DRAFT

Stormwater Coalition of Albany County Joint Annual Report

SPDES General Permit for Stormwater Discharges from <u>M</u>unicipal <u>S</u>eparate <u>S</u>torm <u>S</u>ewer <u>S</u>ystems (MS4s) Permit No. GP-0-10-002

<u>Reporting Period</u> March 10, 2014 to March 9, 2015

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-0-10-002, 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 and other related contracts as described in the inter-municipal agreement.

The submission of a FINAL Joint Annual Report first involves the release of a DRAFT Joint Annual Report, followed by the collection of public comments, if any. These comments are included in the FINAL Joint Annual Report and used to help guide the implementation of program requirements. Comments regarding any aspect of stormwater program implementation, either for the Coalition or individual MS4 Programs are strongly encouraged and welcome. To understand MS4 Permit requirements, go to the NYSDEC website. To learn about Program implementation, go to the Coalition website, Member and Plan/Program pages.

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; swcoalition@albanycounty.com or phone; 447-5645.

OTHER INFORMATION

1. Hard copies of this Draft Joint Annual Report are located at the Stormwater Coalition office, 112 State Street, Albany, NY 12207 and at local MS4/municipal offices (see Draft Annual Report MCM 2 Page 4 of 6 for address information).

2. Public comments are due 4pm, Monday, May 18, 2015.

3. If interested, prior to May 18 individuals may request a public meeting. Call 447-5645.

JOINT ANNUAL REPORT FORMAT

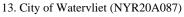
The Annual Report document is a form developed by NYSDEC and as such provides a snapshot of program activities pertaining to individual member and collaborative Coalition activities. This DRAFT Joint Annual Report includes individual Annual Reports organized by MS4 type, numerically (see order below) with shared Coalition data inserted at the end of each individual report. The SPDES Permit No. of each MS4 is in parenthesis. Goals for the upcoming year are based on an updated Joint Stormwater Management Program Plan document completed in May, 2015 (SWMPv3 2015-2017). To view the SWMP Plan document, see Coalition website.

Traditional Non Land Use Control MS4 1. Albany County (NYR20A359)

Non-Traditional MS4

2. University at Albany-SUNY (NYR20A234)

- Traditional Land Use Control MS4s
- 3. City of Albany (NYR20A464)
- 4. Village of Altamont (NYR20A550)
- 5. Town of Bethlehem (NYR20A208)
- 6. City of Cohoes (NYR20A243)
- 7. Town of Colonie (NYR20A190)
- 8. Village of Colonie (NYR20A076)
- 9. Village of Green Island (NYR20A377)
- 10. Town of Guilderland (NYR20A211)
- 11. Village of Menands (NYR20A144)
- 12. Town of New Scotland (NYR20A463)





Stormwater Coalition of Albany County, 112 State Street, Room 720, Albany, NY 12207 518-447-5645 518-447-5622 (fax) www.stormwateralbanycounty.org

PORT FORMAT

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 5

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

SPE	DES	ID				
Ν	Y	R	2	0		

Choose one:

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

Fill in SPDES ID in upper right hand corner.

Na		of M														
																i l
	-			-	 				I				 	 		

OR

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

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

Name of Single Entity

|--|

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

SPI	DES	ID						
Ν	Y	R	2	0	A	3	5	9
SPI	DES	ID						
Ν	Y	R	2	0	A	2	3	4
SPI	DES	ID						
Ν	Y	R	2	0	А	4	6	4
SPI	DES	ID						
Ν	Y	R	2	0	A	5	5	0
SPI	DES	ID						
Ν	Y	R	2	0	А	2	0	8
SPI	DES	ID						
Ν	Y	R	2	0	A	2	4	3

SPE	DES	ID						
Ν	Y	R	2	0	А	1	9	0
SPI	DES	ID						
Ν	Y	R	2	0	Α	0	7	6
SPI	DES	ID						
Ν	Y	R	2	0	А	3	7	7
SPI	DES	ID						
Ν	Y	R	2	0	Α	2	1	1
SPE	DES	ID						
Ν	Y	R	2	0	Α	1	4	4
SPL	DES	ID						
Ν	Y	R	2	0	Α	4	6	3

SPI	DES	ID						
Ν	Y	R	2	0	А	0	8	7
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	А			
SPI	DES	ID						
Ν	Y	R	2	0	А			
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	А			

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 5

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

							1
SPI	DES	ID					
Ν	Y	R	2	0	Α		
SPI	DES	ID					
Ν	Y	R	2	0	А		
SPI	DES	ID					
Ν	Y	R	2	0	А		
SPI	DES	ID					
Ν	Y	R	2	0	A		
SPI	DES	ID					
Ν	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
Ν	Y	R	2	0	А		
SPI	DES	ID					
Ν	Y	R	2	0	А		
SPI	DES	ID					
Ν	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
Ν	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
Ν	Y	R	2	0	А		
	DES	ID					·J
Ν	Y	R	2	0	А		
SPI	DES	ID			·	·	
Ν	Y	R	2	0	А		
SPI	DES	ID					
Ν	Y	R	2	0	А		
SPI	DES	ID			·	·	·
Ν	Y	R	2	0	А		
						•	·

