPI	DES	ID				
Name of MS4/Coalition Stormwater Coalition of Albany County		Ν	Y	R	2	0		
4.a. If this report was made available on the internet, what da	ate was	it p	oste	d?	1	r-	<u> </u>	3]
Leave blank if this report was not posted on the internet.		0 5]/[0	5	/	2 0	1 7
4.b. For how many days was/will this report be posted?								14
If submitting a report for single MS4, answer 5.a If submitt	ting a jo	oint r	epoi	rt, a	ans	wer	5.b	
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?		。 /[Yes	O No				
If No, is one planned?						0	Yes	O No
5.b. Was an Annual Report public meeting held for all MS4s	contri	butir	ng ta	o th	nis :	rep	ort d	uring
this reporting period?						0	Yes	• No
If No, is one planned for each?						0	Yes	• No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.						0	Yes	• No

<u>MS4 Annual Report Form</u>

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

SPI	DES	ID			 		
N	Y	R	2	0			

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.

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.

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

BMP 2-2 Annual Report: completed. BMP 2-8 Student Water Quality Projects: partially completed; contract between UAlbany and County-Coalition completed; recruitment flyer for professors and students 85% completed. BMP 2-11 WAVE-8 sites monitored.

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 O 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).

SWMPv5 (April, 2017) BMP 2-2 Annual Report: Coalition staff prepare for and guide possible transition to "new" MS4 Permit likely to include changes in Annual Report format and annual program evaluation process-no particular goals named in SWMP document. BMP 2-11 WAVE-monitor 4 sites with volunteers.

This report is being submittee	for the reporting perio	d ending March 9,	2	0	1	7
--------------------------------	-------------------------	-------------------	---	---	---	---

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

Name of MS4/Coalition	County N Y R 2 0
3.b.What types of illicit discharges have	been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
O Failing Septic Systems	○ Pump Station Failure
○ Floor Drains Connected To Storm Sewers	○ Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
O Other:	O None
reporting period?	al illegal connections have been detected during this
·	en confirmed during this reporting period?
7. Has the storm sewershed mapping b If No, approximately what percent was	een completed in this reporting period? O Yes O No s completed in this reporting period? \$
 8. Is the above information available in Is this information available on the VII If Yes, provide URL(s): Please provide specific address of page URL 	

URL	<u> </u>																	····-					,					r			r
Ρ	а	s	S	W	0	r	d		Ρ	r	0	t	е	С	t	е	d		R	e	S	t	r	i	С	t	е	d			
h	t	t	р	s	:	1	/	a	С	v	a	r	С	g	i	s	•	а	1	b	а	n	У	С	0	u	n	t	У		С
С	0	m	1	W	е	d	m	а	p	1																					
URL	, 		1				r	r			1				r	Г			r		1		-	1	ł	1	r	1	r	<u> </u>	
																										ļ			<u> </u>		

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPI	DES	ID				
N	Y	R	2	0		

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.

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.

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

BMP 3-2 Coalition Stormwater Program Mapper: completed; re-design includes "Form" considerations; one design workshop, not 3; more complex redesign to include "Forms" pending development of RFP for consultant services. BMP 3-5 Dry Weather (ORI) -completed; kits restocked.

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 O No

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

• Yes O No

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

SWMPv5 (April, 2017) BMP 3-4 Storm Sys-CSO-Sewershed Map'g/BMP 5-8 Inventory Post Const SMPs/BMP 6-1 Inventory MuniFac: continue to implement mapping goals detailed in SWMPv5 (see MCM3, MCM 5, and MCM6); continue to implement objectives and tasks listed in the NYSDEC grant contract C00081GG work plan. See respective documents for details (SWMPv5 and grant work plan). Both explain what is being mapped where, when, and how for all Coalition members.

MCM 3 Page 4 of 4

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

	SPL	DES	ID				
1	N	Y	R	2	0		

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.

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Proceduresreview 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.

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

BMP 4-5 Construction Site Enf & Inspection Procedures: not completed; DRAFT MS4 Permit points to mandated MS4 Construction Inspection Forms, need to know status of DEC forms before proceeding further.

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?

O 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).

SWMPv5 (April, 2017): BMP 4-7 Construction Site Operator Training-4hr: co-host one 4 hr training with ACSWCD.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SP	DES	S ID				
N	Y	R	2	0		

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.

From SWMPv4 document (May, 2016): BMP 5-5 SWPPP Review Procedures - for Coalition Stormwater Program Mapper update/load map layers named in Construction Activity Permit/ NYSDEC SW Mgmt Design Manual. BMP 5-8 Inventory Post Construction Practices - with grant funding implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - with grant funding develop inspection forms for use with mobile devices

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

.BMP 5-5 SWPPP Review Procedures: partially completed, pre-existing layers uploaded, additional layers more difficult to obtain. BMP 5-8 Inventory Post Construction Practices: mapping of post-construction practices implemented as detailed in grant work plan. MP 5-9 Post Construction Practices: not completed.

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 O No

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

O 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 SWMPv5 document (April, 2017): BMP 5-8 Inventory Post Construction Practices - continue to map post construction practices as detailed in grant work plan and various SWMPv5 goals. BMP 5-9 Post Construction Practices-Maintenance: complete RFP for consultant services to develop GIS friendly post-construction stormwater management practice (PC SMPs) inspection forms (mobile devices).

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID N Y R 2 0

2

0 1 6

4 9

9

0

2 2

		,
	Stormwater Coalition of Albany County	
Name of MS4/Coalition		

2. Provide the following information about municipal operations good housekeeping programs:

○ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
O Streets Swept (Number of miles X Number of times swept)	# Miles	
O Catch Basins Inspected and Cleaned Where Necessary	#	
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O 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	

- 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?

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 \\ 0 \end{vmatrix} \begin{vmatrix} 1 \\ 7 \end{vmatrix}$

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

S	SPL	DES	ID				
	N	Y	R	2	0		

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.

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.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

	0	
--	---	--

(ex.: samples/participants/events)

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

Yes O No

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

• Yes O No

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

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

SPDES ID
N Y R 2 0 A 4 6

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:

O An Annual Report for a single MS4

O 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	0	r	m	w	a	t	e	r	C	0	a	1	i	t	i	0	n	0	f	A	1	b	a	n	У
С	0	u	n	t	У																					
								6																		

Name of

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

SPL	DES	ID	-	_			-	
N	Y	R	2	0	A	4	6	4
	N	NV	SPDES ID	NY R 2	NY R 2 0	NVR20A	NYR20A4	NYR20A46

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> 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).
- 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

- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

Firs	tNa	me	-	_		-	_	_	_			-		_		MI	,	Las	t Na	ame	-	1	-	-	- 1			_	_	1	T	T	T	-1
J	0	S	е	р	h			11								Ε		C	0	f	f	e	У									1		
Titl	e				-				_	_		_	_			_	_		_	_		-	1	-	-					_	-	-	1	
C	0	m	m	i	s	s	i	0	n	е	r																							
Add	ires	s							_				_	_	_			_		_	_	_	1	-		-	_			1	-	-	-	_
1	0		N		E	n	t	e	r	p	r	i	s	е		D	r	i	v	e														
City	1							_			_		_		_			_		S	tat	e	Z	ip		_	-	_	1	-		-1	-	-
A	1	b	а	n	У		*										1			1	N	Y		L	2	2	0	4	-					
eM	ail														_			_	_		_	-	-	-	_	-	-	_	-	-	-	-	-	-
j	C	0	f	f	e	У	@	a	1	b	a	n	У	n	У		g	0	v									1						
Pho	one				_				_	-		_						Co	unty	1	_	-	1	-	_			-	_	-	-		-	_
(5	1	8)	4	3	4]-	5	3	0	0						A	1	b	a	r	Y	7										

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Mama	of MSA	City of Albany

SPDES IDNYR20A464

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> 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:

O Principal Executive Officer/Chief Elected Official

- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

Firs	tNa	me				_	_	-	_			_	_			MI	1	Las	t Na	ame	-	-	-	-	1	-	-	_	-	-	-		-
Ρ	е	t	е	r											10	W		В	e	C	k												
Title	e						-		_	_					_		_		_	_	_	_	1		-	_		_		-	1	-	-
S	t	0	r	m	w	a	t	е	r		Ρ	r	0	g	r	a	m		М	a	n	a	g	e	r								
Add	Ires	s											_					_	_	-	_	-		_	_	_	-	-	-	T	-		
1	0		N			Е	n	t	e	r	p	r	i	s	е		D	r	i	v	е												
City	1														_					S	tate	;	Zi	5	1		_	-	-			_	-
A	1	b	a	n	У									1	1]	N	Y	1	2	2	0	4	-					
eMa	ail															_				_		_		_	_	_		_	-	-	-		
p	b	e	С	k	@	a	1	b	a	n	У	n	У		g	0	v				T												
Pho	ne					h					-							Co	inty	1	_	T	-	-		_	-	-		-	-	-	-
(5	1	8)	4	3	4	-	5	3	0	0						A	1	b	a	n	У										

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 7

	SPDES ID
Name of MS4 City of Albany	N Y R 2 0 A 4 6 4

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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.

1 alt	ner	100	anu	onr	Jam	e													-	_	_	-	_	-	_	-	-		_	_		-
S	t	0	r	m	W	a	t	e	r		C	0	a	1	i	t	i	0	n		0	f		A	1	b	a	n	У			
Part	ner	/Co	aliti	ion I	Vam	e(c	on't	.)									_				_			SPL	DES	Par	tner	ID	- If	app	lica	ble
С	0	u	n	t	У		1																	Ν	Y	R	2	0				
Add	res	s											_						_	_	_		-			-		-		-	_	-
1	7	5		G	r	е	е	n		S	t	r	е	е	t					2												
City	1																	-	_	St	ate	_	Zip		_		_		-	-		_
A	1	b	a	n	У					E		2		hđ	N					N	IY		1	2	2	0	2	-				
eMa	ail									_					_				-	_			_	_			_		_	_	_	
s	w	C	0	a	1	i	t	i	0	n	@	a	1	b	а	n	У	c	0	u	n	t	У	٠	С	0	m	1				
Pho	me		1																													
(5	1 tas	8 ks/]) resj	4 pon	4 sib	7 iliti	es :	5 are	6 sha	4 arec	5 1 w	ith	this	s pa	ırtn	er (e.g					-002	2 Pa Pro					Ye	es		No ks)
(5 nat	tas	-]) resj u	-		-		-	1	2-31		ith n	this -	s pa	rtn	er (e.g					-002					•		es		
(w)	5 hat MM	tas 11	ks/	Г	pon	sib	iliti	es	are	sha	urec i	łw	-			1	-		;. N	IM I	1 S	cho	-002 001	Pro	gra	ms	or	Mu	ıltij	ole	Tas	
(W] • 1	5 hat MM	tas 11 12	ks/	u	pon b	sib	iliti 1	es :	are	sha t	irec	l w o	n	-	P	r	0	g	r,	IM a -	1 S	s	-002	Pro W	gra e	ms b	or	Mu i	ltij t	es ble e	Tas	ks)
(W] • I	5 hat MM	tas 11 12 13	ks/ P S	u W	pon b M	sib 1 P M	iliti i D	es : c	are a c b	sha t u	i i m	l w o e	n n	- t	P - r	r	0 A	g	r E	IM a	n P	s u	-002 001	Pro W	gra e i	ms b c	or	Mu i I	ltij t	es ple p	Tas s u	ks)
(WJ • 1 • 1 • 1	5 hat MM	tas 11 12 13 14	ks/ P S S	u W W	b M I	sib 1 P M	iliti i D W	es c o	are a c b	sha t u M	i i m a	o e p	n p p	- t	P - r	r W R	o A e	g V	r E e	IM a - s	1 S m P i	s u g	-002 001 - b	Pro W	e i 0	ms b c R	or s	Mu i I K	ltij t n	e p t	Tas s u	ks) t

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 Certificati	on	MC	C) I	For	• <u>m</u>					
MCC form for period ending March 9	, 2	0 1	7							
		SF	DES	ID	_					
Name of MS4 City of Albany		N	Y	R	2	0	Α	4	6	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.

Joseph h	MI E	Last NameCoffey,P.E.
Title(Clearly print title of individual signing report) C o m m i s i o n e r		
JOERE CAPAJE.		Date 0 5 / 2 4 / 2 0 1 7

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

This report is being submitte	for the reporting period ending March 9	, 2	0	1	7	
-------------------------------	---	-----	---	---	---	--

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 Albany

Water Quality Trends

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

On behalf of an individual MS4

 \bigcirc On behalf of a coalition

How many MS4s are contributed to this report?

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. \bigcirc Yes

Yes No

SPDES ID

N

Y R 2

0 A

4 6 4

If Yes, choose one of the following

O 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			 		_					1				-	-			
	1.000																	
	1				-		-		-						Ť			
										-								
·							1		_						-		_	
URL			-		_			_	1		_							
			1.11															
					-		-		-	+		-			-	-	-	+
									110	1.								
							1			1		T	-			T	1	
URL																		
		1.000										_	-		_	_	-	
100																		
					-				-	-		-		-		+	-	
					1.1				TIM					111	1.3			
IDI						1												
URL	TT			TT	-		1		T	T			1	1				
			1.00			-				11-				100				
					_		-		-	_		-	-			-	-	
					- NO				11					n in			100	
1000							-			_		_		1-				

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

2 0 A

4 6 4

		-
Name of MS4/Coalition	City of Albany	

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:

 Pesticide and Fertilizer Application Construction Sites Pet Waste Management General Stormwater Management Information Recycling Household Hazardous Waste Disposal O Riparian Corridor Protection/Restoration O Illicit Discharge Detection and Elimination Trash Management O Infrastructure Maintenance ○ Vehicle Washing O Smart Growth O Water Conservation Storm Drain Marking O Wetland Protection • Green Infrastructure/Better Site Design/Low Impact Development O Mana

0	Other: Pools, Fountain															-		0	140	ne	 	-	-	-	-	-	-
р	0	0	1	s	,	F	0	u	n	t	a	i	n	s	δc	S	p	a	s								
ot	her										-																

2. Specific audiences targeted during this reporting period:

Public Employees	ntractors
------------------	-----------

Residential	Developers

- Businesses General Public
- O Restaurants O Industries

O Other:	0	Agricu	ltural												
		TT					1								
		_		Contract.	-	- 4	12	2.1	100	 -			 -	1	

MCM 1 Page 1 of 4

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 7$

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 Albany

51.1				-	1	-	-	-
N	Y	R	2	0	A	4	6	4

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

ings Other D tt Ads or nts/Pre gram	r Arti	cles																#1	.oca	ling: tion: Lis	s	4	7		1
t Ads on nts/Pre	r Arti	cles																			-		T	4	-
Ads on nts/Pre																			# In	Lis	t			4	5
Ads on nts/Pre																									0.05
nts/Pre																			# Ir	ı Lis	t 🗌				
	senta	tions																# I	Days	Ru	1 🗌				
gram																		# A	tter	ndee	s	1	.]]	. 2	2 5
																		# A	Atter	ndee	s]	. (5
ogram																		# I	Days	Ru	n				
		20.00														To	tal	# Di	istril	bute	d [12	2 5	5 3
	100		2221		5.00	e	r		D	e	p	t		T											
														-	_										
	(e.g. lil b a i l l l l l l Pro	b a n y	(e.g. libraries, town b a n y l l l l l l l l l l l l l l l l l l l	(e.g. libraries, town off b a n y W C C C C C C C C C C C C C C C C C C C	(e.g. libraries, town offices, b a n y W a b c c c c c c c c c c c c c c c c c c c	(e.g. libraries, town offices, kio b a n y W a t l l l l l l l l l l l l l l l l l l l	(e.g. libraries, town offices, kiosks) b a n y W a t e	(e.g. libraries, town offices, kiosks) b a n y W a t e r y W a t e r b a n y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e r y W a t e	(e.g. libraries, town offices, kiosks) b a n y W a t e r a n y W a t e r a n y W a t e r a n y W a t e r a n y w a t e r a n y w a t e r a a a b a a a a b a b a a b a a b a b a a a a a b a a a a a a a a a a a a a a a a a a a a a a a a a a a <	(e.g. libraries, town offices, kiosks) b a n y W a t e r D C C C C C C C C C C C C C C C C C C C	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e b a n y W a t e r D e b a n y W a t e r D e a n y W a t e r D e a n y W a t e r D e a n y W a t e r D e a n n n n n n n n n a n	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p $ \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline \hline$	(e.g. libraries, town offices, kiosks) p a n y W a t e r D e p t p a n y W a t e r D e p t Provide specific web addresses - not home page	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t .	(e.g. libraries, town offices, kiosks) p a n y W a t e r D e p t .	(e.g. libraries, town offices, kiosks) p a n y W a t e r D e p t .	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t . Provide specific web addresses - not home page. Continue or	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t . Provide specific web addresses - not home page. Continue on next	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t . Provide specific web addresses - not home page. Continue on next page if	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t . Provide specific web addresses - not home page. Continue on next page if addition	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t	(e.g. libraries, town offices, kiosks) b a n y W a t e r D e p t i

URL		_			 _		_		-	_	 		-	-						 			
																			173				12
	-		-		-	-	-	+	-		 -	-			-	-	+	-			-	-	
			11	1000		14			11									1.					
	-		-				1	1	1				1		T			-					
										1.1				2			111	1.1				1	

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

	_							_		_		-		S	PD	ES	ID	-	-	_	-		_
ne of MS4/Coaliti	on City	of Alba	ny							_				1	N	Y	R	2	0	A	4	6	-
Web Page cor			vide s	peci	ific v	veb	add	ress	ses -	no	t ho	me	pag	e.									
JRL	TT	11		T						T	T	1		T							1		
		++			-	-		1	+	-	+	T				-		-	_	-		-	Ē
		++		-	_			+	-	-	-	-		_	-						_	-	
									-						_	_	_			_	_		_
URL		11		T	-				T	Т		1			-	-		-			1	-	
			_	-	_	-		-	+	-	-	-		-	-	-	_	-	-		-	-	L
								_	_	-	+	-		-	_	_	_				_	_	L
											_											_	L
URL	1 1			_	-1-			-	-	T	1	-			-	-		-			-	-	Г
						_		_	_	-	-	_				_				_			
			1			1						_											
URL															_			_		_	_		
												1											
URL			-									-											Ĩ
	11	T																					Ī
			-		1	1				1		T											Ť
			-		-	-	-			-	1	-			-				-			-	1
URL	TT								T		T		1	Π	1			Γ					T
	++				1	-				+	1				-		-	-					Ī
			-	H		-	-			-		+	+				1	-	-	-	-		Ţ
																		-					1
URL	TT				T	T				1	1	T	1		-		-	-	1	1			T
	+		_		_		-			_	-	-	-		-		-	-	-	-			
																							1

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

Ν

Y R 2

0 A

4

6 4

Name of MS4/Coalition	City of Albany
-----------------------	----------------

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. Stormwater coordinator (SWC)/staff to continue stenciling of catch basins in Hungerkill and Normanskill Watersheds. 2. SWC/staff will maintain 2 brochure racks at AWD and 1 new brochure rack at City Hall. 3. Drop Goal # 3 and focus time & resources to Radix Center with signage and brochure development work with graphic designer.

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

1. Staff stenciled 13 catch basins within the Krumkill watershed. 2. SWC/staff maintained 2 brochure racks at AWD and researched the location of a new brochure rack at City Hall. 3. Radix signage has been developed.

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

110	11	6
1.0	1	2

(ex.: samples/participants/events)

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

Yes ONo

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

• Yes O 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. Stormwater coordinator (SWC)/staff will continue the stenciling of catch basins within the local watersheds. 2. SWC/staff will maintain 2 brochure racks at AWD and research possible new locations. 3. SWC will continue to participate in school programs and tabling events. 4. SWC/staff will update the city stormwater website with additional stormwater material. 5. SWC/staff will continue to provide stormwater literature through direct mailings.

MCM 1 Page 4 of 4

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

N Y R 2 0 A 4

6 4

Name of MS4/Coalition	City of Albany
-----------------------	----------------

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.

4. SWC will participate in school program and tabling events.

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

4. COA participated in 5 tabling events entitled Earth Day on 4/17/16 and City Hall On The Road on 7/20/16, 8/23/16, 9/13/16 and 9/27/16. COA participated in 2 school programs entitled Future City Competition on 1/21/17 and the School 19 Program on 11/15/16. COA participated in 1 school presentation at the Mainonides Hebrew Day School on 9/9/16. COA participated in one community neighborhood meeting at the Hanson Ryckman homeowners association on 8/29/16.

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

	1.1				1.1.1		
				-			
(ex. :	samp	les/	par	tici	pant	s/et	ents)

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

OYes ONo

F	Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	O Yes	ONC
L'.	Is your WIS4 on schedule to meet the deaunite set for the in the S while I.	0 105	0110

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

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

N

Y R 2

0 A

6 4

4

Name of MS4/Coalition	City of Albany
-----------------------	----------------

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:

O Cleanup Events #Events												1	
O Comments on SWMP Received		#Comments											
Community Hotlines	Phone #	(5	1	8)	4	3	4	-	5	3	2	2
Phone # ()	Phone #	(5	1	8)	4	3	4	-	5	3	0	0
Phone # ()	Phone #	()				-				
Phone # ()	Phone #	()				-				
Phone # ()	Phone #	()				-			14	
Phone # ()	Phone #	()				-			Ū.	
Community Meetings					#.	Atte	ende	ees				2	5
○ Plantings						1	Sq.	Ft.					
Storm Drain Markings						#1	Drai	ins				1	3
O Stakeholder Meetings					#	Atte	ende	ees					
O Volunteer Monitoring						#1	Eve	nts					
O Other:													

Program (SWMP) Plan provided?	• Yes ON
○ List-Serve	# In List
O Newspaper Advertising	# Days Run
O TV/Radio Notices	# Days Run
○ Other:	
• Web Page URL: Enter URL(s) on the follow	g two pages. 2 Page 1 of 6

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 Albany

 SPDES ID

 N
 Y
 R
 2
 0
 A
 4
 6
 4

2. URL(s) con't.:

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

URL ty coun or g 1 b a n y t r a . W w W s t 0 r m W a e . URL a t e r a s p x a n y n y org 1 st 0 r m w 1 b . W a WW . URL URL URL URL URL

This report is being s	ubmitted for the repor	ting period ending	March 9,	2	0	1	7
------------------------	------------------------	--------------------	----------	---	---	---	---

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

SPI	DES	ID	_			_	-	_
N	Y	R	2	0	A	4	6	4

2. URL(s) con't.:

Name of MS4/Coalition City of Albany

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

URL						-	-	-	-	-	-1	-	-	-1	-	-		-	-	-	Т	1	-		Т	T	7
											_		_		-	_	-	-		-	-	-	-	+	+	+	4
URL																									_	_	
				1			1		1																		
		-		-			-	-	-	-					-		-		1	1	-		1	1	1	T	٦
		_					-	-	ė.	-	_	-					_	-	_	_				-	_	-	_
URL	1 1 1			_			-	-		-	-	-			-	-	-	1	-	-	1	1		1	1	T	7
									_	_	-	_			_	-		-	-	-	-	-	-	-	_	_	_
																		_						_	1		_
URL												Ξ,															
					1					1							11										
			+	-	1		_		_										1				1		11		
					-			_	-	-		1	-		-		-		-		-	-			-	1	
				-				-				_	_		-	_			-	-	-		-				
URL	1-1-			-		-		-			-	-	-	-	-	-	-	-	1	-		-1	-	-			-
													_	_			_			_	_		-	_	-		-
																									_		
URL																											
	T							-																			
			1	T	1	1								1		1											
-			+		-	-	-	-		-	-		1			-								-			-
					_		_		1				-	L												-	
URL			-		-	-	-	_	-	-	-	-	-	1	-	-	-						-				-
					_	_				-			-			-	-			_	-			_			-
																						-					

	MS4 Annual Report Form	
	ted for the reporting period ending	
If submitting this form as pa	rt of a joint report on behalf of a coalition	leave SPDES ID blank.
Name of MS4/Coalition City of Albany		N Y R 2 0 A 4 6 4
Program SWMP) Plan and sub Enter address/contact info and set	opies of this annual report, Stormwa bmit comments on those documents? elect radio button to indicate which doo	cument is available and
	itted at that location. Submit addition	
 MS4/Coalition Office 	Annual Report	SWMP Plan • Comments
Department Department	of Water &	WaterSup
	of Water &	
Address 10NorthE	nterprise Dr	ive
City		
Albany	N Y 1	2 2 0 4 -
Phone		
	5 3 0 0	
	○ Annual Report	O SWMP Plan O Comments
O Library Address		
City		
Phone		
• Other	Annual Report	SWMP Plan Comments
Address		
1 7 5 G r e e n	Street	
City		2202-
Albany	NY 1	
$\frac{\text{Phone}}{(518)} 447 - \frac{1}{2}$	5 6 4 6	
(518)447-!		
○ Web Page URL:	Annual Report	SWMP Plan Comments
	yny.org/storm	water.asp
www.alban3		
Please provide specific addre	ess of page where report can be accesse	ed - not home page.
○ eMail		O Comments

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

	SE	PDES	SID			-	
Name of MS4/Coalition City of Albany	N	I Y	R	2	0 A	4	6 4
4.a. If this report was made available on the internet, what date	was it p	post	ed?	_	. –	1	
Leave blank if this report was not posted on the internet.	0 5	5/	0	5	/ 2	0	1 7
4.b. For how many days was/will this report be posted?							14
If submitting a report for single MS4, answer 5.a If submitting	a joint	rep	ort,	ans	wer 5	.b	
5.a. Was an Annual Report public meeting held in this reporting If Yes, what was the date of the meeting?	; period	1?] /			о у / [es	• No
If No, is one planned?					ΟY	es	• No
5.b. Was an Annual Report public meeting held for all MS4s con	ntribut	ing	to t	his	repor	rt d	uring
this reporting period?					ΟY	es	• No
If No, is one planned for each?					ОУ	es	• No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					ОҮ	es	• No

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$

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

Name of MS4/Coalition Ci	ty of Albany
--------------------------	--------------

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. City of Albany (COA) will update public contact annually. 2. COA will post Final Joint Report on website (stormwater page). 3.SWC will develop procedures which clarify how queries & complaints are routed and monitored across all relevant Departments and new procedures will be developed as necessary.

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

1. SWC has updated the public contact. 2. The 2016 Final Joint Report was posted on the Albany County Stormwater Coalition website. 3. SWC reviewed with the Commissioner how queries & complaints are handled.

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

9

(ex.: samples/participants/events)

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

• Yes O No

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

O No • Yes

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

1. City of Albany (COA) will update the public contact annually. 2. COA will post a 2017 Final Joint Report on website (stormwater page). 3. AWD will continue to lend support in the way of education and operational guidance information to community groups. 4. COA will coordinate with community and activist groups to plan and initiate public events.

MCM 2 Page 6 of 6

SPDES ID 4 6 4 YR2 0 A N

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

0 5 #

1

2

0 A

4 6 4

0

1

0 %

Name of MS4/Coalition City of Albany

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
- O 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?