ODI		ID					1	
	DES		0	0	-			
Ν	Y	R	2	0	A			
<u> </u>	DES	_	_	_	_			
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	Α			
SPI	DES	ID						
Ν	Y	R	2	0	Α			
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	ÞES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID						
Ν	Y	R	2	0	A			
SPI	DES	ID				·		
Ν	Y	R	2	0	A			
SPI	DES	ID		<u> </u>	I	I		
Ν	Y	R	2	0	A			
SPI	DES	ID			L	L	L	
Ν	Y	R	2	0	A			
	DES	ID		L	I	I	I	
N	Y	R	2	0	A			
	DES							
N	Y	R	2	0	A			
Ľ				-				

~~~~								
SPD			_		7			
Ν	Y	R	2	0	A			
SPD		_	0		-			
Ν	Y	R	2	0	A			
SPD		ID						
Ν	Y	R	2	0	Α			
SPD								
Ν	Y	R	2	0	Α			
SPD	DES	ID						
Ν	Y	R	2	0	Α			
SPD	ES	ID						
Ν	Y	R	2	0	Α			
SPD	DES	ID						
Ν	Y	R	2	0	А			
SPD	ES	ID						. <u> </u>
Ν	Y	R	2	0	А			
SPD	ES	ID						
Ν	Y	R	2	0	А			
SPD	ES	ID						
Ν	Y	R	2	0	Α			
SPD	ES	ID						
Ν	Y	R	2	0	А			
SPD	ES	ID						
Ν	Y	R	2	0	А			
SPD	ES	ID						
Ν	Y	R	2	0	А			
SPD	ES	ID						
Ν	Y	R	2	0	А			
SPD	<b>E</b> S	ID			·		·	
Ν	Y	R	2	0	А			
SPD	ES	ID						
Ν	Y	R	2	0	А			
SPD	ES	ID	_		·	ı	·	]
Ν	Y	R	2	0	А			
SPD	ES	ID			L	I	L	
Ν	Y	R	2	0	А			
						I	L	

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

MCC form for period ending March 9, 2 0 1 5

	:	SPD		ID						
Name of MS4 Village of Colonie		N	Y	R	2	0	A	0	7	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:

- 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	С	0	a	1	i	t	i	0	n	0	f	А	1	b	a	n	У
С	0	u	n	t	У																					

## MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1

Name of MS4 Village of Colonie

SPDES ID N Y R 2 0 A 0

7 6

5

## 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
- Duly Authorized Representative
- $\bigcirc$  Local Stormwater Public Contact
- $\odot$  Stormwater Management Program (SWMP) Coordinator
- $\bigcirc$  Report Preparer

Firs	t Na	ame	-	-		-	-									MI	_	Las	t Na	me				_	_	_		-		
F	r	a	n	k												А		L	е	a	k									
Titl	e																					_								 
М	а	У	0	r																										
Add	lres	s																												
2		Т	h	u	n	d	е	r		R	0	а	d																	
City	/			-		-														St	tate	;	Zip							
V	i	1	1	a	g	е		0	f		С	0	1	0	n	i	е			ľ	1.	Y	1	2	2	0	5	-		
eMa	ail		-																											
Pho	ne																	Cou	inty											
(	5	1	8	)	8	6	9	-	7	5	6	2						A	1	b	a	n	У							

## MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1

Name of MS4 Village of Colonie

SPDES ID N Y R 2 0 A 0

7 6

5

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

Firs	t Na	ime														MI		Las	t Na	ime										 
R	a	n	d	У														R	i	v	е	r	a							
Titl	e																													
С	0	d	е		Ε	n	f	0	r	С	е	m	е	n	t		D	е	р	t	•		Η	е	а	d				
Add	lres	s																											 	
2		Т	h	u	n	d	е	r		R	0	а	d																	
City	/																			S	tate		Zip							
V	i	1	1	а	g	е		0	f		С	0	1	0	n	i	е			ľ	1 2	Y	1	2	2	0	5	–		
eMa	ail																													
d	р	W	@	С	0	1	0	n	i	е	v	i	1	1	a	g	е	•	0	r	g									
Pho	ne																	Cot	inty											
(	5	1	8	)	8	6	9	-	6	3	7	2						A	1	b	a	n	У							

## MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1

Name of MS4 Village of Colonie

SPDES IDNYR20A0

7 6

5

## 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
- $\bigcirc$  Duly Authorized Representative
- $\bigcirc$  Local Stormwater Public Contact
- $\odot$  Stormwater Management Program (SWMP) Coordinator
- Report Preparer

Firs	t Na	ime														MI	_	Las	t Na	ime										
R	0	n	a	1	d											J		L	a	b	е	r	g	e						
Title	e																													
V	i	С	е		Ρ	r	е	ß	i	d	е	n	t	,		L	а	b	е	r	g	е		G	r	0	u	р		
Add	Ires	S																												 
4		С	0	m	р	u	t	е	r		D	r	i	v	е		W	е	S	t										
City	7																			S	tate		Zip							
A	1	b	а	n	У															ľ	1 2	Y	1	2	2	0	5	-		
eMa	uil																													
r	j	1	а	b	е	r	g	е	@	1	a	b	е	r	g	е	g	r	0	u	р	•	С	0	m					
Pho	ne												,					Cou	inty											
1	5	1	8		4	5	8	_	7	1	1	2						А	٦	b	a	n	У							

## MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 5

Name of MS4 Village of Colonie

SPDES ID

 N
 Y
 R
 2
 0
 A
 0
 7
 6

## 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	ion N	Jam	e																										
S	t	0	r	m	w	а	t	е	r		C	0	a	1	i	t	i	0	n		0	f		A	1	b	a	n	У			
Par	tner	/Co	aliti	ionl	Nam	ne (c	on't	.)		•	•	•			•						•		•	SPI	DES	S Pa	rtne	r ID	- If	apr	olica	ble
С	0	u	n	t	У																			Ν	Y	R	2	0				
Ad	dres	5																														
1	1	2		S	t	а	t	е		S	t	r	e	е	t	,		R	0	0	m		7	2	0							
Cit	y									•	•	•								St	ate		Zip		•			•				
A	1	b	a	n	У															N	1 A		1	2	2	0	7	-				
eM	ail																															
n	h	е	i	n	z	е	n	@	а	1	b	а	n	У	С	0	u	n	t	У		С	0	m								
Pho	one																		T a	aa11	D.	ndi		1 ~ ~ ~		ant			dan	~~		
(	5	1	8	)	4	4	7	-	5	6	4	5								-	•		-	Agre 2 Pa					Ye		0	No
W/	hat	tac	ke/i	raci	<b>1</b> 011	cih	;1;+;	00	ora	ch	ra	1	ith	thia	n	ortn	or		- <b>N</b> /	1M	1 5	cho	<u></u>	Dro	ara	ma	or	М	11111	' مار	Тас	sks)?
VV.	nai	ias.	K2/1	les	011	510	11111	05	are	5110	arec	1 //	1111	um	s pa	11 111		e.g	, IV.	1171	1.0		101	110	gra	uns	01	IVIL	ուդ	ле	1 as	KS):
• ]	MM	1	Е	d	u	С	a	t	i	0	n		М	а	t	е	r	i	a	1		&		Р	r	0	g	r	а	m	ន	
	MM	2	S	W	М	Р	/	W	A	V	Е	/	W		b	G	i	t	0		Р		b	1	i	0		I	n	2		+
	VIIVI	.Ζ	Б	VV	1•1	Р	/	VV	A	V	Б	/	VV	е	D	S	1	L	е	-	Р	u	D	1	1	C		L L	n	р	u	t
• ]	MM	3	А	Ι	М	S	-	0	R	Ι		A	s	S	t	-	I	D	D	Е		Ρ	r	0	С	е	d	u	r	е	S	
	MM	4	Р	r	0	С	e	d	u	r	e	S		S	u	р	p	0	r	t												
-									_						-	L.	L.									<u> </u>						
• ]	MM	5	Ρ	r	0	С	e	d	u	r	е	S		S	u	р	р	0	r	t												
• ]	MM	6	Т	r	a	i	n	I	g	_	F	a	С	i	1	i	t	У		A	u	d	i	t		S	u	р	р	0	r	t
		_		·		I	I			I	I	I	I			I			I	I	I		I		I	1	1	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 Certificati	on	( <b>M</b>	CC	!) <b>I</b>	For	m					
MCC form for period ending March 9	, 2	0	1	5							
			SPI	DES	ID						
Name of MS4 Village of Colonie			Ν	Y	R	2	0	A	0	7	6

## 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       F     r       a     n	MI A	Last Name
M       a       y       o       r       Image: second secon		
Signature		Date

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

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

This report is being submitted for the reporting period ending Marc	ch 9.	2	0	1	5	
This report is being submitted for the reporting period chang war	· · · · ,	2		I		

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

Name of MS4/Coalition

n	Village	of	Colonie
---	---------	----	---------

## 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. ○ Yes

1

No

SPDES ID Y R 2

0 A

0 7 6

N

If Yes, choose one of the following

- $\bigcirc$  Report(s) attached to the annual report
- $\bigcirc$  Web Page(s) where report(s) is/are provided below

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

URL			 	 		 	 			 				 	 
URL															
URL															
URL	,														

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Colonie

## Minimum Control Measure 1. Public Education and Outreach

SPDES ID

0 A

0 7 6

N Y R 2

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

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

Students

Other

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	Construction Sites											cide	and	Fe	ertili	zer	Ap	plic	atic	on	
• General Stormwater	Management	Info	ormati	on							Pet V	Vaste	e M	ana	igen	nent	Ĺ				
• Household Hazardou	us Waste Dispo	osal	l								Recy	cling	5								
Illicit Discharge Det	tection and Elin	min	ation							0	Ripar	ian	Cor	rid	or P	rot	ectio	on/F	Rest	ora	tion
• Infrastructure Maint	tenance										Trash	n Ma	nag	gem	ent						
$\bigcirc$ Smart Growth										•	Vehic	ele V	Vas	hin	g						
• Storm Drain Markin	torm Drain Marking											r Co	onse	rva	tion						
• Green Infrastructure	/Better Site De	esig	n/Lov	v In	npac	t De	velo	pm	nent	$\bigcirc$	Wetla	and	Pro	tect	ion						
$\bigcirc$ Other:										$\bigcirc$	None										
Other																					
2. Specific audienc	es targeted d	uri	ing tł	nis 1	epo	ortin	ng po	eri	iod:												
• Public Employees	• Contractors	5																			
• Residential	Developers																				
• Businesses	• General Pu	blic	с																		
• Restaurants	$\bigcirc$ Industries																				
• Other:	• Agricultura	ı1		_	,,									1							

This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition	Village of Colonie
-----------------------	--------------------

SPI	DES	ID							
Ν	Y	R	2	0	А	0	7	6	

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

	nstr	ucti	on	Site	e Oj	pera	ator	s T	rair	ned								# Trained					
• Dir	ect	Ma	ilin	gs														#Mailings	1	4	9	0	8
• Kic	sks	or	Otł	ner i	Dis	play	ys											# Locations					6
○ Lis	t-Se	erve	s															# In List					
○ Ma	ilin	g L	ist															# In List					
○ Nev	wsp	ape	r A	ds (	or A	Arti	cles	5										# Days Run					
Put	olic	Ev	ents	s/Pr	ese	ntat	ion	S										# Attendees		2	1	0	0
• Sch	lool	Pro	ogra	am														# Attendees					
○ TV	Sp	ot/F	Prog	gran	n													# Days Run					
• Pri																		Total # Distributed	1	7	6	4	0
	Loca	ation	ıs (e	.g. l	ibra	ries,	tow	/n of	fices	s, kie	osks	)					_						
	V	i	1	1	a	g	е		Η	a	1	1											

• Other:

R e c r e a t i

С

Fli

0

r e

m m u n

S t e w a r t ' s S h o p s

cltli

С

Cent

e n

on

Ι

n s p e

i

t

У

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

e r

S

on

t

e | r

W	W	W	•	С	0	1	0	n	i	е	v	i	1	1	a	g	е	•	0	r	g	/	S	t	0	r	m	W	a	t	е
r	•	h	t	m																											

URL

orte																														
w	w	W	•	С	0	1	0	n	i	е	v	i	1	1	a	g	е	•	0	r	g	/	а	f	t	е	r	t	h	e
	S	t	0	r	m	•	р	d	f																					

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Colonie

 SPDES ID

 N
 Y
 R
 2
 0
 A
 0
 7
 6

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

URI	_																														
W	w	w	•	С	0	1	0	n	i	е	v	i	1	1	a	g	e	•	0	r	g	/	F	Ι	Ν	A	L	٥\٥	2	0	A
Ν	Ν	U	А	L	0\0	2	0	R	Е	Р	0	R	Т	0\0	2	0	2	0	Ρ	Е	0\0	2	0	М	а	r	С	h	0\0	2	0
9	0/0	2	0	2	0	1	4		р	d	f																				
URI																	•				•										
W	w	w	•	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		
URI			I			L	L												I			I									
							-	<u> </u>																							
															I																Ĺ
URI																															
						<u> </u>	<u> </u>	$\frac{1}{1}$																							
						<u> </u>	<u> </u>	<u> </u>																							
URI	_ T		1	1	1							1		1		1		1	1	1											
URI																															
								<u> </u>																							
						L	L				L				L																
URI																															
							<u> </u>	<u> </u>																							
							<u> </u>	<u> </u>																							
																													í '	1	Ĺ

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Village of Colonie

#### 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.

Use the CBI MS4 software to track reporting and continue the measurable goal.

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

The Village did not use the CBI software specifically, but did use the Village Designated Engineers' worksheet to track, record and document various activities.

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

(ex.: samples/participants/events)

7 6

0

#### 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).

By 3/9/2016, the SMO with assistance from the VDE will complete the Target Audience Analysis Worksheets (TAAW) for the Lisha Kill, Shaker Creek and Patroon Creek (includes Cherry Creek) watersheds. The SMO will review the number of street crossings over or along the tribs. for the creeks and will mark the possible locations for posting of educational signs on the Village's outfall map. This will be reviewed for establishing 2017 goals.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition	Village of Colonie
INALLE OF WIS4/COATTION	•

 SPDES ID

 N
 Y
 R
 2
 0
 A
 0
 7
 6

## Minimum Control Measure 2. Public Involvement/Participation

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. 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	# Ev	ents					
• Comments on SWMP Received	#Comm	ents					0
• Community Hotlines	Phone # $\left( \begin{bmatrix} 5 & 1 & 8 \end{bmatrix} \right) \begin{bmatrix} 8 & 6 \end{bmatrix}$	59	-	6	3	7	2
Phone # ( )	Phone # ( )		- [				
Phone # ( )	Phone # ( )		-				
Phone # ( )	Phone # ( )		-				
Phone # ( )	Phone # ( )		-				
Phone # ( )	Phone # ( )		- [				
○ Community Meetings	# Attend	lees					
○ Plantings	Sq	Ft.					
$\bigcirc$ Storm Drain Markings	#Dr	ains					
$\bigcirc$ Stakeholder Meetings	# Attend	lees					
• Volunteer Monitoring	# Ev	ents					4
• Other: E l e c t r o n i c s R e	cycliing P	. o	g	r	a	m	

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

Program (SWMP) Plan provided?	$\bigcirc$ Yes	$\bigcirc$ No
○ List-Serve # In List		
○ Newspaper Advertising # Days Run [		
○ TV/Radio Notices # Days Run		
• Other: P o s t i n g B o x e s		

• 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 5

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

Name of MS4/Coalition	Village of Colonie
-----------------------	--------------------

SPI	DES	ID		-		-		
Ν	Y	R	2	0	А	0	7	6

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

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

URL

W	w	W	•	С	0	1	0	n	i	е	v	i	1	1	a	g	е	•	0	r	g	/	F	Ι	Ν	А	L	٥/٥	2	0	A
Ν	Ν	U	A	L	ە\ە	2	0	R	Ε	Ρ	0	R	Т	٥\o	2	0	2	0	Ρ	Ε	o\o	2	0	М	а	r	С	h	٥\o	2	0
9	0\0	2	0	2	0	1	4	•	р	d	f																				

URL	,																													
W	W	w	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	a	n	У	С	0	u	n	t	У	•	0	r	g	

URI																	
																.	
<u> </u>	 			 	 	 	 		 	 	-	 	 		 		
																.	
L	 	 	 		 		 	I		 		 	 	 	 	 	

URL

 -															

UDI

-		1			-	-										

URI

JRL	·															

UR	Ľ															
	1							1								

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Colonie

SPI	DES	ID						
Ν	Y	R	2	0	А	0	7	6

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

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

UR	L		 	 	 				 	 	 			 		 	 
UR	L					I											 
		1															
	 r																 
UR																	
UR																	
		-								 							
UR	L																
		-															
UR	L			 													
UR	L																 

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition	Village of Colonie
-----------------------	--------------------

 SPDES ID

 N
 Y
 R
 2
 0
 A
 0
 7
 6

# **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					offic	e											A	nnu	al l	Rep	ort		S	WN	1P 1	Plar	ı	• (	Con	nme	ents
	Dep																														
	V	i	1	1	a	g	e		H	а	1	1																			
	Ado	lres	s																												
	2		Т	h	u	n	d	е	r		R	0	a	d																	
	City																	Г			i	Zip									
	V	i	1	1	a	g	е	0	f	С	0	1	0	n	i	е		]	N	Y		1	2	2	0	5	-				
	Pho	ne							1					1																	
	(	5	1	8	)	8	6	9	-	7	5	6	2																		
○ Lib	rary Ado	, lres	s													C	) A	nnu	al l	Rep	ort	C	) S'	WN	1P 1	Plar	1	0	Con	nme	ents
	City	/				I																Zip									
																											-				
	Pho	ne						I		I				I							I										
	(				)				-																						
• Oth	er Ado	lres	s														A	nnu	al l	Rep	ort		S	WN	1P I	Plar	1	• (	Con	nme	ents
	1	1	2		S	t	a	t	e		S	t	r	е	е	t		R	0	0	m		7	2	0						
	City		-		-	0		0	0		-	0	-	0	0	0			0	0		Zip	,	-							
	A	1	b	a	n	У												1	N	Y		1	2	2	0	7	-				
	Pho	ne																			I										
	(	5	1	8	)	4	4	7	-	5	6	4	5																		
• Wel	h Pe	age	IIR	· I ·													A	nnu	al l	Rep	ort		S	WN	1P 1	Plar	ı	• (	Con	nme	ents
• • • • •		-		L.	~		1		-	i			i	1	1					_			/								
	W	W	W	•	С	0	1	0	n		e	V	1	1	1	a	g	е	•	0	r	g	/	S	t	0	r	m	W	a	t
	е	r	•	h	t	m																									
	W	W	w	•	s	t	0	r	m	w	a	t	е	r	а	1	b	a	n	У	С	0	u	n	t	У	•	0	r	g	
	Ple	ease	e pr	ovi	de	spe	cifi	ic a	ddr	ess	of	pa	ge v	whe	ere	rep	ort	car	n be	e ac	ces	sed	l - r	not	hor	ne	pag	ge.			
• eMa	ail																											• (	Con	nme	ents
	r	a	n	d	У	r	i	v	е	r	i	a	@	С	0	1	0	n	i	е	v	i	1	1	a	g	е	•	0	r	g
	ន	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			

This report is being submitted for the reporting period ending March 9,	2 0 1 5	5
If submitting this form as part of a joint report on behalf of a coalition leave SPDE	S ID blank	ζ.
Name of MS4/Coalition     Village of Colonie     SPDES ID	0 A 0	7 6
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. $05/01$	/ 2 0	1 5
4.b. For how many days was/will this report be posted?		1 5
If submitting a report for single MS4, answer 5.a If submitting a joint report, ans	swer 5.b	
5.a. Was an Annual Report public meeting held in this reporting period?         If Yes, what was the date of the meeting?         /	○ Yes ] /	• No
If No, is one planned?	○ Yes	• No
<ul><li>5.b. Was an Annual Report public meeting held for all MS4s contributing to this this reporting period?</li><li>If No, is one planned for each?</li></ul>	report du O Yes O Yes	uring ○ No ○ No
<ul><li>6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to</li></ul>	⊖ Yes	• No

SWMP in response to comments to this report.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Colonie