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

L

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,	2	0	1	7	

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

				_		_	_	_						_			-	_			S	PDI	ES I	D		-1-	-		
Name of	MS	4/Co	alitio	Ci	ty of	Alba	ny				_	_						_			1	N	Y	R	2	0 7	£	4	6 4
3.b.W	hat	typ	es c	fill	icit	dis	cha	arge	es l	iav	e b	eei	n fo	an	d d	lur	ing	thi	is r	epo	orti	ing	per	rio	1?				
Brok																		tion											
O Cros											○ Inflow/Infiltration																		
O Faili	ing s	Sept	ic Sy	/sten	ns						. 1	O P	um	p S	tati	on	Fail	lure											
O Floo	r D	rains	Co	nnec	ted	То	Stor	m S	Sew	ers	1	0 5	Sani	tary	Se	ewe	r O	veri	flow	/S									
• Illeg	al I	Dum	ping								1	0.5	Stra	ight	Pij	pe S	Sew	er I	Disc	har	ges	51							
O Othe	er:	Т				1						10	Non	e		1			Т	1				T		1		T	
			ıy il ç per			cha	irge	es/p	ote	ent	ial	ille	gal	l co	nn	ect	ion	s h	ave	be	en	de	tect	ed	du	rin	g tl	his	4
5. H	ow	mar	ıy il	licit	dis	cha	arge	es h	av	e b	eer	n co	onf	irm	ned	du	rin	g ti	his	rej	or	tin	g p	eri	od?				3
	erio	d?	ay il																								epc [Ye:		ng 3 0 N
7. H If	No	, app	prox	ima	tely	wh	at p	berc	ent	t w	as	con	nple	etec	d in	th	is re	epo	rtin	g P	eri	od?	,						9
If	thi Ye	s in s, pr	forr ovid	nati le U	on a RL	ava (s):	ilat	ole	on	the	w	eb:	?								4		ha			0	Ye: Ye:		O N • N
Ple		pro	vide	e spe	eciti	ic a	ddre	ess	01	pag	ge v	whe	ere	maj	p(s) ca	in c	e a	cce	sse	u -	not	. 110	me	pa	ge.			
P	a	S	s v	0	r	d		P	r	0	t	е	С	t	е	d		R	е	s	t	r	i	C	t	e	d		
h	t	t	ps	3 :	1	1	a	C	v	a	r	С	g	i	s	4	a	1	b	a	n	У	С	0	u	n	t	У	
С	0	m	/ 1	e e	b	m	а	p	1								1				Ĩ.					1-4-1			
URI	4			1		_	_		- 1		_	-		-	_						-	-		-	_		_		1
	11														1											_			
													5																_
												11.00			11.									0					

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

4

		SPI	DES	ID				-	-
Name of MS4/Coalition	City of Albany	N	Y	R	2	0	Α	4	6
- transmitting a substitution and a substitution									

8. URL(s) con't.:

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

URL		<u> </u>
URL		
URL		
URL	<u></u>	

- 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?
- 10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law?

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

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

Name of MS4/Coalition	City of Albany
-----------------------	----------------

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. Stormwater staff will review completed construction projects for potential outfalls and map using GIS. 2. Stormwater staff following the ORI Inspection Schedule Map will complete ORI on approximately 20 percent of the mapped Outfalls. 3. Stormwater staff will review and update as needed existing procedures for the IDDE program. 4. Stormwater staff will collect data and map any illicit discharges in the GIS system.

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

1. Stormwater staff has reviewed completed construction projects for potential outfalls. No new outfalls were identified or mapped. 2. Stormwater staff followed the ORI Inspection Schedule Map and completed ORI on 20 outfalls. 3. Stormwater staff reviewed existing procedures for the IDDE program, no updates were performed. 4. Stormwater staff has collected data and mapped 2 illegal dumping illicit discharges in the GIS system.

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

	141
 _	

6 4

4

0 A

(ex.: samples/participants/events)

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

Yes ONo

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

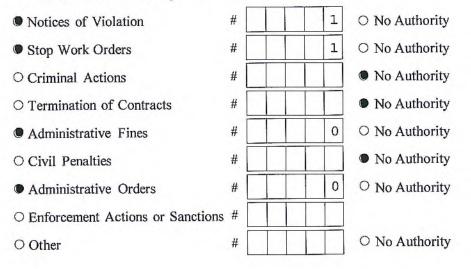
• Yes O No

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

1. Stormwater staff will review all completed construction projects for potential outfalls and map utilizing GPS/GIS technologies. 2. Stormwater staff following the ORI Inspection Schedule Map will complete ORI on approximately 20 percent of the mapped outfalls. 3. Stormwater staff will review and update as needed existing procedures for the IDDE program. 4. Stormwater staff will collect data and map any illicit discharges in the GIS system.

MS4 Annual Report Form	_		
This report is being submitted for the reporting period ending	March 9, 2	0 1 7	
If submitting this form as part of a joint report on behalf of a coalition	leave SPDES I	D blank.	
	SPDES ID		
Name of MS4/Coalition City of Albany	NYR2	0 A 4	6 4
Minimum Control Measures 4 and 5			
Construction Site and Post-Construction C	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, ordinanc mechanism that provides equivalent protection to the NYS SPDES Stormwater Discharges from Construction Activities?	e or other reş 6 General Per	gulatory mit for • Yes	O No
1b. Has each Town, City and/or Village contributing to this report do equivalent to a NYSDEC Sample Local Law for Stormwater Man Sediment Control through either an attorney cerfification or using Analysis Workbook?	agement and	Erosion C Gap	v is and O NT
If Yes, Towns, Cities and Villages provide date of equivalent NYS Saturation \bigcirc	mple Local La 09/2004 • (aw.)3/2006	0 NT
2. Does your MS4/Coalition have a SWPPP review procedure in pla	ce?	• Yes	O No
3. How many Construction Stormwater Pollution Prevention Plans (reviewed in this reporting period?	SWPPPs) ha	ve been	5
4. Does your MS4/Coalition have a mechanism for receipt and conside comments related to construction SWPPPs?	deration of p • Yes	ublic O No	0 NT
If Yes, how many public comments were received during this reportin	g period?		0
5. Does your MS4/Coalition provide education and training for cont SWPPP process?	ractors abou		al O 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:



This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 Albany
-----------------------	----------------

-		-	126.71		1.000	1.1	11.00	
TA	37	D	2	0	A	1	G	1.3

0 0

%

ONT

0 0 %

1

1

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?
- 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?
- 3. What percent of active construction sites were inspected during this reporting period? ONT

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

- 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?
- 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.

This report is being submitted for the reporting period ending March 9	, 2	0	1	7	
--	-----	---	---	---	--

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 Albany
-----------------------	----------------

SPDES ID N Y R 2 0 A 4 6 4

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

	artme	nt	-		-		_			_	-				_		_				-	-		-	-	-	_
D	e p	t			0	f		Wa	a t	e	r		&		W	a	t	е	r		S	u	p	р	1	У	
Add	ress	_										_					_							_	_	_	_
1	0	N	0	r	t	h		Elı	1 t	e	r	p	r	i	s	е		D	r	i	v	е					
City		-						-			-				-	-	-		Zip	-		-		ſ	_	_	_
A	lk	a	n	У											N	Y			1	2	2	0	4	-			
Pho	ne	-			_		-	-		-	-																
(5]	. 8)	4	3	4	-	5	3 0	0 0																	
rary																											
	lress			_		-				-	-	-		_	-		-	_	-	_	-	-	-	-	-	-	r-
21																									_		
City	/		-	-	_	-	-	-	-	-	-	-			F	-	٦		Zip		-	-					-
						11									L						_			-	_	-	
Pho (])				-[]																
ner																											
Ad	iress	1	1	1	T			1	T		Т	T	1		1	Г		Ē	Г							1	T
Cit		_							_	_	-	-	1	_	-	-	-	-	Zip	-	-	-	-		-	-	1
City					1	T		T	T	T	T	1			Γ	T							1	1			Τ
Pho		_	-		-			-	1	_	-	-			L		_		-	-			-	1	-	1	1
(])]-[
	×	The T																									
eb P	age l	JRL((s):	F	Plea	se p	provi	de s	pec	ific	add	ress	whe	ere	SW	/PP	Ps	can	be	acce	esse	ed -	not	ho	me	pag	ze
			(s):	F	Plea	se p	provi	de s	pec	ific	add	ress	whe	ere	SW	/PP	Ps	can	be	acce	esse	ed -	not	ho	me	pag	ze T
			(s):	F	Plea	ise p	provi	de s	pec	ific	add	ress	whe	ere	SW	/PP	Ps	can	be	acce	esse	ed -	not	ho	me	pag	ge
			(s):	F	Plea			de s	pec		add	ress	whe	ere	SW	/PP	Pso	can	be		esse	ed -	not	ho	me	pag	
			(s):	F							add	ress	whe	ere	SW	/PP	Pso	can	be			ed -	not	ho	me		
			(s):	F							add	ress	whe	ere	SW	/PP	Ps o	can	be			ed -	not	ho	me		
			(s):								add	ress	whe	ere	SW		Ps (be			ed -	not	ho			
			(s):									ress	whe		SW		Ps (be			ed -		ho			
			(s):	F									whe		SW	/PP			be			ed -	not	ho			

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

N

YR2

0 A

6 4

4

Name of MS4/Coalition City o	t Albany
------------------------------	----------

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. City of Albany Stormwater staff will continue to e-mail contractors about the availability of 4-hr E-SC Training Courses. 2. The SWC will take the forms created by the Albany County Stormwater Coalition Forms Committee and modify them for best and implementation in the City of Albany.

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

1. City of Albany Stormwater staff e-mailed 45 contractors about the availability of 4-hr E-SC Training Courses on February 27, 2017. 2. The SWC reviewed the forms created by the Albany County Stormwater Coalition. However, the SWC has not implemented any of the information into the City of Albany forms.

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



(ex.: samples/participants/events)

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

• Yes O No

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

• Yes O 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. Stormwater staff will continue to e-mail contractors about the availability of 4-hr E-SC Training Courses. 2. The SWC will take the forms created by the Albany County Stormwater Coalition Forms Committee and modify them for best implementation for the City of Albany. 3. SWC will provide erosion and sediment training material during pre-construction meetings. 4. COA will review all SWPPP's on proposed projects and provide monthly inspections on active construction sites.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 Albany
-----------------------	----------------

N	Y	R	2	0	A	4	6	4
4			-	-		-		

SPDES ID

Minimum Control Measure 5. Post-Construction Stormwater Management

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

On behalf of an individual MS4

O 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			
O Alternative Practices						
O Filter Systems						
 Infiltration Basins 		2	2			
O Open Channels						
• Ponds		1	1			
○ Wetlands						
• Other		4	4			

- Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction
 BMPs, inspections and maintanance?
- 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

O Overlay Districts O Open Space Preservation Program

- Zoning
 Local Law or Ordinance
- O None O Land Use Regulation/Zoning
- O Watershed Plans O Other Comprehensive Plan
- O Other:

MCM 5 Page 1 of 3

MS4	Annual	Report	Form

This report is being submittee	for the reporting period ending	g March 9,	2	0	1	7
--------------------------------	---------------------------------	------------	---	---	---	---

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

	SPI	DES	ID					_
Name of MS4/Coalition City of Albany	N	Y	R	2	0.	A 4	6	4
4a. Are the MS4s contributing to this report involved in a regional/wat	ershed w	vide	e pla	ann	ing	effor		
					0	Yes	C	No
4b. Does the MS4 have a banking and credit system for stormwater ma	inageme	at p	orac	etice	es?			
					0	Yes	C	No
4c. Do the SWMP Plans for each MS4 contributing to this report inclu	de a pro	toce	ol fe	ore	valu	uatio	n	
and approval of banking and credit of alternative siting of a storm								
						Yes		No
4d. How many stormwater management practices have been implemen reporting period?	ited as p	art	of t	this	syst	tem i	n th	nis

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?

%

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

0 A

4

6 4

Name of MS4/Coalition City o	of Albany
------------------------------	-----------

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. Stormwater staff will monitor and participate as needed in the City Re-Zone Albany Initiative, so that code language consider the model local law language developed as part of the "GILLAC" grant. 2. SWC will continue to update inventory of built stormwater practices since 2003 and record in annual report. 3. Stormwater staff will GPS existing practices as discovered and 100 percent of new post construction practices in the Departments GIS.

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

1. Several Albany Water Department staff have been involved in the code review and City Re-Zone Initiative so the code language will consider the model local law language developed in the GILLAC grant work. 2. The SWC researched old developments and projects to update the inventory of practices, stormwater practices were GPS and inspection & O&M letters were sent, inventory changes are reflected in the annual report. 3. SWC GPS 100 % all newly discovered/built practices.

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

1		-
	12	11
	18.521	

(ex.: samples/participants/events)

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

Yes ONo

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

• Yes O 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. SWC/staff will participate as needed in the City Re-Zone Albany Initiative, so that code language considers the model local law language developed as part of the "GILLAC" grant. 2. SWC/staff will continue to update the inventory of built stormwater practices since 2003 and record them in the annual report.

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	

	1521	1.1.1	1.51	1.63	1.	
M	v	P	2	0		

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.

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

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

			_	1.1	
2	samples/	parti	cipant	s/even	ts)

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

O Yes O No

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

O Yes O No

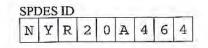
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

3. SWC/staff will GPS existing practices as discovered and 100 percent of new post construction practices in the Departments GIS. 4. SWC/staff will continue to request Operation and Maintenance records for all post construction facilities on an annual basis.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 Albany



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

 \bigcirc 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>Self-Assess</u> Operation/Activi	ity/Facility	
Operation/Activity/Facility	Addressed in	the second second second second	performed within years?	and the second se	2
Street Maintenance	Yes	O No	9 Yes	O No	
Bridge Maintenance		O No	• Yes	O No	
Winter Road Maintenance		O No	• Yes	O No	
Salt Storage		O No	• Yes	O No	
Solid Waste Management		O No	• Yes	O No	
New Municipal Construction and Land Distur		O No	• Yes	O No	
Right of Way Maintenance		O No	• Yes	O No	
Marine Operations		• No	O Yes	• No	
Hydrologic Habitat Modification		• No	O Yes	• No	
Parks and Open Space		O No	• Yes	O No	
Municipal Building		O No	• Yes	O No	
Stormwater System Maintenance		O No	• Yes	O No	
Vehicle and Fleet Maintenance		O No	• Yes	O No	
Other		0 No	O Yes	O No	

This report is being submitted for the reporting period ending March 9, 2 0 7 1

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

City of Albany Name of MS4/Coalition

2.	Provide the following	information about municipal	operations good	l housekeeping programs
----	-----------------------	-----------------------------	-----------------	-------------------------

A Parking Lots Swept (Number of acres X Number of times swept) # M (Number of miles X Number of times swept) Streets Swept Catch Basins Inspected and Cleaned Where Necessary Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # Lbs. O Phosphorus Applied In Chemical Fertilizer 0 # Lbs. Nitrogen Applied In Chemical Fertilizer 6 1 7 4 3 8 7 1 Acres

Pesticide/Herbicide Applied	#1
(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 2 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? 1

Note: The number of catch basin inspection and cleaned is the total of both MS4 and CSO catch basin cleanings.

cres			2	5	0
iles	2	4	0	0	0
#			3	2	6
#					8

2 0 1 7

> 1 3

0 %

3

0

0 2 OA

4 6 4

SPDES ID NYR2

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 7

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

SPDES ID NYR

0 A

2

6 4

4

Name of MS4/Coalition	City of All
-----------------------	-------------

lition	City of Albany
--------	----------------

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. Stormwater staff will reassess one third of the revised facility audit inventory based on the three-year plan map. 2. Staff will review catch basin inspection and cleaning schedule and inspections, clean-outs and repairs will be documented.

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

1. SWC reassessed 19 facilities identified in Year 2/3 based on the three-year plan map, approximately one third of the revised facility audit inventory. 2. Staff reviewed catch basin inspection and cleaning schedule and records : 160 repairs, 200 cleaned in the SS and 126 cleaned in the MS4 areas with 560.6 tons debris removed.

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

1	0
 -	

(ex.: samples/participants/events)

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

• Yes O No

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

• Yes O 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. Stormwater staff will reassess one third of the revised facility audit inventory based on the three-year plan map. 2. Staff will review catch basin inspection and cleaning schedule and inspections, clean-outs and repairs will be documented. 3. Stormwater staff will collect and maintain data on miles and acres swept, fertilizer, pesticide, herbicide, and other chemicals used, road salt applied, and household hazardous waste collected.

MCM 6 Page 3 of 3

Name of MS4/Coalition

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.

SPE	DES	ID			_	
N	Y	R	2	0		

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.

3. Stormwater staff will collect and maintain data on miles and acres swept, fertilizer, pesticide, herbicide, and other chemicals use, road salt applied, and household hazardous waste collected.

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

3. Stormwater staff collect and reported data on miles and acres swept, fertilizer, pesticide, herbicide, and other chemicals used, road salt applied, and household hazardous waste collected.

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

(ex.: samples/participants/events)

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

O Yes O No

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

O Yes O No

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

4. SWC/staff will host at least two inter-department meetings. 5. SWC/staff will provide training to at least 25% of municipal staff.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

N Y R 2

0

Name of MS4/Coalition

Stormwater Coalition of Albany County

Minimum Control Measure 1. Public Education and Outreach

1 2

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

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

How many MS4s contributed to this report?

				n /*
I.	Targeted Public Education a	nd Outreach	Best Management	Practices

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

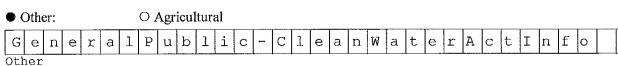
 Construction Sites • Pesticide and Fertilizer Application General Stormwater Management Information Pet Waste Management O Household Hazardous Waste Disposal O Recycling O Illicit Discharge Detection and Elimination Riparian Corridor Protection/Restoration Infrastructure Maintenance O Trash Management • Smart Growth Vehicle Washing O Water Conservation ○ Storm Drain Marking O Wetland Protection O Green Infrastructure/Better Site Design/Low Impact Development O None Other: t Y W С D С 0 1 i t i n е b s i t W h а 0 u а n 0 а 0 e

Other

2. Specific audiences targeted during this reporting period:

0	Public	Employees	•	Contractors
---	--------	-----------	---	-------------

- Residential
 O Developers
- Businesses
 General Public
- O Restaurants O Industries



MCM 1 Page 1 of 4

This report is being submitted for the reporting period ending March 9, $2 \circ 1 7$

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

Name of MS4/Coalition Storm

Stormwater Coalition of Albany County

SPL	DES	ID				
Ν	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			7	0
O Direct Mailings	# Mailings				
Kiosks or Other Displays	# Locations				8
• List-Serves	# In List		2	5	0
O Mailing List	# In List				
O Newspaper Ads or Articles	# Days Run				
Public Events/Presentations	# Attendees		1	1	9
O School Program	# Attendees				
• TV Spot/Program	# Days Run				1
• Printed Materials:	Total # Distributed			5	6
Locations (e.g. libraries, town offices, kiosks)					
C W P W e b c a s t s					

	P	1	а	n	n	i	n	g		В	0	а	r	đ		М	t	g	S	
	Т	r	а	i	n	i	n	g	ន	-	Ρ	u	b	1	i	с	Ρ	r	0	g
	W	A	V	Е	V	0	1	R	е	С	r	u	i	t	m	е	n	t		
Otł	ner:																			

Host 2 CWPWebcasts

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

W	Ŵ	w	•	s	t	0	r	m	a	t	e	r	а	1	b	а	n	У	С	0	u	n	t	У	•	0	r	g	
IRI																													

URL.	,										 	 										
					Ì								1	1								
					1]															
L	• •																		<u> </u>		 	
		<u> </u>		[L					L	· · · ·	1			I
			1		-			 		2		 										
																						i i
																						l l
		£				L																

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

tion	Stormwater Coalition of Albany County	
TIME		

SPI	DES	D					
N	Y	R	2	0			

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.

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.

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

BMP 1-1 Target Audience Analysis Worksheet (TAAW): not completed. BMP 1-3 Website: completed. BMP 1-7 List Serve: partially completed; drop/adds and updated emails provided by Coalition members; not entered into ACCESS database. BMP 1-6 Public Program-Guest Speaker: completed-1 CWA Presentation; not completed-Green Infrastructure Program to MS4 Electeds; no time to develop program and staff person organizing program left MS4.

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	0	No

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

۲	No
	۲

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

SWMPv5 (April, 2017) BMP 1-3 Website: continue to maintain Coalition website (post mandated documents; post educational material; post meeting announcements; pay invoice). BMP 1-7 List Serve: update ACCESS database; BMP 1-4 Publications: update door hanger publication; BMP 1-14 Public Programs-Organized By Coalition-host 1 CWP webcast.



This report is being submitted for the reporting period ending March 9, 2 0 1 7

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
 N
 Y
 R
 2
 0

Minimum Control Measure 2. Public Involvement/Participation

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

- \bigcirc 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:

\bigcirc Cleanup Events	# Events	
• Comments on SWMP Received	# Comments	0
• Community Hotlines	Phone # $(5 1 8) 4 4 7 - 5$	6 4 5
Phone # ()	Phone # ()	
Phone # ()	Phone # ()	
Phone # ()	Phone # ()	
Phone # ()	Phone # ()	
Phone # ()	Phone # ()	
○ Community Meetings	# Attendees	
○ Plantings	Sq. Ft.	
○ Storm Drain Markings	#Drains	
\bigcirc Stakeholder Meetings	# Attendees	
• Volunteer Monitoring	# Events	7
$ \bullet \text{ Other: } C \circ a 1 i t i o n C \circ m m e $	n t s - D R A F T M S 4 P r	n t

 2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?

Program (SWMP) Plan provided?	۲	Yes	s (01	No
• List-Serve # In List			1	9	1
○ Newspaper Advertising # Days Run					
○ TV/Radio Notices # Days Run					
O Other:					

• Web Page URL: Enter URL(s) on the following two pages.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPL)ES	ID				
Ν	Y	R	2	0		

2. URL(s) con't.:

Į

Name of MS4/Coalition

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

Stormwater Coalition of Albany County

URL	,																		_											,,	
W	W	W	•	s	t	0	r	m	W	а	t	e	r	а	1	b	а	n	У	С	0	u	n	t	У	.	0	r	g		
											<u> </u>																				
																													1		
URL								1												·									Γ		
			L				 	Ī			 			 						 					1						
			 					 			<u> </u>	 	l 	l 			[<u> </u>	 		<u> </u>	 		1	<u> </u>	<u> </u>				
		l													I			L .			<u> </u>	ļ			L		<u> </u>]			
URI	í—	·····				_	I		1			I			[[Γ				· ···	<u> </u>		Τ						
					[<u> </u>	L				 		 	<u> </u>			1		<u> </u>	 				1		 	1	\square	
Ŀ								 	 	<u> </u>						<u> </u>										<u> </u>	 T	I T			
																				<u> </u>											
URI	, T		T	1	r	1	-	·	1	1	1	1	1	r		1		1	1	r	1	1	1	1	1	1	<u> </u>	.		—	
																	Ļ					<u> </u>							<u> </u>		<u> </u>
	_													-																	
URI															_	_	_						-	_							
				Ţ																											
			İ	Ì									Í			1															
	1	Γ		1		<u> </u>						İ	Ī				Ì		Ī				Ī		Ť					İ	İ
URI		I	<u> </u>		1	1	1	.1	1	\$	- I	.l		1		*	1	1		<u> </u>	1	1	(1		l
							Γ				Γ																				
F				İ				\square	1	1				1	İ				Ī	İ			Ì	T	1	Ī	Ì	Ì		Ī	
-	<u> </u>	<u> </u>			+		1	$\frac{1}{1}$	1	1		<u> </u>			<u> </u>	1		<u> </u>	1			<u>+</u>			1	<u> </u>		1	+	<u> </u>	<u>+</u>
		I	L	I	1	<u> </u>			1	1			<u> </u>	1	1	1	l	<u> </u>		1	<u>t</u>	1	1	1	1	1	[1	1	L	<u> </u>
		1							 	T					T											<u> </u>	Γ				<u> </u>
	1	<u> </u>	1		<u> </u>	<u> </u>	1	+	$\frac{1}{1}$			1	<u> </u>		$\frac{1}{1}$	<u> </u>		1	T		† ,		<u> </u>	<u> </u>	+	1	+				†
	1	 	<u> </u>	$\frac{1}{1}$	╞	<u> </u> 	1	<u> </u>	<u> </u> 	<u> </u>	1		+		<u> </u>	<u> </u>	 	<u> </u>	<u> </u>	<u> </u>	1		1			1	╈	$\frac{1}{1}$	<u> </u>	1	
[1	1	1	1	1	1			1	1	1	1		1	ł	1	1		1	1	1	1		1		1	1	1	1	i	1

MS4 Annual Report Form														
This report is being submitted for the reporting period ending March 9, $2 0 1 7$. If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank														
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID														
Name of MS4/Coalition Stormwater Coalition of Albany County 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 Department Department														
Stormwater Coaliition-AlbanyCnty														
Address														
1 7 5 G r e e n S t r e e t - C n t y H e a 1 t h B 1 d g City Zip														
A 1 b a n y N Y 1 2 0 2 - -														
Phone Control														
O Library O Annual Report O SWMP Plan O Comments														
City Zip														
O Other O Annual Report O SWMP Plan O Comments														
$\begin{array}{c c} Phone \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ $														
Web Page URL: Annual Report SWMP Plan Comment:														
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														
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														

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

		SPI	DES	ID				
Name of MS4/Coalition Stormwater Coalition of Albany County		Ν	Y	R	2	0		
4.a. If this report was made available on the internet, what da	ate was	it p	oste	d?	1	r-	<u> </u>	3]
Leave blank if this report was not posted on the internet.		0 5]/[0	5	/	2 0	1 7
4.b. For how many days was/will this report be posted?								14
If submitting a report for single MS4, answer 5.a If submitt	ting a jo	oint r	epoi	rt, a	ans	wer	5.b	
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting pe	riod	?] / [。 /[Yes	O No
If No, is one planned?						0	Yes	O No
5.b. Was an Annual Report public meeting held for all MS4s	contri	butir	ng ta	o th	nis :	rep	ort d	uring
this reporting period?						0	Yes	• No
If No, is one planned for each?						0	Yes	• No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.						0	Yes	• No

<u>MS4 Annual Report Form</u>

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

SPI	DES	ID			 		
N	Y	R	2	0			

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.

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.

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

BMP 2-2 Annual Report: completed. BMP 2-8 Student Water Quality Projects: partially completed; contract between UAlbany and County-Coalition completed; recruitment flyer for professors and students 85% completed. BMP 2-11 WAVE-8 sites monitored.

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 O 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).

SWMPv5 (April, 2017) BMP 2-2 Annual Report: Coalition staff prepare for and guide possible transition to "new" MS4 Permit likely to include changes in Annual Report format and annual program evaluation process-no particular goals named in SWMP document. BMP 2-11 WAVE-monitor 4 sites with volunteers.

This report is being submittee	for the reporting perio	d ending March 9,	2	0	1	7
--------------------------------	-------------------------	-------------------	---	---	---	---

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

Name of MS4/Coalition	County N Y R 2 0
3.b.What types of illicit discharges have	been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
O Failing Septic Systems	○ Pump Station Failure
○ Floor Drains Connected To Storm Sewers	○ Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
O Other:	O None
reporting period?	al illegal connections have been detected during this
·	en confirmed during this reporting period?
7. Has the storm sewershed mapping b If No, approximately what percent was	een completed in this reporting period? O Yes O No s completed in this reporting period? \$
 8. Is the above information available in Is this information available on the VII If Yes, provide URL(s): Please provide specific address of page URL 	

URL	<u> </u>																	····-					,					r			r
Ρ	а	s	S	W	0	r	d		Ρ	r	0	t	е	С	t	е	d		R	e	S	t	r	i	С	t	е	d			
h	t	t	р	s	:	1	/	a	С	v	а	r	С	g	i	s	•	а	1	b	а	n	У	С	0	u	n	t	У		С
С	0	m	1	W	е	d	m	а	p	1																					
URL	, 		1				r	r			1				r	Г			r		1		-	1	ł	1	r	1	r	<u> </u>	
																										ļ			<u> </u>		

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPI	DES	ID				
N	Y	R	2	0		

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.