#### 7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The Village will increase postings of educational material and track the distribution of material and the items collected. Tracking will be done by use of

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

The Village continues to provide pet waste recycling bags and collects these and records the number collected. Another continuing activity is the collection of recyclables such as TV's, computers, printers, etc. Various postings of educational brochures and notices of collection days furthers public involvement/participation. Presenting at a Village Board Mtg. & Posting of the Report on the website(s) enables public involvement in the development of the SWMPP. Actual Observ.=13,982.

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

99999

(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).

By 3/9/2016, Stormwater Management Officer (SMO) with the assistance of the Village's Designated Engineer will update the program organizational chart to indicate the SMO's contact information. The Village website will be updated to show the new SMO's name and phone number. The SMO will obtain an ink stamp with SMO's name and contact information for use in applying to public outreach materials to further encourage public participation and involvement.



#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

SPDES ID

0 A

5 #

4

7

6

0 %

5

1 0

0

NYR2

1

Name of MS4/Coalition	Village of Colonie
-----------------------	--------------------

## 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
- $\bigcirc$  On behalf of a coalition
  - How many MS4s contributed to this report?
- 1. Enter the number and approx. percent of outfalls mapped:
- 2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?
- **3.a.**What types of generating sites/sewersheds were targeted for inspection during this reporting period?

○ Auto Recyclers	$\bigcirc$ Landscaping (Irrigation)
○ Building Maintenance	○ Marinas
○ Churches	○ Metal Plateing Operations
$\bigcirc$ Commercial Carwashes	$\bigcirc$ Outdoor Fluid Storage
○ Commercial Laundry/Dry Cleaners	○ Parking Lot Maintenance
$\bigcirc$ Construction Vehicle Washouts	$\bigcirc$ Printing
$\odot$ Cross-Connections	○ Residential Carwashing
$\bigcirc$ Distribution Centers	○ Restaurants
$\bigcirc$ Food Processing Facilities	$\bigcirc$ Schools and Universities
$\bigcirc$ Garbage Truck Washouts	○ Septic Maintenance
$\bigcirc$ Hospitals	$\bigcirc$ Swimming Pools
$\bigcirc$ Improper RV Waste Disposal	$\bigcirc$ Vehicle Fueling
$\bigcirc$ Industrial Process Water	Vehicle Maint./Repair Shops
• Other: B u i l d i n g D e m o	O None           1         i         t         o         n         S         i         t         e         s
• Sewersheds:	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

																								SPE	ES	ID						
Name	e of ]	MS	54/C	oal	itio	n_v	illag	e of (	Color	nie														Ν	Y	R	2	0	A	0	7	6
<b>3.</b> b	.Wł	ha	t ty	pe	<b>S O</b>	f il	lici	t di	isch	arg	ges	ha	ve	bee	en f	ou	nd	du	rin	g tł	nis	rep	ort	ting	; po	erio	od?	•				
ΟB	roke	en	Line	es 1	Fro	m S	Sani	itar	y Se	ewei	•			0]	Ind	ustr	ial	Co	nne	ctio	ns											
⊖ C	<ul> <li>Broken Lines From Sanitary Sewer</li> <li>Cross Connections</li> <li>Failing Septic Systems</li> <li>Industrial Connect</li> <li>Inflow/Infiltration</li> <li>Pump Station Fail</li> </ul>														n																	
○ Fa	ailin	ng	Sep	tic	Sy	ster	ns							0]	Pur	np S	Sta	tion	Fai	ilure	е											
○ F	loor	D	rain	is (	Con	nec	ted	То	Sto	orm	Sev	ver	s	0	San	itar	y S	Sewe	er (	Over	flo	WS										
⊖ II	lega	1 I	Dun	npii	ng									0	Stra	aigh	nt F	Pipe	Sev	ver	Dis	cha	rge	S								
• 0	ther	::												0]	Noi	ne																
	Se	e	d	i	m	е	n	t		t	r	а	С	k	i	n	g		f	r	0	m		d	е	m	0		S	i	t	е

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

1

0 1

○ No

 $\bigcirc$  No

 $\bigcirc$  No

• Yes

1008

• Yes

• Yes

- 5. How many illicit discharges have been confirmed during this reporting period?
- 6. How many illicit discharges/illegal connections have been eliminated during this reporting period?
- **7.** Has the storm sewershed mapping been completed in this reporting period? If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

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

URL				_		_															_			 	 	 
р	a	S	S	W	0	r	d		р	r	0	t	е	С	t	е	d									
w	w	w	•	а	i	m	S	g	i	S	•	0	r	g	/	w	е	b	m	a	р					
URL	_																									

### This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 5 \end{vmatrix}$

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	Village of Colonie		Ν	Y	R	2	0	А	0	7	

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

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

	<u> </u>		 	 	 			 			 							
UR	I.	 																 
	1																	
F	+																	
UR	T												 					
UR	L.																	
UR	L	 		 														 
<u>ــــــــــــــــــــــــــــــــــــ</u>		 				I	!		I	I	!							

- 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 No NT

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

0 0 %

1

6

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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 0 7 6

Name of MS4/Coalition Village of Colonie

#### 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.

To continue the trend of few to no illicit discharges the Village will continue with public education by providing educational brouchures in mailings of utility bills, postings and advertisements in the Village newsletter "The Villager". Video inspection of storm sewers will continue along with the repair or replacement of system components to maintain the system in good operating condition.

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

See MCM 1 page 2 for the observations total for educational material provided. The postings and advertisements and mailings continue to be an effective means of providing public education. The Village Video inspected approximately 2000 linear feet of sewers and repaired by slip lining approximately 600 linear feet of sewers.

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

99999

(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  $\bigcirc$  No

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

By March 1, 2016 the Village DPW will video inspect at least 1000 feet of sewers and make appropriate repairs.

By March 1, 2016 the SMO with the assistance of the VDE will review outfall mapping and DPW procedures to ensure all outfalls are mapped and inspected.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Colonie

SPI	DES	ID						
Ν	Y	R	2	0	A	0	7	6

2

0

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

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?

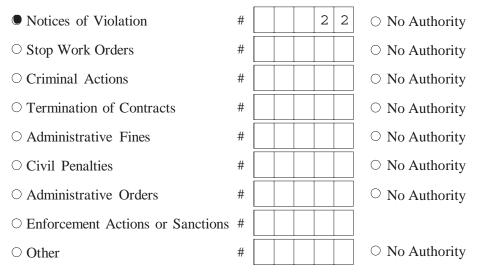
- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? • Yes O No
- 1b. Has each Town, City and/or Village contributing to this report 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
   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?
- **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 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 5

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

Name of MS4/Coalition Village of Colonie

## N Y R 2 0 A 0 7 6

1 0 0 %

0 %

0

SPDES ID

## Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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. 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?  $\odot$  NT
- 4. What percent of active construction sites were inspected more than once?  $\bigcirc$  NT
- 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 (SWPPs) 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? O Yes 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 5

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

Name of MS4/Coalition Village of Colonie

SPDES ID N Y R

YR20A076	-	- 10	12						
	Γ	Y	R	2	0	А	0	7	6

#### 6. con't.:

Submit additional pages as needed.

#### $\bigcirc$ MS4/Coalition Office

Depa	artn	nen	t												1															Т
Add	ress	3																												Τ
City																					Zip									
																										_				
Phor	ne																									J				
(				)				-																						
v ∟ orary				/ 1																										
Add		3																												
City																	·		_		Zip									
																										-				
Phor	ne			.																										
(				)				-																						
ner																														
Add	ress	5								1																				
2		Т	h	u	n	d	е	r		R	0	а	d																	