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.

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

BMP 3-2 Coalition Stormwater Program Mapper: completed; re-design includes "Form" considerations; one design workshop, not 3; more complex redesign to include "Forms" pending development of RFP for consultant services. BMP 3-5 Dry Weather (ORI) -completed; kits restocked.

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 O No

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

• Yes O No

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

SWMPv5 (April, 2017) BMP 3-4 Storm Sys-CSO-Sewershed Map'g/BMP 5-8 Inventory Post Const SMPs/BMP 6-1 Inventory MuniFac: continue to implement mapping goals detailed in SWMPv5 (see MCM3, MCM 5, and MCM6); continue to implement objectives and tasks listed in the NYSDEC grant contract C00081GG work plan. See respective documents for details (SWMPv5 and grant work plan). Both explain what is being mapped where, when, and how for all Coalition members.

MCM 3 Page 4 of 4

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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									
1	N	Y	R	2	0					

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.

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Proceduresreview 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.

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

BMP 4-5 Construction Site Enf & Inspection Procedures: not completed; DRAFT MS4 Permit points to mandated MS4 Construction Inspection Forms, need to know status of DEC forms before proceeding further.

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?

O 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).

SWMPv5 (April, 2017): BMP 4-7 Construction Site Operator Training-4hr: co-host one 4 hr training with ACSWCD.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SP	DES	S ID				
N	Y	R	2	0		

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.

From SWMPv4 document (May, 2016): BMP 5-5 SWPPP Review Procedures - for Coalition Stormwater Program Mapper update/load map layers named in Construction Activity Permit/ NYSDEC SW Mgmt Design Manual. BMP 5-8 Inventory Post Construction Practices - with grant funding implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - with grant funding develop inspection forms for use with mobile devices

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

.BMP 5-5 SWPPP Review Procedures: partially completed, pre-existing layers uploaded, additional layers more difficult to obtain. BMP 5-8 Inventory Post Construction Practices: mapping of post-construction practices implemented as detailed in grant work plan. MP 5-9 Post Construction Practices: not completed.

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 O No

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

O 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 SWMPv5 document (April, 2017): BMP 5-8 Inventory Post Construction Practices - continue to map post construction practices as detailed in grant work plan and various SWMPv5 goals. BMP 5-9 Post Construction Practices-Maintenance: complete RFP for consultant services to develop GIS friendly post-construction stormwater management practice (PC SMPs) inspection forms (mobile devices).

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID N Y R 2 0

2

0 1 6

4 9

9

0

2 2

		,
	Stormwater Coalition of Albany County	
Name of MS4/Coalition		

2. Provide the following information about municipal operations good housekeeping programs:

○ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
O Streets Swept (Number of miles X Number of times swept)	# Miles	
O Catch Basins Inspected and Cleaned Where Necessary	#	
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O 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	

- 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?

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 \\ 0 \end{vmatrix} \begin{vmatrix} 1 \\ 7 \end{vmatrix}$

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

S	SPL	DES	ID				
	N	Y	R	2	0		

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.

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.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

	0	
--	---	--

(ex.: samples/participants/events)

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

Yes O No

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

• Yes O No

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

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

MCC form for period ending March 9, 2 0 1 7

	SPDES ID
Name of MS4 TOWN OF BETHLEHEM	N Y R 2 0 A 2 0

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:

O An Annual Report for a single MS4

O 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	0	r	m	w	a	t	е	r	C	0	a	1	i	t	i	0	n	0	f	A	1	b	а	n	У
C	0	u	n	t	У																					

MCC form for period ending March 9, 2 0 1 7

Name of MS4 TOWN OF BETHLEHEM

SPDES ID N Y R 2 0 A 2 0 8

Section 2 - Contact Information

Important Instructions - Please Read

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

- 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:

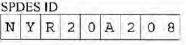
- Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- Report Preparer

Firs	t Na	ame								_	-			_	. 1	MI		Las	tNa	ame					-		-		_			
в	r	е	n	t														М	е	r	e	d	i	t	h		1 P				1	
Titl	e														-															+		
S	u	р	е	r	i	n	t	е	n	d	е	n	t		0	f		H	i	g	h	W	a	У	S							
Ad	ires	s															_											_		-	-	
4	4	5		D	e	1	a	w	a	r	e		A	v	e												1					h.
Cit	Y																			S	tate		Zip	,			_					- 4
D	e	1	m	a	r															1	N	Y	1	2	0	5	4]-				
eМ	ail																			-	_	_	_	-		_		-			-	
b	m	e	r	e	d	i	t	h	8	t	0	w	n	0	f	b	е	t	h	1	e	h	e	m		0	r	g				
Pho	ne	-																Cou	inty											_		
(5	1	8)	4	3	9	-	4	9	5	5						A	1	b	a	n	У									
14																		1	1				-									

MCC form for period ending March 9, 2 0 1 7

Name of MS4 TOWN OF BETHLEHEM

NY



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:

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

Firs	t Na	ame	(_				_	_		_		_		MI		Las	st Na	ame	_										 _
Ρ	Α	U	L							10								P	E	N	Μ	A	N						1		
Title	e								_		_															_					
D	Ρ	W		D	Е	Ρ	U	т	Y		С	0	М	М	Ι	S	I	0	N	Е	R	1	Т	0	W	N	5.1	Е	N	G	11
Add	Ires	s																												_	
4	4	5		D	Ε	L	A	W	A	R	Е		А	v	Е	N	U	Е													
City	,																			S	tate		Zip	5					-	1 	
D	Е	L	M	Α	R		i m											1		1	N	Y	1	2	0	5	4] -			
eMa	uil																						-								
Ρ	Ρ	Е	N	М	A	N	@	Т	0	W	N	0	F	в	Е	т	н	L	Е	н	Е	М		0	R	G				17	
Pho	ne							_										Co	unty										1		
(5	1	8)	4	3	9	2	4	9	5	5						A	L	В	A	N	Y			-					
	-			1.1	-	-	-	1				-	1						1		-		-	-	-	-			-		_

SPDES ID

NYR

2 0 A 2 0 8

MCC form for period ending March 9, $2 \mid 0 \mid 1 \mid 7$

Name of MS4

TOWN OF BETHLEHEM

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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.

Par	tner	/Co	aliti	onN	Jam	e																										
S	t	0	r	m	w	а	t	е	r		C	0	a	1	i	t	i	0	n		0	f										
Par	tner	/Co	aliti	on l	Nam	ne (c	on't	.)															_	SPI	DES	S Pai	rtne	r ID	- If	app	olica	ble
A	1	b	a	n	У		C	0	u	n	t	У												Ν	Y	R	2	0				
Ad	dres	5																														
1	7	5		G	r	е	е	n		S	t	r	e	е	t	-	C	0	u	n	t	У	Η	e	а	1	t	h	в	1	d	a
Cit	y																			St	tate		Zip									
A	1	b	а	n	У															ľ	1 Y		1	2	2	0	2	-				
eM	ail																															
Ν	a	n	С	У	•	Η	е	i	n	z	е	n	@	а	1	b	a	n	У	С	0	u	n	t	У	n	У	•	g	0	v	
Pho	one			,				,					1						Ιe	العم	vB	indi	ng /	۵ are	em	ent i	in a	rcor	dan	Ce		
(5	1	8)	4	4	7	-	5	6	4	5								-	-		-	-		V.G			Ye		0	No
w	hat	tasl	28/1	rest	non	sihi	iliti	65	are	sha	arec	1	ith	this	a na	ortn	er (é o	Ň	1M	1.5	chc	പ	Pro	ora	mc	or	Mı	ıltiı	əle	Тас	sks)?
••	nat	ius:	X.5/ I			510				5110		1			, p c			с. _Е	,• 1•		1.5			110	510			1010	*1t1]		1 a.	<u> </u>
•]	MM	1	Ρ	u	b	1	i	С	a	t	i	0	n	s	-	Р	r	0	g	r	a	m	s	-	W	e	b	s	i	t	e	
A 1	MM	<u>_</u>	S	W	М	Ρ	D	0	С	u	m	е	n	t	_	W	A	v	Е	_	Р	u	b	1	i	С	I	n	р	u	t	
	VIIVI	2	5	VV	1.1	Г		0	C	u		C	11	L		~		v	ы		Г	u	D	–	-	C	-	11	Р	u		
•]	MM	3	S	W	Ι	М	W	е	b	М	a	р	р	е	r	R	е	d	е	s	i	g	n	-	0	R	I	ĸ	i	t	s	
• 1	MM	7	S	w	I	М	W	е	b	М	a	р	р	е	r	_	S	W	Р	Р	Р	R	e	v	i	e	w	L	a	У	r	s
•	VIIVI	-	5	~~	-	1-1	~	C	2	1.1	u	Р	Р	C	-				-	-	-	1		•	-		~~		u	Y	-	D
•]	MM	5	Ρ	0	ß	t	С	0	n	ន	S	М	Ρ	ន	-	М	a	р	g	Р	r	e	р	-	I	n	v	n	t	0	r	У
•]	MM	6	Т	r	a	i	n	g	:	D	V	D	s	С	0	u	r	s	е	s	Р	r	е	s	e	n	t	r	М	t	g	S
										1	1		1			1	1	1	1	1	1	1	1	1	1	1	1	1			· -	1

Additional tasks/responsibilities

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

MCC form for period ending March 9	201	Ľ	7						
		SPI	DES	ID					
Name of MS4 Town of Bethlehem		N	Y	R	2	0	А		

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
Brent		M e r e d i t h
Title (Clearly print title of individual signing report)		
H i g h w a y S u p e r i n	t e r	dent
Signature		
		Date
		Date
		5 / 2 2 / 2 0 1 7

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

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

_		ID		_	_			_
N	Y	R	2	0	A	2	0	8

No

Water Quality Trends

2

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

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

How many MS4s are contributed to this report? 0 1

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. O Yes

If Yes, choose one of the following

- O Report(s) attached to the annual report
- O 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	 					_			-		-	_	_	 	-			-		_
								1.												
							11					1101			*					
URL																				
1.1																				
URL																				
					1			1	1											
URL				_		_		-					_						_	
11																				
								1								111	-			
	 	-	_				_	-	1	 _			1	 -	 	1.000	-	-		

Water Quality Trends Page 1 of 1

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 0
 8

Minimum Control Measure 1. Public Education and Outreach

1 2

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

- On behalf of an individual MS4
- O 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:

• Construction Sites		• Pesticide and Fertilizer Application
• General Stormwate	r Management Information	Pet Waste Management
• Household Hazardo	ous Waste Disposal	O Recycling
O Illicit Discharge De	etection and Elimination	O Riparian Corridor Protection/Restoration
O Infrastructure Main	tenance	O Trash Management
O Smart Growth		• Vehicle Washing
○ Storm Drain Marki	ng	O Water Conservation
• Green Infrastructur	e/Better Site Design/Low Impact Development	O Wetland Protection
O Other:		O None
Other 2. Specific audien	ces targeted during this reporting period:	
Public Employees	Contractors	
○ Residential	Developers	
O Businesses	• General Public	
O Restaurants	○ Industries	
O Other:	○ Agricultural	
Other		

MCM 1 Page 1 of 4

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

		SPI	DES	ID.	1	_				
Name of MS4/Coalition	TOWN OF BETHLEHEM	N	Y	R	2	0	A	2	0	8

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

Constr	uet	ion	Sit	e O	per	ator	s T	rai	ned											# Trai	ned				7
Direct	Ma	ilir	igs																	# Maili	ngs				11
Kiosks	or	Otl	her	Dis	pla	ys														# Locati	ons				3
List-Se	erve	s																		# In 1	.ist [1	9	3	2
Mailin	g L	ist																		# In 1	List				
Newsp	ape	r A	ds	or A	Arti	icles	5													# Days F	tun	2			
Public	Ev	ent	s/Pi	ese	nta	tion	IS													# Attend	ees				
School	Pr	ogr	am																	# Attend	ees	1			
TV Sp	ot/F	rog	grar	n																# Days F	tun [
Printec																				Total # Distribu	ted		1	4	9
E. T. T.	atior	ns (e	1.00	1.1	ries.	tow	n of	fice	s, ki	osks)		-	-	-	-	-	_	-				-		
В	u	i	1	d	i	n	g		D	е	р	t				1	-	_	14						
E	n	g	i	n	e	e	r	i	n	g		D	e	p	t	2									
																	-								
Other:						1							-												

O Other

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

h	t	t	р	:	1	1	W	W	W		t	0	w	n	0	f	b	e	t	h	1	е	h	e	m	 0	r	g	1
1	7	2	1	S	t	0	r	m	w	a	t	e	r	4	М	a	n	a	g	e	m	е	n	t					
											11																		

URL

W	W	W	æ	S	t	0	r	m	W	a	t	е	r	a	1	b	a	n	У	С	0	u	n	t	Y	0	r	g	
	44																												
																					11								

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 0
 8

Web Page con	't.:	Provi	de spe	cific	web	addre	sses - 1	not h	ome	page	ð.						
					-			-	-		-			-		-	-
		1.1			22				10		-	111				_	
		1.171								Ter.							
				-							-		-	-			-
JRL	en i r	1		-	-		1	П			-		1			T	-
				-			1										_
	_																
		1-1-									-		-	1		1	-
		1.5									-						_
RL														_		ì	
The second second second second second second second second second second second second second second second se		1.1.1															
																1	
		-							-		_		-		\vdash	_	_
							1111										
IRL.																	
					-		-	+	_						-	-	-
	anth sta	1		1			1.2.1		1								
									_		_	1	_	<u> </u>	_	_	-
IRL	1-1-	1				-	in the			-	-1-	-	1				
		1														-	
							1.1										
																-	
									-						-		
JRL.								_		è.e.		£				_	
								Ħ							=		-
	•	-1	<u> </u>						ck.	-	-			+	-	_	-
JRL									1	T	-			\square			
											-		-	+	+		_

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

NYR 2

0 A

2 0 8

Name of MS4/Coalition TOWN OF BETHLEHEM

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)Finalize Target Audience Maps for posting;(1-3)Review and reposition stormwater program web content; (1-9)Promote publications in email and hard copy formats; (1-11)Ensure new SMP have required signage. (1-16)Post WQ message on website; (1-17) Update Town Hall brochures; (1-18) Advance stormdrain markers; handouts etc.(1-20)Respond and track HOA/private owner education of permanent practices O&M.

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

Town completed analysis of Target Area Maps, identifying areas/types of concern. Maps have not been posted to website yet, but analysis results served to guide additional SWMP plan efforts.

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

(ex.: samples/participants/events)

2

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

Yes O No

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

(1-3)Review and reposition stormwater program web content; (1-9)Promote publications in email and hard copy formats; (1-11)Ensure new SMP have required signage. (1-16)Post WQ message on website; (1-17) Update Town Hall brochures; (1-18) Advance stormdrain markers; handouts etc.(1-20)Respond and track HOA/private owner education of permanent practices O&M.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 0
 8

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						# E	ven	ts					3
O Comments on SWMP Received					# C	omr	nen	ts					
Community Hotlines	Phone #	(5	1	8)[4	3	9	-	4	9	5	5
Phone # ()	Phone #	()[-[
Phone # () -	Phone #	()[-[
Phone # ()	Phone #	()[1			-[
Phone # ()	Phone #	([)[-[
Phone # () -	Phone #	()[-				
O Community Meetings					# A	Atter	ndee	es					
Plantings						S	q. F	t. [1	3	0
O Storm Drain Markings						# D	rain	ns [1
O Stakeholder Meetings					# ^	tter	ndee	es			Í		
O Volunteer Monitoring						# E	vent	ts					
O Other:											Í		

1105	gra	m (SV	141	r)	rian	pro	viue	u.												res	0 r	10
• List-Se	erve	•																# Ir	n List				
O Newsp	ape	er A	dve	ertis	ing												# 1	Days	Run				
O TV/Ra	dio	No	otice	s													#1	Days	Run				
• Other:	P	0	s	t	e	d	i	n	T	0	w	n	H	a	1	1							1
			1	-					100	0.00	100	1	1.1	-	-			-		de de	_		-

○ Web Page URL: Enter URL(s) on the following two pages.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 0
 8

2. URL(s) con't.:

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

URI																															
w	w	W	1	s	t	0	r	m	w	a	t	е	r	a	1	b	a	n	У	С	0	u	n	t	У		0	r	g		
															1		11											1			
-	1	İ	1			11									111					1								-			-
101		-	-		-	-	-	-	-	-	-		-		-		-		-	_	-	-	-	-			-	-	_	_	_
JRI	1					T			-	1				-			<u> </u>				1	r		Ē			-	-			ĥ
-	1	-	-	-	-	-	-					-					-	-			-	-				-	-	-			-
_		-	-			-	-		_	-		_	-				_					-			-		-				
URI		-		_	_			-		_	_	_		_		_	_	_										_		_	_
						1														1											
				1			E.	1.0									1.			1						1T					
													11												1						
101								-	1	-		-										-				1				-	
JRI	Í								1											1							-		1		-
-			1	_		-			1	-					-					-			-			-	-	-		_	-
-	-	-	-	-		-			-	-	-						-	-	-		-		_			-	-	-	_		-
-					-	_		_					11.4								1.0.4					* ***	-	_		_	_
JRL		-	-		-	-		_	-	-		_	-	-	-	-	_			-		-	-		_	_	_		_	_	_
	T							10							1.E																
JRI													1																		
					2			T	1																						
	117											1																P	-		
		1	1 11	7							1																		1	-	
	-	-		-	-	-	-		-	-	-		-		-	-	-	-	-	-	_			-	-	-	-	-	-	_	_
JRL	Í								-								Î											171		1	-
-		-		-	-		-		-			-			-		-			-						-	-		-	_	-
		-		_	-						_						-			-				-		_			_		-
4										1							1									1					

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 0
 8

2. URL(s) con't.:

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

URL								-		_	_	_		-													
E 11																							1				
		1							-				- 1												1	-	
-		-		-						-					-					-	-				-		
			-		-		1.00	_	_	-				de la	_					-				_			
URL	11	1		-	-	-		-	-	-			-		-	-	-		-		_		-	-	_		-
		-		-	_	-				1					1				1				11				
																		-					it.				
		1 II													1.1.1												1
			d-1			-	-		-	-		-		-		-	2	-	-	-		-	-	-	-	-	-
URL		11	Ē	-	1							1	-			-	-		-	-					-	1	
		1		_	-	-	-	_	-				-			-	-	_	_						_	_	_
	100	111					_	_									-								1		
11.22		1000																					1.1.1				
URL						-																-					_
				11	1					11													-				
				+	-			-	-					-	-			-				1.22	-	-	-	-	-
				_	_		_	_	-	1		_	-			-		_	_						_		
																											11
URL												-							_		_						
																											٦
				+				-	-								-	-	-				_	-	-		-
		-				_		-		-		_					_	_							L		
URL				1	-		-	-	1	-	-	-			1		-	-	-1			-	-	-1	-		_
					_		1		1						-												11
												11					H										21
	- I	1. 1		-	<u> </u>	-										_	-	-	-			-	-		_		
URL	T			T			1		1	1																	-
				-		_						_						_	_				-		-	-	
	-	1				1	12						4			-							_	1			

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 7$

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

TOWN OF BETHLEHEM Name of MS4/Coalition

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.

• MS	4/C	oali	tio	n O	offic	e											A	nnu	al l	Rep	ort		S S	WN	1P	Plai	n		Cor	nme	ents
	Dep			t																_									1		
	D	Р	W		-		E	n	g	i	n	е	е	r	i	n	g		D	i	v	i	s	i	0	n					
	Add	lress	5																												
	4	4	5		D	е	1	a	w	а	r	е		А	v	е	n	u	е												
	City	/																-				Zip				-	1		1	1	
	D	е	1	m	a	r													N	Y		1	2	0	5	4	-				
	Pho			-	•		_	_]	-	-	_	_	1																	
	(5	1	8)	4	3	9	-	4	9	5	5																		
○ Lib	rary Add	lress	5													C) A	nnu	al l	Rep	ort	() S	WN	1 P]	Plai	n	0	Cor	nme	ents
	City	/																				Zip				I					
																		Γ] _				
	Pho	ne																L									J				
	()				_																						
					/																										
• Otł	ner Add	lres	8														A	nnu	al l	Rep	ort		D S	WN	1 P]	Plai	n		Cor	nme	ents
	C	0	а	1	li	t	li	0	n		0	f	С	е		1	7	5		G	r	e	е	n		S	t	r	е	е	t
	City	/																				Zip									
	Α	1	b	a	n	У													N	Y		1	2	2	0	2	-				
	Pho	ne																-													
	(5	1	8)	4	4	7	-	5	6	4	5																		
•				_												_			1 1							DI		~	~		
• We	b Pa	age	UR	L:															al l	Kep	ort) S	W N			1		Cor	nme	ents
	W	W	W	•	t	0	W	n	0	f	b	е	t	h	1	е	h	е	m	•	0	r	g	/	1	7	5	/			
	0	u	r	-	s	t	0	r	m	W	а	t	е	r	-	m	а	n	a	g	e	m	е	n	t	-	р	r	0	g	r
	a	m																													
	Ple	ease	pr	ovi	de	spe	cif	ic a	ddr	ess	of	pag	ge v	whe	ere	rep	ort	cai	n be	e ac	ces	sec	1 - 1	not	hoi	me	pag	ge.			
• eM	ail																												Cor	nme	ents
	S	w	С	0	a	1	i	t	i	0	n	@	a	1	b	a	n	У	С	0	u	n	t	У		С	0	m			
				1	1	1	1	1											1	1	1	1	i i	1		-	L	I	1	I	

This report is being submitted for the reporting period ending March 9, 2 0 1 7 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID TOWN OF BETHLEHEM N Y R 2 0 A 2 0 8 Name of MS4/Coalition 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. 5 2 0 5 0 0 1 7 4.b. For how many days was/will this report be posted? 4 1 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 \bigcirc No If Yes, what was the date of the meeting? If No, is one planned? ○ Yes \bigcirc 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? • No ○ Yes 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.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

NYR 2

0 A

2 0 8

Name of MS4/Coalition TOWN OF BETHLEHEM

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.

(2-1)Update stormwater contact information and post Joint Annual Report to Town's website; (2-5) Continue and enhance "Track a Concern" tracking system for stormwater issues, complaints and mitigation approaches; (2-6) Conduct at least 3 community cleanup days. (2-n) Install 5-10 street trees with stormwater educational awareness FAQ sheet for owners.

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

The Town successfully continued the community clean up events (3); 4/16 5/14, 5/21

The Town installed 13 street trees to improve water quality during this reporting period.

"Track a Concern" was implemented and received/responded to 12 submitted concerns.

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

(ex.: samples/participants/events)

3

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

Yes ONo

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

• Yes O No

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

(2-1)Update stormwater contact information and post Joint Annual Report to Town's website; (2-5) Continue and enhance, as necessary, "Track a Concern" tracking system for stormwater issues, complaints and mitigation approaches; (2-6) Conduct at least 3 community cleanup days. (2-n) Install 5-10 street trees with stormwater educational awareness FAQ sheet for owners.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

	1.1.11		11.4					Γ.
NT	V	D	0	0	A	2	0	1.4

0 %

9

1 0

#

3 9 9

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?

O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	O Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	○ Parking Lot Maintenance
○ Construction Vehicle Washouts	○ Printing
O Cross-Connections	○ Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	○ Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	○ Swimming Pools
○ Improper RV Waste Disposal	○ Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
• Other:	O None
ORI based on	rotating schedule

This report is being submitted for the reporting period ending March 9	, 2	2	0	1	7
--	-----	---	---	---	---

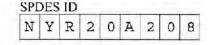
If submitting this form as part of a	joint report on behalf of a coalition leave SPDES ID blan	k.
Name of MS4/Coalition TOWN OF BETHLEHEM	SPDES ID N Y R 2 0 A	2 0 8
3.b.What types of illicit discharges hav	ve been found during this reporting period?	
O Broken Lines From Sanitary Sewer	O Industrial Connections	
C Cross Connections	○ Inflow/Infiltration	
O Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows	
Illegal Dumping	O Straight Pipe Sewer Discharges	
• Other:	○ None	
innefective	sediment containm	e n t
	een confirmed during this reporting period?	2 rting 2
7. Has the storm sewershed mapping I If No, approximately what percent wa	bccn completed in this reporting period? O Yes	
in rio, approximatory what percent we	as completed in this reporting period?	• No 8 5 %
 Is the above information available i Is this information available on the If Yes, provide URL(s): 	in GIS? web? • Yes	8 5 % O No
 Is the above information available i Is this information available on the If Yes, provide URL(s): 	in GIS? • Yes	8 5 % O No
 8. Is the above information available in Is this information available on the If Yes, provide URL(s): Please provide specific address of page 	in GIS? web? • Yes	8 5 % O No
 8. Is the above information available in Is this information available on the If Yes, provide URL(s): Please provide specific address of page 	in GIS? web? • Yes	8 5 % O No

URL

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

I		-
Name of MS4/Coalition	TOWN OF BETHLEHEM	



8. URL(s) con't.:

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

URL			-				_	-			_	_	_	-	_		_				_	_		_			12
1000																1				1				1.7			
	1	1-1			-		-	-		-	-	-	-	-	-	-	-	-	-		-		_	-			
				-	-						1						2.11		1.0							ĺ	(
										1	1				1				1								
			-	-	-	-	_	-		-	-	-	-		1			-	1 12		-		-				
URL						1			_	-	_	_				_	-	_	-								
1.0															163				1.01							1.1	ji t
	1	1	-					T	-	t		-					-		-		-				-	-	-
			_						-											1	-	_			-	1	1
	-														1.1.1		11										111.
		1	_	-		-		-		1	-		1	-	-	-				1	-		-	-		-	-
URL	1	1			- 1	-	- 1	1	-	1	-	-	-	-	-	-	-	-	_			-		-	-		-
							- P					1										11	11		1	11	1
							1				1					1						-	111				
				-		-	-	-	-	-	-	-		_		_	_	_	_		_	_	_			_	_
										101	1	- 1				-	-		21							11	1
URL						-					-																
	T	TT						T	1	T	1	-											-				
					_		_	_		-	-	-					_		_	-	_		_			_	
11.13					1																						
		TT			-		1	1	T	1	1		-			-	-				-			1			-
			_					-		1	1			12.1	-			-		-			-			12	
URL																										_	
1.00															1												
			-		-		+	1	+	+	-	-				-	-			-	-			-		-	-
					1.1							1.								-							
	100					1	1												-			-					
				-	100	_	1	_	-	-	-	-	-	_		-	-	_			-			_		-	_

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

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

908

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES 1D

NYR20A208

Name of MS4/Coalition TOWN OF BETHLEHEM

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.

(3-1) Utilize Target Area Maps to prioritize mapping additional outfalls and attempt 15% additional collection areas; (3-5) Attempt to screen all newly identified outfalls and 20% of previously identified; (3-8)Review and update IDDE procedures;(3-8) Use GIS to locate and track all approved SWPPPs; (3-9) Develop GIS/Sharepoint system for tracking IDDE issues and status.

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

The Town was able to inspect all known outfalls last year. Ongoing effort was made to identify and locate stormwater collection systems and outfall locations. Outfall inspection app for mobile data collection designed, tested and implemented.

Significantly improved tracking for documents and status of SPDES permitted sites/applications.