City															1						Zip					1			1	
V	•		0	f		С	0	1	0	n	i	е					N	1 Y			1	2	2	0	5	-				
Phor			_		_						_																			
( [	5	1	8	)	8	6	9	-	7	5	6	2																		
eb Pa	ige	UR	L(s	):	P	leas	se p	rov	ide	spe	cifi	ic a	ddr	ess	wh	ere	SW	PPI	Ps c	an	be a	acce	esse	d -	not	ho	me	pag	ge.	
URL																														
																													-	+
$\square$																														
URL																														

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Village of Colonie

#### 7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

All Storm Water Pollution Prevention Plans (SWPPPs) will be reviewed by the Village Designated Engineer (VDE.)

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

The VDE received two site construction activity development plans for review as forwarded by the Village Planning Board. The VDE reviews the plans for compliance with the requirements of the NYS DEC General Permit GP015002 and the Stormwater Management Design Manual 2015. The VDE ensures that project concerns or issues must are resolved satisfactorily prior to the VDE recommending MS4 acceptance of the projects.

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  $\bigcirc$  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).

By 3/1/2016 The Stormwater Management Officer (SMO) with the assistance of the Village Designated Engineer (VDE) will hold pre-construction meetings with the owner/operator/contractors for 100% of construction sites with pending construction.

By 3/1/2016 The SMO will obtain copies of the Trained Contractor certifications cards at pre-construction meetings for 100% of construction sites with pending construction.



#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Colonie

## Minimum Control Measure 5. Post-Construction Stormwater Management

SPDES ID

ΝY

R 2

Α

0

7

6

0

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
• Alternative Practices	4	4	
$\bigcirc$ Filter Systems			
Infiltration Basins	3 6	3 6	
• Open Channels	8	8	
• Ponds	4	4	
• Wetlands	2	2	
• Other	2	2	

- 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?
- Building Codes Municipal Comprehensive Plans

○ Overlay Districts ○ Open Space Preservation Program

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

Ι	n	f	i	1	t	r	а	t	i	0	n	Ρ	r	a	С	t	i	С	е	S					

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 Village of Colonie		Ν	Y	R	2	0.	A 0	7	6
As A so the MSAs contributing to this report involved in a resis	nol/watanah	ad v	d	l		ina	offor	49	
4a. Are the MS4s contributing to this report involved in a regio	mai/watersii	eu v	viue	; pi	am	mg	enor	ι.	
						$\bigcirc$	Yes		No
4b. Does the MS4 have a banking and credit system for stormw	ater manage	eme	nt p	orac	etice	es?			
						$\bigcirc$	Yes		No
4c. Do the SWMP Plans for each MS4 contributing to this repo and approval of banking and credit of alternative siting of a		-							
				_		$\overline{O}$	Yes		No
4d. How many stormwater management practices have been in reporting period?	plemented a	ıs pa	art	of t	his	syst	em in	n thi	S

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 5

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

Name of MS4/Coalition Village of Colonie

#### 6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

The Stormwater Management Officer with the assistance of the Village Designated Engineer will develop a spreadsheet to record inspection dates and results as well as to track first time satisfactory inspections for proper maintenance and operation of facilities as an indicator or compliance. Inspections will be completed before year end.

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

The SMO and VDE developed a tracking worksheet for annual facility inspections. This sheet was used to record, document and track inspection results.

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

(ex.: samples/participants/events)

7 6

0

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).

By 3/1/2016 the SMO with the assistance of the VDE will update the standard tracking worksheet by adding new facilities that have come on line and completing the annual facilities inspection tracking input. The SMO and the VDE will review the trend for first time satisfactory inspections.

#### **This report is being submitted for the reporting period ending March 9**, 2 0 1 5

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

Name of MS4/Coalition Village of Colonie



## 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-Assessment</u>							
			<b>Operation/Activity</b>	ity/Facility						
			performed within	<u>1 the past 3</u>						
<b>Operation/Activity/Facility</b>	Addressed in	n SWMP?	<u>years?</u>	<u> </u>						
Street Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No						
Bridge Maintenance	····· O Yes	• No	O Yes	• No						
Winter Road Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No						
Salt Storage	• Yes	○ No	• Yes	$\bigcirc$ No						
Solid Waste Management	• Yes	○ No	• Yes	$\bigcirc$ No						
New Municipal Construction and Land Disturbar	nce $\bigcirc$ Yes	• No	O Yes	• No						
Right of Way Maintenance	O Yes	• No	O Yes	• No						
Marine Operations	O Yes	• No	····· O Yes	No						
Hydrologic Habitat Modification	O Yes	• No	O Yes	• No						
Parks and Open Space	• Yes	○ No	• Yes	$\bigcirc$ No						
Municipal Building		○ No	• Yes	$\bigcirc$ No						
Stormwater System Maintenance		○ No	• Yes	$\bigcirc$ No						
Vehicle and Fleet Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No						
Other	○ Yes	• No	• Yes	• No						

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	Village of Colonie	Ν	Y	R	2	0	Α	0	7	6

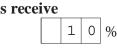
#### 2. Provide the following information about municipal operations good housekeeping programs:

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

- 3. How many stormwater management trainings have been provided to municipal employees during this reporting period? 2
- 4. What was the date of the last training?
- 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?

0 4 1 9

res			4	6
les		2	5	6
#		1	1	0
#			2	1



2 0 1 4

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Village of Colonie

#### 7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

The Village DPW will sweep and collect sediment (a Village Pollutant of Concern) from streets, parking lots, storm sewers and catch basins keeping records of the amounts of sediment collected.

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

The Village swept streets and parking lots and collected from storm systems a total of approximately 55 cubic yards of sediment.

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

(ex.: samples/participants/events)

7 6

0

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).

By 3/1/2016 the Village DPW will clean catch basins of accumulated sediment and debris, measure the quantities, log the activity and results on the Village's standard form for this activity and report the results monthly by copy of the log to SMO and subsequently to the VDE. The SMO with the assistance of the VDE will perform a Village Facilities Audit. The VDE will locate MSGP's within the MS4 area and note the location on Facilities mapping.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

## Minimum Control Measure 1. Public Education and Outreach

1 3

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:

• Construction Sites	• Pesticide and Fertilizer Application								
• General Stormwater Management Information	• Pet Waste Management								
$\bigcirc$ Household Hazardous Waste Disposal	○ Recycling								
O Illicit Discharge Detection and Elimination	Riparian Corridor Protection/Restoration								
• Infrastructure Maintenance	○ Trash Management								
• Smart Growth	• Vehicle Washing								
○ Storm Drain Marking	$\bigcirc$ Water Conservation								
O Green Infrastructure/Better Site Design/Low Impact Development	$\bigcirc$ Wetland Protection								
<pre> Other: C o a l i t i o n W e b s i t e - W h a Other </pre>	O NonetYouCanDo								
2. Specific audiences targeted during this reporting period:									
Public Employees     Contractors									
• Residential O Developers									

• Businesses • General Public

- $\bigcirc$  Restaurants  $\bigcirc$  Industries
- Other: O Agricultural

								-												
S	t	u	d	е	n	t	S													
Ot	her																			

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	PI	DES	ID				
N	ſ	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:

<ul> <li>Construction Site Operators Trained</li> </ul>	# Trained 3 5
○ Direct Mailings	# Mailings
• Kiosks or Other Displays	# Locations 8
• List-Serves	# In List 4 5 8
○ Mailing List	# In List
$\bigcirc$ Newspaper Ads or Articles	# Days Run
Public Events/Presentations	# Attendees 1 5 3
School Program	# Attendees 1 6 6
○ TV Spot/Program	# Days Run
• Printed Materials:	Total # Distributed642
Locations (e.g. libraries, town offices, kiosks)	

А	1	L	a		0	11	L		T.	a	<u>т</u>	T							
С	i	t	У	А	1	b	a	n	У	S	С	h	0	0	1	Ρ	r	0	g
Ν	0	r	m	a	n	S	k	i	1	1	С	r	е	е	k				
G	I		С	0	d	е	R	е	v	i	е	w	Ρ	r	0	g	r	a	m

• Other:

H o s t 4 C W P W e b c a s t s

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

UKI	-		_		_																									
W	w	w	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	а	n	У	С	0	u	n	t	У	•	0	r	g	

URL

UN	-															

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

SPL	JES	ID				
Ν	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.

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.

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

BMP 1-1 TAAW: 1) Map Set maps-updated 2010 urbanized area; not all formatted for use with TAAW, but will be, still important. ; 2) Collected Measurable Goals sheets; info somewhat useful for budgeting purposes. BMP 1-3 Website: To/From links corrected for all members; disconnected links common; important to monitor links frequently. GoogleAnalytics for website (2828 sessions/2015; 1637 visits (sessions?)-a 1191 increase. BMP 1-7 List Serve-no updates of officials.

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

		4	
_			

(ex.: samples/participants/events)

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

• Yes  $\bigcirc$  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).

Coalition has an updated Joint SWMP Plan titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some Coalition goals for MCM1 presented here. BMP 1-1 TAAW: add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, 1 new doc (plant care).

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

 O

#### 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 3

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

○ Cleanup Events		# Events					
• Comments on SWMP Received		# Comments					0
• Community Hotlines	Phone #	<b>(</b> 518 <b>)</b> 447	-	5	6	4	5
Phone # ( )	Phone #		- [				
Phone # ( )	Phone #		-				
Phone # ( )	Phone #		-				
Phone # ( ) – –	Phone #		-				
Phone # ( )	Phone #		- [				
$\bigcirc$ Community Meetings		# Attendees					
$\bigcirc$ Plantings		Sq. Ft.					
○ Storm Drain Markings		#Drains					
$\bigcirc$ Stakeholder Meetings		# Attendees					
• Volunteer Monitoring		# Events					3
O Other:							

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

Program (SWMP) Plan provided?	۲	Ye	es	0	No
List-Serve     # In List			4	5	8
O 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 5

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

SPL	DES	ID				
Ν	Y	R	2	0		

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

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

URI	_																														
W	W	W	•	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		
JRI				L		L			I		I		L				L	I				I	<u> </u>							L	L
																															F
																															F
ID I	<u> </u>			ļ		ļ			<u> </u>		<u> </u>		ļ				ļ	<u> </u>				<u> </u>									L
JRI																															
																															F
																															L
URI																															Γ
																														<u> </u>	
URI	Í																													<u> </u>	Г
URI	Í																														Γ
URI																															Γ
																														L	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

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

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

	MS4/Coalition Office										Annual Report							SWMP Plan					• Comments								
	Dep											~			-							_	-					~			
	S	t	0	r	m	W	a	t	е	r		С	0	а	1	i	t	i	0	n	-	A	1	b	а	n	У	С	n	t	У
	Add										~								-					-							
	1 City	1	2		S	t	a	t	е		S	t	r	е	е	t	1		R	0	0	m		7	2	0					
	A	1	b	a	n	У												]	N	Y		Zip 1	2	2	0	7	_				
	Pho					1												Ľ						_	•		ļ				
	(	5	1	8	)	4	4	7	-	5	6	4	5																		
○ Lib	rary	7														C	A	nnu	al I	Rep	ort	C	S	WN	1P 1	Plar	ı	$\circ$ (	Con	nme	ents
	Ađo	lres	S																	r			~				_				
	City	/																Г				Zip					1				
																											-				
	Pho	ne			1	·			1 1	L.				1																	
	(				)				-																						
○ Oth	~**															C		0011	1 I	Don	ort	C	1 61	an.	/D 1	Dlar	•	$\cap$	~ on	nma	nta
0 Otil	○ Other O Annual Report O SWMP Plan O Comments																														
	City	/																				Zip					1				
																											-				
	Pho	ne																L									I				
	(				)				-																						
• Wel	D D	200	IIP	τ.														nnıı	a1 1	Rep	ort		S	WN	1P 1	Plar	ı		Con	nme	ents
		_		L.	G	+		r	m	5.7	2	t		r	2	1	b	a	n	_							-				
	W	W	W	•	S	t	0	r	m	W	a	L	е	r	a		d	a	11	У	С	0	u	n	t	У	•	0	r	g	
		ease	e pr	ovi	de	spe	cif	ic a	ddr	ess	of	pag	ge v	whe	ere	rep	ort	car	ı be	e ac	ces	sed	l - r	ot	hor	ne	pag				
• eMa	ail																											• (	Con	nme	ents
	Ŋ	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			

This report is being submitted for the reporting period ending March 9, 2 0	1 5	
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		
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. $05/01/2$	2 0 1	1 5
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	5.b	
5.a. Was an Annual Report public meeting held in this reporting period?       O Y         If Yes, what was the date of the meeting?       If Yes, what was the date of the meeting?	les (	⊃ No
If No, is one planned?	les (	⊃ No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this reporting period?	Yes	• No
If No, is one planned for each?	(es (	• No
<b>6.</b> Were comments received during this reporting period? O Y If Yes, attach comments, responses and changes made to	(es	⊃ No

SWMP in response to comments to this report.

#### This report is being submitted for the reporting period ending Marc

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

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.

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

BMP 2-3 SWMP: SWMPv2 (2012 to 2015) updated. Completed tasks/goals noted, issues explained, title of document, Joint SWMP BMP Data Report. New SWMP needs to be developed for 2015 to 2017 and matched to NYSDEC interim MS4 Permit. Coalition Sub-Committee has met, some decisions: BMPs similar to previous SWMP, some modifications; individual goals for individual members; added MCM 8 Training. BMP 2-6 Clean Up Activities: "Thank You" dropped, no time.

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

(ex.: samples/participants/events)

1

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  $\bigcirc$  No

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

As of May, 2015, Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Document includes new/modified BMPs applicable to all Coalition members; goals are specific to Coalition and individual MS4 members. Some goals for MCM2 presented here. BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

SPI	DES	ID				
Ν	Y	R	2	0		

ch 9,	2	0	1	5	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID Υ R 2 0

#

%

Ν

Stormwater Coalition of Albany County Name of MS4/Coalition

### Minimum Control Measure 3. Illicit Discharge Detection and Elimination

1 3

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

- On behalf of an individual MS4
- On behalf of a coalition
  - How many MS4s contributed to this report?
- 1. Enter the number and approx. percent of outfalls mapped:
- 2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?
- 3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

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

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 C	County SPDES ID											
3.b.What types of illicit discharges have	been found during this reporting period?											
$\bigcirc$ Broken Lines From Sanitary Sewer	$\bigcirc$ Industrial Connections											
○ Cross Connections	$\bigcirc$ Inflow/Infiltration											
○ Failing Septic Systems	○ Pump Station Failure											
$\bigcirc$ Floor Drains Connected To Storm Sewers	$\bigcirc$ Sanitary Sewer Overflows											
○ Illegal Dumping	○ Straight Pipe Sewer Discharges											
Other:	○ None											