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

(ex.: samples/partizipants/events)

3

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

Yes ONO

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

• Yes O No

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

(3-1) Utilize Target Area Maps to prioritize mapping additional outfalls and attempt 15% additional collection areas; (3-5) Attempt to screen all newly identified outfalls and 20% of previously identified; (3-8)Continue to develop IDDE procedures;(3-8) Expand use of GIS and Sharepoint to locate and track all approved SWPPPs; (3-9) Develop GIS/Sharepoint system for tracking IDDE issues and status.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

<u>Minimum Control Measures 4 and 5.</u> <u>Construction Site and Post-Construction Control</u>

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?

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

○ 09/2004	• 03/2006	ONT

SPDES ID

N

YR 2

0 A

2

0 8

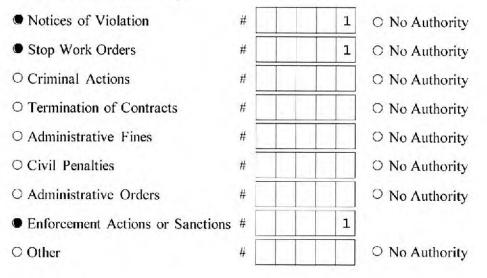
0

0

- 2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes O No
- 3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? • • 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:



This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 0
 8

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?
- 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?
- 3. What percent of active construction sites were inspected during this reporting period? ONT
- 4. What percent of active construction sites were inspected more than once? ONT
- 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?
- 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 ONO ONT

0 %

0

1 0 0 %

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?

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

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

Ν

SPE	DES	ID	_		_	_	_	
N	Y	R	2	0	A	2	0	8

6. con't.:

0

0

0

Submit additional pages as needed.

0	MS4/	Coalition	Office
	-		

	ent						-		-	-	1 - 1		1 1		-	т			
Address																			
13.1									1.4	1.15					1		- 11		
City								1 1			1 1	-	Zip	1.0	-		_	-	
		1		T						-							- []		1
Phone	-			1	1	1	1		-		_					=	<u> </u>	1	
1				1.1		1	T	p.											
rary																			
Address			1 1				1.50						1 1	-1	1 1	- 1-	_	_	
		1 111														11			
City				_	-								Zip				_		
			1			1.	11		141								-		
Phone	1.1											9			1			1	
(1]_[
УШ		/		1		-	-												
er																			
Address	1 1	-	1 - 1 -	-			1												
10000			1.11.1	101		1.111		1.1.1				1111							-
City	- 1 - 1												Zip					1	1
																	-		
		_								L				_	1	_			-
phone				- 1		1													
Phone				1															
Phone		1		1.1.1.1.1.1															
(JRL(s)) : P	lease		ide s	pecit	fic a	ddres	s whe	ere SV	уррр	scan	be a	cess	ed - he	not h	ome	กลง	e
Page U	JRL(s)) : Р	lease	- 1	ide s	pecin	fic a	ddres	s whe	ere SV	VPPP	s can	be ad	cesse	ed - i	not h	ome	: pag	e.
(JRL(s)) : P	'lease	- 1	ide s	peci	fic a	ddres	s whe	ere SV	VPPP:	s can	be ad	cesse	ed - 1	not h	ome	: pag	e.
(JRL(s)) : P	'lease	- 1	ide s	peci:	fic a	ddres	s whe	ere SV	VPPP:	s can	be ad	cesse	ed - 1	not h	ome	: pag	e.
(JRL(s)) : P	'lease	- 1	ide s	peci:	fic ad	ddres	s whe	ere SV	VPPP:		be ad		ed - 1	not h	ome	pag	e.
(JRL(s)) : P	'lease	- 1	ide s		fic ad	ddres	s whe	ere SV	WPPP:				ed - 1	not h	ome	: pag	e.
(D Page U JRL	JRL(s)) : P	'lease	- 1	ide s		fic ad	ddres	ss whe	ere SV	WPPP:				ed - 1	not h		; pag	e.
(D Page U JRL	JRL(s)) : P	lease	- 1	ide s		fic ad	ddres	s whe	ere SV	VPPP:				ed - 1	not h		e pag	;e.
C Page U	JRL(s)) : P	'lease	- 1	ide s	peci	fic ad	ddres	s whe	ere SV	WPPP:				ed - 1	not h			;e.
Phone (D Page U URL	JRL(s)) 		- 1	ide s		fic ad	ddres	s whe	ere SV					ed - 1	not h			.e.
C Page U	JRL(s)) : P	lease	- 1	ide s			ddres	s who	ere SV					ed - 1	not h			je.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

NYR2

0 A

2 0 8

Name of MS4/Coalition TOWN OF BETHLEHEM

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.

(4-2)Review and update SWPPP review written procedures; (4-4)Review and update written complaint procedures;(4-5)Review and update construction inspection and enforcement procedures; (4-7)Review and update Pre-Construction written procedures; (4-8)Utilize GIS/Sharepoint systems to track newly approved SWPPP's, back-load old SWPPPs as time permits.

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

- The Town conducted formal, routine inspections of active construction sites.

- All SWPPPs, active and completed, are mapped. All active and 50% of closed permit documents located and transferred to Town's Sharepoint site.

- No advancement to Standard written procedures advanced during this reporting period.

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

(cs.: samples/participants/events)

4

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

Yes ONo

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

O 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).

(4-2)Review and update SWPPP review written procedures; (4-4)Review and update written complaint procedures: (4-5)Review and update construction inspection and enforcement procedures; (4-7)Review and update Pre-Construction written procedures; (4-8)Utilize GIS/Sharepoint systems to track newly approved SWPPP's, back-load old SWPPPs as time permits.

This report is being submitted for the reporting period ending March 9, 2 0 1

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 BETHLEHEM

	1993	-	2.1	2.5		1	1.1	
T.T	37	D	2	0	7	2	0	

Minimum Control Measure 5. Post-Construction Stormwater Management

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

- On behalf of an individual MS4
- \bigcirc 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
O Alternative Practices			
O Filter Systems			
O Infiltration Basins			
O Open Channels			
O Ponds			
O Wetlands			
O Other			

- Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance?
 Yes O No
- 3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?
- O Building Codes Municipal Comprehensive Plans

O Overlay Districts O Open Space Preservation Program

- Zoning
 O Local Law or Ordinance
- None Land Use Regulation/Zoning
- O Watershed Plans O Other Comprehensive Plan
- O Other:

MCM 5 Page 1 of 3

MS4 Annual Report Form	AS4 Annual Rep	ort Form
------------------------	-----------------------	----------

	SPDES ID
Name of MS4/Coalition TOWN OF BETHLEHEM	N Y R 2 0 A 2 0 8
4a. Are the MS4s contributing to this report involved in a re	egional/watershed wide planning effort? • Yes • O N
4b. Does the MS4 have a banking and credit system for stor	rmwater management practices? O Yes 🔍 N
4c. Do the SWMP Plans for each MS4 contributing to this r and approval of banking and credit of alternative siting	
4d. How many stormwater management practices have been	In implemented as part of this system in this $\boxed{14}$
reporting period?	

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

NYR20A

2 0 8

Name of MS4/Coalition TOWN OF BETHLEHEM

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.

(5-5)Review and update SWPPP review written procedures; (5-12)Utilize Town GIS/Sharepoint to track and inventory all post-construction practices within MS4; (5-12)Utilize Town GIS/Sharepoint to track all inspections/maintenance for Town owned stormwater practices.

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

The Town developed a layer with the Town's GIS program to show the location of post-construction practices. (Carryover from last year).

The Town did not conduct inspection of private post-construction practices and did not develop a tracking method for Town owned stormwater practices.

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

(ex.: samples/participants/events)

3

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

Yes ONo

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

O 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).

(5-5)Review and update SWPPP review written procedures; (5-12)Utilize Town GIS/Sharepoint to track and inventory all post-construction practices within MS4; (5-12)Utilize Town GIS/Sharepoint to track all inspections/maintenance for Town owned stormwater practices.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 0
 8

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?

- port?
- 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.

			Self-Assess	ment
			Operation/Activi	ty/Facility
			performed within	the past 3
Operation/Activity/Facility	Addressed in	n SWMP?	years?	
Street Maintenance	• Yes	O No	• Yes	O No
Bridge Maintenance	O Yes	• No	O Yes	• No
Winter Road Maintenance		O No	O Yes	• No
Salt Storage	• Yes	O No	O Yes	• No
Solid Waste Management	• Yes	C No	O Yes	• No
New Municipal Construction and Land Disturba	ance • Yes	0 No	O Yes	No
Right of Way Maintenance	• Yes	O No	O Yes	• No
Marine Operations	O Yes	• No	○ Yes	• No
Hydrologic Habitat Modification	O Yes	• No	O Yes	• No
Parks and Open Space	• Yes	O No	O Yes	No
Municipal Building		O No	O Yes	• No
Stormwater System Maintenance	• Yes	O No	O Yes	• No
Vehicle and Fleet Maintenance	• Yes	O No	O Yes	No
Other	O Yes	• No	O Yes	No

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.

		SPE	DES	ID						
Name of MS4/Coalition	TOWN OF BETHLEHEM	N	Y	R	2	0	А	2	0	8

2. Provide the following information about municipal operations good housekeeping programs:

Parking Lots Swept (Number of acres X Number of times swept)	# Acres				7
Streets Swept (Number of miles X Number of times swept)	# Miles		3	5	0
O Catch Basins Inspected and Cleaned Where Necessary	# [
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	# [
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	11		-	٦
Nitrogen Applied In Chemical Fertilizer	# Lbs.	3	0	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].	7
3. How many stormwater management trainings have been provided t during this reporting period?	o municipal	emp	loye	-	0
4. What was the date of the last training?	3 / 1	/ 2	0	1	6
5. How many municipal employees have been trained in this reporting	period?	2	1		0
6. What percent of municipal employees in relevant positions and depa stormwater management training?	artments rea	ceive	0	0	%

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

NYR

20A2

0 8

Name of MS4/Coalition TOWN OF BETHLEHEM

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.

(6-1)Review and update current list of Town owned facilities; (6-2)Establish dates of past facility audits and schedule to reinspect; (6-3,4)Coordinate with Highway Dept. regarding catchbasin and street cleaning operations (6-8)Coordinate with Highway Dept regarding Hazardous Waste Day. (6-25)Establish and oversee Third-Party Contracted Entity Certification Statements.

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

The Town has developed a GIS layer showing the location of all municipal facility locations. No facility audits were conducted. No coordination with Highway Department for CB cleaning progressed.

No progress made on Third-Party Contracted Entity Certification Statements.

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

(ex.: samples/participants/events/

2

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

Yes ONo

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

O 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).

(6-1)Review and update current list of Town owned facilitics; (6-2)Establish dates of past facility audits and schedule to reinspect; (6-3,4)Coordinate with Highway Dept. regarding catchbasin and street cleaning operations (6-8)Coordinate with Highway Dept regarding Hazardous Waste Day. (6-25)Establish and oversee Third-Party Contracted Entity Certification Statements.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID

N Y R 2

0

Name of MS4/Coalition

Stormwater Coalition of Albany County

Minimum Control Measure 1. Public Education and Outreach

1 2

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

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

How many MS4s contributed to this report?

				n /*
I.	Targeted Public Education a	nd Outreach	Best Management	Practices

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

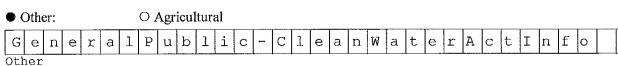
 Construction Sites • Pesticide and Fertilizer Application General Stormwater Management Information Pet Waste Management O Household Hazardous Waste Disposal O Recycling O Illicit Discharge Detection and Elimination Riparian Corridor Protection/Restoration Infrastructure Maintenance O Trash Management • Smart Growth Vehicle Washing O Water Conservation ○ Storm Drain Marking O Wetland Protection O Green Infrastructure/Better Site Design/Low Impact Development O None Other: t Y W С D С 0 1 i t i n е b s i t W h а 0 u а n 0 а 0 e

Other

2. Specific audiences targeted during this reporting period:

0	Public	Employees	•	Contractors
---	--------	-----------	---	-------------

- Residential
 O Developers
- Businesses
 General Public
- O Restaurants O Industries



MCM 1 Page 1 of 4

This report is being submitted for the reporting period ending March 9, $2 \circ 1 7$

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

Name of MS4/Coalition Storm

Stormwater Coalition of Albany County

SPL	DES	ID				
Ν	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			7	0
O Direct Mailings	# Mailings				
Kiosks or Other Displays	# Locations				8
• List-Serves	# In List		2	5	0
O Mailing List	# In List				
O Newspaper Ads or Articles	# Days Run				
Public Events/Presentations	# Attendees		1	1	9
O School Program	# Attendees				
• TV Spot/Program	# Days Run				1
• Printed Materials:	Total # Distributed			5	6
Locations (e.g. libraries, town offices, kiosks)					
C W P W e b c a s t s					

	P	1	а	n	n	i	n	g		В	0	а	r	đ		М	t	g	S	
	Т	r	а	i	n	i	n	g	ន	-	Ρ	u	b	1	i	с	Ρ	r	0	g
	W	A	V	Е	V	0	1	R	е	С	r	u	i	t	m	е	n	t		
Otł	ner:																			

Host 2 CWPWebcasts

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

W	Ŵ	w	•	s	t	0	r	m	a	t	e	r	а	1	b	а	n	У	С	0	u	n	t	У	•	0	r	g	
IRI																													

UKL																										
					Ì												1									1
					1																					ĺ –
				1			1									L		1 1								I
					-													_		_		 	 	 		_
		I		[I														 					1

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

tion	Stormwater Coalition of Albany County	
TIME		

SPI	DES	D					
N	Y	R	2	0			

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.

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.

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

BMP 1-1 Target Audience Analysis Worksheet (TAAW): not completed. BMP 1-3 Website: completed. BMP 1-7 List Serve: partially completed; drop/adds and updated emails provided by Coalition members; not entered into ACCESS database. BMP 1-6 Public Program-Guest Speaker: completed-1 CWA Presentation; not completed-Green Infrastructure Program to MS4 Electeds; no time to develop program and staff person organizing program left MS4.