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

No

O No

O No

÷

○ Yes

• Yes

• Yes

- **7. Has the storm sewershed mapping been completed in this reporting period?** If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

reporting period?

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

URI																										 	
Ρ	А	S	S	W	0	R	D		Ρ	R	0	Т	Е	С	Т	Е	D										
W	W	W	•	a	i	m	S	g	i	s	•	0	r	g	/	W	е	b	m	а	р	/					
*	*	R	е	ន	t	r	i	С	t	е	d		А	С	С	е	S	s	*	*							
URI																											

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

R 2

0

NY

Name of MS4/Coalition Stormwater Coalition of Albany County

#### 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.

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

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

BMP 3-1 Map Outfalls: no sample form provided to collect outfall location information for construction projects; instead individual MS4s may map post-construction outfalls, no form needed. BMP 3-2 AIMS: map layers updated, process to evaluate AIMS started; now a priority given server issues. BMP 3-4 Storm Sys/Sewershed Mapping: few requests from past year. BMP 3-5 ORI: kits re-stocked as needed; Coalition staff assist, as needed & funded.

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

(ex.: samples/participants/events)

4

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some goals for MCM3 presented here. BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM4 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM5 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	SPDES ID											
Ν	Y	R	2	0								

### Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?



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

			Self-Assessment						
		<b>Opera</b>	tion/Activi	ity/Facility					
		<u>perfor</u>	<u>med withir</u>	<u>n the past 3</u>					
<b>Operation/Activity/Facility</b>	Addressed in	<u>n SWMP?</u>	<u>vears?</u>	<u> </u>					
Street Maintenance	O Yes	○ No	O Yes	○ No					
Bridge Maintenance	• Yes	○ No	O Yes	$\bigcirc$ No					
Winter Road Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No					
Salt Storage	O Yes	○ No	O Yes	$\bigcirc$ No					
Solid Waste Management	O Yes	○ No	O Yes	$\bigcirc$ No					
New Municipal Construction and Land Disturba	ance $\bigcirc$ Yes	○ No	○ Yes	$\bigcirc$ No					
Right of Way Maintenance	O Yes	○ No	○ Yes	$\bigcirc$ No					
Marine Operations	O Yes	○ No	$\odot$ Yes	$\bigcirc$ No					
Hydrologic Habitat Modification	O Yes	○ No	O Yes	$\bigcirc$ No					
Parks and Open Space	····· O Yes	○ No	$\odot$ Yes	$\bigcirc$ No					
Municipal Building	o	○ No	⊖ Yes	$\bigcirc$ No					
Stormwater System Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No					
Vehicle and Fleet Maintenance		○ No	○ Yes	$\bigcirc$ No					
Other	○ Yes	○ No	⊖ Yes	$\bigcirc$ No					

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

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

SPDES ID

Y R 2

0

Ν

1 0

9

2 0 1 4

1 3 0

%

$\bigcirc$ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
$\bigcirc$ Streets Swept (Number of miles X Number of times swept)	# Miles	
$\bigcirc$ Catch Basins Inspected and Cleaned Where Necessary	#	
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	# Acres	
3. How many stormwater management trainings have been provided to	o municipa	l employees
during this reporting period?		1 1

- 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 5

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

SPL	DES	ID			_	
Ν	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.

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

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

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: Coalition provided Inventory and Assessment support to 3 Coalition members, as requested and funded. BMP 6-9 Staff Training: one elected official received Clean Water Act Basics training, not the road show as planned, however training materials were developed for future programs.

#### 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).

The Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No specific Coalition goals for MCM 6; instead Coalition staff as reflected in 2015 Coalition budget and requested by individual members, directly assist MS4s in implementing their individual MCM 6 goals. Training related Coalition goals (organize, host, fund) are described in SWMPv3 MCM 8 Train'g-Staff, Plan'g/Zon'g Bds, Other Muni Officials.

## MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0	15
Name of MS4 Village of Green Island	SPDES ID       N     Y     R     2     0     A     3     7     7

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)

#### • $\Lambda$ Joint Report

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

If Joint Report, enter coalition name:

S	t		r	m	w	a	t	r	С	0	a	1	i	t	i	0	n	0	f	-	А	1	b	a	n	Y
С	0	$\mathbf{u}$	n	t	У																					
																								i		

5690581587

## MS4 Municipal Compliance Certification(MCC) Form

0

1 5

N

SPDES ID

YR

2 0

A 3 7

MCC form for period ending March 9, 2

Name of MS4 Village of Green Island

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

Firs E	st Na   1	ime 1	e	n					ļ	]	-			Γ	]	MI M	7	Las M	t Na C	ne N	u	ı	t∣		_	R		-		1	1	
Titl	e –	-	-					L		]					l	1.1	1		<u> </u>	IN	u	<u> </u>	-	У	-		У	a	n			1
М	а	У	0	r		·									<u> </u>		[							Ï								
Add	ires	5																														
2	0		С	L	I	N	Т	0	N		S	Т	R	E	Ε	Т																
City	<b>/</b>																			St	ate		<u>Zip</u>									
G	R	Е	E	Ν		I	S	L	А	N	D									N	1		1	2	l	8	3			ĺ		
cMa	ail																															
m	а	У	0	r	Q	$\mathbf{v}$	i	1	1	a	g	e	0	f	g	r	e	е	n	i	ន	ı	a	n	d		c	0	m			
Pho	ne																•	Cou	ntv					'								
(	5	1	8	)	2	7	3	-	2	2	0	1						A	1	. ]	a	n	У			-						

0 A 3 7 7

SPDES ID

YR

2

N

5690581587

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

MCC form for period ending March 9, 2 0 1 5

Name of MS4 Village of Green Island

#### 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

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

First Name	MI Last Name
SEAN	E WARD
Title	
EXECUTIVEASSIST	A N T T O T H E M A Y O R
Address	
20 CLINTON STREE	
City	State Zip
G R E E N I S L A N D	NY 12183-
eMail	
seanw@villageofg	reenisland.com
Phone	County
	A 1 b a n y

## MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0	1	5							
·····	SPL								
Name of MS4 Village of Green Island	Ν	Y	R	2	0	A	3	7	7

#### 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.

Pa	rtner	/Co	alit	ion l	Nam	e	,																									
S	t	0	r	m	w	a	t	e	r		C	0	а	1	i.	t	li	0	n		0	f		A	1	b	a	n	У			
Pa	rtner	/Cu	alit	ion	Nan	ie(a	on'	t.)																SPI	DES	Pai	' tne	' — r Ш	- Ií	àpp	lica	ıble
Ċ	0	u	n	t	У																			Ν	Y	R	2	0				
Ad	dres.	s																			. 1	1	1	I			J					Li
1	1	2		$\mathbf{s}$	t	a	t	e		S	t	r	e	e	t	Ĩ																
Cit	у																	•		St	tate		Zip		, .						1	
G	r	e	e	n		ļI	s	1	a	n	đ										1 3	Z	1	2	1	8	з	-				
<u>eM</u>	ail																					,						,				
n	h	е	i.	n	z	е	n	Q	a	1	b	a	n	У	С	0	u	n	t	У	•	С	0	m								
Ph	one												_						1 -		n										,	'
(	5	1	8	)	4	4	7	-	5	6	4	5	ļ						wî	gan th G	у В Р-С	-08	ng / -002	Agro 2 Pa	rt IV	ent i /.G.	n ac ?		dane Ye		0	No
W	hat	tasl	ks/i	resp	on	sib	iliti	es	are	sha	irec	łw	ith	this	s pa	rtn	cr (	(c.g	g. M	[M]	1 S	cho	<b>o</b> 1 ]	Pro	gra	ms	or	Mu	ltip	ole '	Tas	ks)?
01	ММ	) [	E	d	u	С	а	t	ĺi	0	n		М	a	t	e	r	ĺi	a	1		&		Р	r	0	g	r	a	m	s	]
O J	ΜМ	2 [	S	W	М	Ρ	1	W	Α	V	Ē	/	W	е	b	8	i	ţ	e	-	P	u	b	1	i	С		ï	n	р	u	t
01	мм	3 [	A	I	М	S	-	0	R	I			A	8	8	t	-	I	D	D	Ē		Р	r	0	с	е	đ	u	r	e	s
O I	MM	4	Р	r	0	С	e	đ	u	r	е	s		8	u	р	р	0	r	t						]						-
O I	MM	5	P	r	0	С	e	d	u	r	е	ន		ន	u	р	р	0	r	t												]
o I	мм	6 [	Т	r	a	<b>i</b> .	n	•	a	-	F	а	С	i	],	i	t	У		A	u	d	i	t		s	u	р	q	0	r	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 Certification(MCC) Form

MCC form for period ending March 9	9,2015
Name of MS4 Village of Green Island	$\begin{bmatrix} SPDES ID \\ N & Y & R & 2 & 0 & A & 3 & 7 & 7 \end{bmatrix}$

## 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     E   1     e   n	MI La M M	ast Name	ty - Ry	a n	
Title       (Clearly print title of individual signing report)         M       a $y$ o $r$					
Signature					
, 			ate	1	

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

0 3 7 7

SPDES ID

N|Y|R|2

1100364151

#### **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,	2	0	1	5	
If submitting this form as part of a joint report on behalf of a coalition leave SPDI	ES I	Db	lan	<b>k</b> .	