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	0	No

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

۲	No
	۲

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

SWMPv5 (April, 2017) BMP 1-3 Website: continue to maintain Coalition website (post mandated documents; post educational material; post meeting announcements; pay invoice). BMP 1-7 List Serve: update ACCESS database; BMP 1-4 Publications: update door hanger publication; BMP 1-14 Public Programs-Organized By Coalition-host 1 CWP webcast.



This report is being submitted for the reporting period ending March 9, 2 0 1 7

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
 N
 Y
 R
 2
 0

Minimum Control Measure 2. Public Involvement/Participation

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

- \bigcirc 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:

\bigcirc Cleanup Events	# Events									
• Comments on SWMP Received #Comments										
• Community Hotlines	Phone # $(5 1 8) 4 4 7 - 5$	6 4 5								
Phone # ()	Phone # ()									
Phone # ()	Phone # ()									
Phone # ()	Phone # ()									
Phone # ()	Phone # ()									
Phone # ()	Phone # ()									
○ Community Meetings	# Attendees									
○ Plantings	Sq. Ft.									
○ Storm Drain Markings	#Drains									
\bigcirc Stakeholder Meetings	# Attendees									
• Volunteer Monitoring	# Events	7								
$ \bullet \text{ Other: } C \circ a 1 i t i o n C \circ m m e $	n t s - D R A F T M S 4 P r	n t								

 Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?

Program (SWMP) Plan provided?	۲	s (\bigcirc No		
• List-Serve # In List			1	9	1
○ Newspaper Advertising # Days Run					
○ TV/Radio Notices # Days Run					
O Other:					

• Web Page URL: Enter URL(s) on the following two pages.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPL)ES	ID				
Ν	Y	R	2	0		

2. URL(s) con't.:

Į

Name of MS4/Coalition

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

Stormwater Coalition of Albany County

URL	,																		_											,,	
W	W	W	•	s	t	0	r	m	W	а	t	e	r	а	1	b	а	n	У	С	0	u	n	t	У	.	0	r	g		
											<u> </u>																				
																													1		
			I	<u> </u>		L .	ł	L	I		<u> </u>	I	ł	<u> </u>	ļ			I	I	<u> </u>	L	I	1	1	I	1	L	1	1		
URL								1												·									Γ		
			L				 	Ī			 			 						 					1						
			 					 			<u> </u>	 	l 	l 			[<u> </u>	 		<u> </u>	 		1	<u> </u>	<u> </u>				
		l													I			L .			<u> </u>	ļ			L		<u> </u>]			
URI	í—	·····				_	I		1			l			[[Γ				· ···	<u> </u>		Τ						
					[<u> </u>	L				 		 	<u> </u>			1		<u> </u>	 				1		 	1	\square	
Ŀ								 	 	<u> </u>						<u> </u>										<u> </u>	 T	I T			
																				<u> </u>											
URI																															
																	Ļ					<u> </u>							<u> </u>		<u> </u>
	_													-																	
URI															_	_	_						-	_							
				Ţ																											
			İ	Ì									Í			1															
	1	Γ		1	1	<u> </u>						İ	Ī				Ì		Ī				Ī		Ť					İ	İ
URI		I	<u> </u>		1	1	1	.1	1	\$	- I	.l		1		*	1	1		<u> </u>	1	1	(1		l
							Γ				Γ																				
F				İ				\square	1	1				1	İ				Ī	İ			Ì	T	1	Ī	Ì	Ì		Ī	
-	<u> </u>	<u> </u>			<u> </u>		1	$\frac{1}{1}$	1	1		<u> </u>			<u> </u>	1		<u> </u>	1			<u>+</u>			1	<u> </u>		1	+	<u> </u>	<u>+</u>
		I	L	I	1	<u> </u>			1	1			<u> </u>	1	1	1	l	<u> </u>		1	<u>t</u>	1	1	1	1	1	[1	1	L	<u> </u>
		1							 	T					T											<u> </u>	Γ				<u> </u>
	1	<u> </u>	1		<u> </u>	<u> </u>	1	+	$\frac{1}{1}$			1	<u> </u>		$\frac{1}{1}$	<u> </u>		1	T		† ,		<u> </u>	<u> </u>	+	1	+				†
	1	 	<u> </u>	$\frac{1}{1}$	╞	<u> </u> 	1	<u> </u>	<u> </u> 	<u> </u>	1		+		<u> </u>	<u> </u>	 	<u> </u>	<u> </u>	<u> </u>	1		1			1	╈	$\frac{1}{1}$	<u> </u>	1	
[1	1	1	1	1	1			1	1	1	1		1	ł	1	1		1	1	1	1		1		1	1	1	1	i	1

MS4 Annual Report Form												
This report is being submitted for the reporting period ending March 9, $2 0 1 7$												
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID												
Name of MS4/Coalition Stormwater Coalition of Albany County												
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 Department												
Stormwater Coaliition-AlbanyCnty												
Address												
1 7 5 G r e e n S t r e e t - C n t y H e a 1 t h B 1 d g City Zip												
A 1 b a n y N Y 1 2 0 2 - -												
Phone Control												
O Library O Annual Report O SWMP Plan O Comments												
City Zip												
O Other O Annual Report O SWMP Plan O Comments												
$\begin{array}{c c} Phone \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ $												
Web Page URL: Annual Report SWMP Plan Comment:												
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												
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												

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

		SPI	DES	ID				
Name of MS4/Coalition Stormwater Coalition of Albany County		Ν	Y	R	2	0		
4.a. If this report was made available on the internet, what da	ate was	it p	oste	d?	1	r-	<u> </u>	3]
Leave blank if this report was not posted on the internet.		0 5]/[0	5	/	2 0	1 7
4.b. For how many days was/will this report be posted?								14
If submitting a report for single MS4, answer 5.a If submitt	ting a jo	oint r	epoi	rt, a	ans	wer	5.b	
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting pe	riod	?] / [。 /[Yes	O No
If No, is one planned?						0	Yes	O No
5.b. Was an Annual Report public meeting held for all MS4s	contri	butir	ng ta	o th	nis :	rep	ort d	uring
this reporting period?						0	Yes	• No
If No, is one planned for each?						0	Yes	• No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.						0	Yes	• No

<u>MS4 Annual Report Form</u>

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

SPI	DES	ID			 		
N	Y	R	2	0			

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.

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.

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

BMP 2-2 Annual Report: completed. BMP 2-8 Student Water Quality Projects: partially completed; contract between UAlbany and County-Coalition completed; recruitment flyer for professors and students 85% completed. BMP 2-11 WAVE-8 sites monitored.

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 O 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).

SWMPv5 (April, 2017) BMP 2-2 Annual Report: Coalition staff prepare for and guide possible transition to "new" MS4 Permit likely to include changes in Annual Report format and annual program evaluation process-no particular goals named in SWMP document. BMP 2-11 WAVE-monitor 4 sites with volunteers.

This report is being submittee	for the reporting perio	d ending March 9,	2	0	1	7
--------------------------------	-------------------------	-------------------	---	---	---	---

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

Name of MS4/Coalition	County N Y R 2 0
3.b.What types of illicit discharges have	been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
O Failing Septic Systems	○ Pump Station Failure
○ Floor Drains Connected To Storm Sewers	○ Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
O Other:	O None
reporting period?	al illegal connections have been detected during this
·	en confirmed during this reporting period?
7. Has the storm sewershed mapping b If No, approximately what percent was	een completed in this reporting period? O Yes O No s completed in this reporting period? \$
 8. Is the above information available in Is this information available on the VII If Yes, provide URL(s): Please provide specific address of page URL 	

URL	<u> </u>																	····-					,					r			r
Ρ	а	s	S	W	0	r	d		Ρ	r	0	t	е	С	t	е	d		R	e	S	t	r	i	С	t	е	d			
h	t	t	р	s	:	1	/	a	С	v	а	r	С	g	i	s	•	а	1	b	а	n	У	С	0	u	n	t	У		С
С	0	m	1	W	е	d	m	а	p	1																					
URL	, 		1				r	r			1				r	Г			r		1		-	1	ł	1	r	1	r	<u> </u>	
																										ļ			<u> </u>		

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPI	DES	ID				
N	Y	R	2	0		

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.

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.

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

BMP 3-2 Coalition Stormwater Program Mapper: completed; re-design includes "Form" considerations; one design workshop, not 3; more complex redesign to include "Forms" pending development of RFP for consultant services. BMP 3-5 Dry Weather (ORI) -completed; kits restocked.

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 O No

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

• Yes O No

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

SWMPv5 (April, 2017) BMP 3-4 Storm Sys-CSO-Sewershed Map'g/BMP 5-8 Inventory Post Const SMPs/BMP 6-1 Inventory MuniFac: continue to implement mapping goals detailed in SWMPv5 (see MCM3, MCM 5, and MCM6); continue to implement objectives and tasks listed in the NYSDEC grant contract C00081GG work plan. See respective documents for details (SWMPv5 and grant work plan). Both explain what is being mapped where, when, and how for all Coalition members.

MCM 3 Page 4 of 4

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

	SPL	DES	ID				
1	N	Y	R	2	0		

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.

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Proceduresreview 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.

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

BMP 4-5 Construction Site Enf & Inspection Procedures: not completed; DRAFT MS4 Permit points to mandated MS4 Construction Inspection Forms, need to know status of DEC forms before proceeding further.

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?

O 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).

SWMPv5 (April, 2017): BMP 4-7 Construction Site Operator Training-4hr: co-host one 4 hr training with ACSWCD.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SP	DES	S ID				
N	Y	R	2	0		

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.

From SWMPv4 document (May, 2016): BMP 5-5 SWPPP Review Procedures - for Coalition Stormwater Program Mapper update/load map layers named in Construction Activity Permit/ NYSDEC SW Mgmt Design Manual. BMP 5-8 Inventory Post Construction Practices - with grant funding implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - with grant funding develop inspection forms for use with mobile devices

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

.BMP 5-5 SWPPP Review Procedures: partially completed, pre-existing layers uploaded, additional layers more difficult to obtain. BMP 5-8 Inventory Post Construction Practices: mapping of post-construction practices implemented as detailed in grant work plan. MP 5-9 Post Construction Practices: not completed.

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 O No

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

O 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 SWMPv5 document (April, 2017): BMP 5-8 Inventory Post Construction Practices - continue to map post construction practices as detailed in grant work plan and various SWMPv5 goals. BMP 5-9 Post Construction Practices-Maintenance: complete RFP for consultant services to develop GIS friendly post-construction stormwater management practice (PC SMPs) inspection forms (mobile devices).

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

SPDES ID N Y R 2 0

2

0 1 6

4 9

9

0

2 2

		,
	Stormwater Coalition of Albany County	
Name of MS4/Coalition		

2. Provide the following information about municipal operations good housekeeping programs:

○ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
O Streets Swept (Number of miles X Number of times swept)	# Miles	
O Catch Basins Inspected and Cleaned Where Necessary	#	
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O 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	

- 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?

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 \\ 0 \end{vmatrix} \begin{vmatrix} 1 \\ 7 \end{vmatrix}$

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

5	SPL	DES	ID				
	N	Y	R	2	0		

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.

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.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

	0	
--	---	--

(ex.: samples/participants/events)

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

Yes O No

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

• Yes O No

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

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 \\ 0 \end{vmatrix} \begin{vmatrix} 1 \\ 7 \end{vmatrix}$

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

5	SPL	DES	ID				
	N	Y	R	2	0		

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.

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.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

	0	
--	---	--

(ex.: samples/participants/events)

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

Yes O No

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

• Yes O No

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

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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					

Additional Watershed Improvement Strategy Best Management Practices

1 2

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

O On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report?

MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	-	-	-
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
Ouondaga Lake Watershed	-	-	-
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
Greenwood Lake Watershed	-	-	
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
Oyster Bay	-	-	-
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
Peconic Estuary	-	-	-
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
Oscawana Lake Watershed	-	-	-
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
LI 27 Embayments	**		-
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

s ONo 🔍 N/A

O Yes

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?

○ 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.

Additional BMPs Page 1 of 3

This report is being submitted for the reporting period ending March 9,	2	0	1	7	
---	---	---	---	---	--

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

	SPDES ID
Name of MS4/Coalition Stormwater Coalition of Albany County	N Y R 2 0
3. Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (infrastructure) Inspection O Yes O No © N/A
4. Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report	
5. Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Dischar (GP-0-08-001) to reduce pollutants in stormwater runoff for disturb five thousand square feet or more?	ges from Construction Activities
6. Has your MS4/Coalition developed a program to address prunoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Acti the New York State Stormwater Design Manual Enhanced Standards?	that disturb greater than or e NYS DEC SPDES General ivities (GP-0-08-001), including
7a. Does your MS4/Coalition have a retrofitting program to represent phosphorus/nitrogen/pathogen loading?	educe erosion or O Yes O No S N/A
7b. How many projects have been sited in this reporting perio	d?
7c. What percent of the projects included in 7b have been con	apleted in this reporting period?
7d. What percent of projects planned in previous years have b	been completed?
	○ No Projects Planned
8a.Has your MS4/Coalition developed and implemented a tur procedures policy that addresses proper fertilizer applicat lands?	
8b.Has your MS4/Coalition developed and implemented a tur	f management practices and

procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? O Yes O No O N/A

Additional BMPs Page 2 of 3

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

		SPI	DES	ID				
Name of MS4/Coalition	Stormwater Coalition of Albany County	TN	Y	R	2	0		

9. Has your MS4/Coalition developed and implemented a program of native planting?							
	○ Yes	O No	• N/A				
10. Has your MS4/Coalition enacted a local law prohibiting pet waste on r	nunicipa	l prope	rties and				
prohibiting goose feeding?	O Yes	O No	• N/A				
11. Does your MS4/Coalition have a pet waste bag program?	\bigcirc Yes	O No	• N/A				
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	O No	• N/A				