Name of MS4/Coalition Village of Green Island

## 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
- If Yes, choose one of the following
- Report(s) attached to the annual report
- $\bigcirc$  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.

URI			 							_													
							1																
																		<u> </u>		-	<u> </u>		
									 						<u>–</u>	i						 	
URL	<u> </u>		 						 														
												.											
											 					I 							
URL	í i				 			 	 r.	1	,						,						
										· · · · ·												· ·	
URI	ć .																		•			 . 1	,
																				<b>–</b> "			
																						(	
					 			 <u></u>					·.	[						<u></u>			
		<u> </u>			 			 <u></u>															·

Yes 🛛 🖲 No

#### MS4 Annual Report Form

This report is being submitted for	the reporting period ending March 9,	2	0	1	5

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 Village of Green Island	NYR20A37	7

## 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 thi

is	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
- General Stormwater Management Information
- O Household Hazardous Waste Disposal

○ Illicit Discharge Detection and Elimination

- Infrastructure Maintenance
- O Smart Growth
- Storm Drain Marking
- Green Infrastructure/Better Site Design/Low Impact Development
- O Vehicle Washing  $\odot$  Water Conservation

Pet Waste Management

Recycling

Pesticide and Fertilizer Application

O Riparian Corridor Protection/Restoration

 $\odot$  Wetland Protection

Trash Management

$\bigcirc$ Other:	$\bigcirc$ None
Other	

2. Specific audiences targeted during this reporting period:

Public Employees	Contractors
------------------	-------------

- Residential  $\bigcirc$  Developers
- Businesses • General Public
- $\bigcirc$  Restaurants  $\bigcirc$  Industries



t. S Other

ər:	○ Agricultural			
u d	e n t s			

MCM 1 Page 1 of 4

SPDES ID

NYR

2 0 A

7 7

3

7870299956

#### **MS4 Annual Report Form**

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Green Island

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

<ul> <li>○ Construction Site Operators Trained</li> <li>B Direct Mailings</li> <li>W Mailings</li> <li>W</li></ul>					
<ul> <li>Kiosks or Other Displays</li> <li>List-Serves</li> <li>Mailing List</li> <li>Ma</li></ul>	○ Construction Site Operators Trained	# Trained			
<ul> <li>Kiosks or Other Displays</li> <li>List-Serves</li> <li>Mailing List</li> <li>Mailing List</li> <li>Miling List</li> <li>Mailing List</li> <li>Mailing List</li> <li>In List</li> <li>I 4 0 0</li> <li>Newspaper Ads or Articles</li> <li>Public Events/Presentations</li> <li># Attendees</li> <li>Public Events/Program</li> <li># Attendees</li> <li>School Program</li> <li># Attendees</li> <li>I 4 0 0</li> <li>Public Events/Program</li> <li># Attendees</li> <li>I 4 0 0</li> <li>Printed Materials:</li> <li>Total # Distributed</li> <li>Incentions (c.g. Ilbraries, town offices, kiosks)</li> <li>Incentions (c.g. Ilbraries, town offices, kiosks)</li> <li>Other:</li> <li>Web Page:</li> <li>Provide specific web addresses - not home page. Continue on next page if additional space is needed.</li> <li>Ww w v i 1 1 a g e o f g r e n i s 1 a n d .</li> <li>URL</li> <li>URL</li> </ul>	Direct Mailings	#Mailings		<u>,                                    </u>	8
C List-Serves # In List   • Mailing List # In List   • Mailing List # In List   1 4 0 0   O Newspaper Ads or Articles # Days Run   • Public Events/Presentations # Attendees   C School Program # Attendees   • TV Spot/Program # Days Run   • TV Spot/Program # Days Run   • TV Spot/Program # Days Run   • Printed Materials: • Total # Distributed • Other: • Other: • Web Page: • Provide specific web addresses - not home page. Continue on next page if additional space is needed. • Web Page: • Provide specific web addresses - not home page. Continue on next page if additional space is needed. • Web Page: • Provide specific web addresses - not home page. Continue on next page if additional space is needed. • Web Page: • Provide specific web addresses - not home page. Continue on next page if additional space is needed. • Web Page: • URL • URL • URL • URL	Kiosks or Other Displays	# Locations		i i	
<ul> <li>Newspaper Ads or Articles</li> <li>Public Events/Prosentations</li> <li># Attendees</li> <li>School Program</li> <li># Attendees</li> <li>TV Spot/Program</li> <li># Days Run</li> <li>Printed Materials:</li> <li>Total # Distributed</li> <li>Total # Distributed</li> <li>Cother:</li> <li>Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.</li> <li>Ww w. vi 1 1 a g e o f g r e e n i s 1 a n d .</li> <li>URL</li> <li>URL</li> <li>URL</li> </ul>	○ List-Serves	# In List		 	
<ul> <li>Newspaper Ads or Articles</li> <li>Public Events/Presentations</li> <li># Attendees</li> <li>School Program</li> <li># Attendees</li> <li>TV Spot/Program</li> <li># Days Run</li> <li>Printed Materials:</li> <li>Total # Distributed</li> <li>Incetions (c.g. libraries, town offices, klosks)</li> <li>Incetions (c.g. libraries, town offices, klosks)</li> <li>Other:</li> <li>Other:</li> <li>Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.</li> <li>Www.viiii 1 1 a g e o f g r e e n i s 1 a n d .</li> <li>URL</li> <li>URL</li> </ul>	Mailing List	# In List		4 C	
<ul> <li>School Program</li> <li>TV Spot/Program</li> <li>Printed Materials:</li> <li>Incations (c.g. libraries, town offices, kiosks)</li> <li>Incations (c.g. libraries, town offices, kiosks)</li> <li>Incations (c.g. libraries, town offices, kiosks)</li> <li>Other:</li> <li>Other:</li> <li>Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.</li> <li>URL</li> <li>URL</li> <li>URL</li> <li>URL</li> </ul>	$\bigcirc$ Newspaper Ads or Articles	# Days Run			
<ul> <li>TV Spot/Program # Days Run</li> <li>Printed Materials: Total # Distributed</li> <li>Incations (c.g. libraries, town offices, kiosks)</li> <li>Incations (c.g. libraries, town offices, kiosks)</li> <li>Other:</li> <li>Other:</li> <li>Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.</li> <li>WRL</li> <li>WRL</li> <li>WRL</li> <li>WRL</li> <li>WRL</li> </ul>	○ Public Events/Presentations	# Attendees			
<ul> <li>TV Spot/Program # Days Run</li> <li>Printed Materials: Total # Distributed</li> <li>Incetions (c.g. libraries, town offices, kiosks)</li> <li>Incetions (c.g. libraries, town offices</li></ul>	⊖ School Program				+
<ul> <li>Printed Materials: Incettions (c.g. libraries, town offices, kiosks)</li> <li>Incettions (c.g. libraries, town offices, kiosks)</li> <li>Incettions</li></ul>	○ TV Spot/Program				
$() \text{ Other:}$ $() \text{ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed. () \text{ Web WW } \text{ W } \text{ i l l a g e o f g r e e n i s l a n d}. () \text{ URL } \text{ WRL }  W$	• Printed Materials:				+
$() \text{ Other:}$ $() \text{ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed. () \text{ Web WW} \cdot v \text{ i } 1 1 \text{ a } g \text{ e } 0 \text{ f } g \text{ r } e \text{ e } n \text{ i } s 1 \text{ a } n \text{ d } . () \text{ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed. () \text{ WW} W \cdot v \text{ i } 1 1 \text{ a } g \text{ e } 0 \text{ f } g \text{ r } e \text{ e } n \text{ i } s 1 \text{ a } n \text{ d } . () \text{ WW} W \cdot v \text{ i } 1 1 \text{ a } g \text{ e } / W \text{ a } t \text{ e } r \text{ - } s \text{ e } W \text{ e } r \text{ / } . () \text{ URL} () \text{ WRL}$	Locations (c.g. libraries, town offices, kiosks)	router // Jonsti Touteu			<u> </u>
$\bigcirc \text{Web Page:}  \text{Provide specific web addresses - not home page. Continue on next page if additional space is needed.} \\ \hline \text{URL}  \hline \text{W W W } \cdot \text{V i 1 1 a g e o f g r e e n i s 1 a n d} \\ \hline \text{C o m } / \text{V i 1 1 a g e } / \text{W a t e r - s e w e r } / \\ \hline \text{URL}  \hline \ \text{URL}  \hline \text{URL}  \hline \ \ \text{URL}  \hline \ \ \text{URL}  \hline \ \ \ \ \ \text{URL}  \hline \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$					
$\bigcirc \text{Web Page:}  \text{Provide specific web addresses - not home page. Continue on next page if additional space is needed.} \\ \hline \text{URL}  \hline \text{W W W } \cdot \text{V i 1 1 a g e o f g r e e n i s 1 a n d} \\ \hline \text{C o m } / \text{V i 1 1 a g e } / \text{W a t e r - s e w e r } / \\ \hline \text{URL}  \hline \ \text{URL}  \hline \text{URL}  \hline \ \ \text{URL}  \hline \ \ \text{URL}  \hline \ \ \ \ \ \text{URL}  \hline \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$					
$\bigcirc \text{Web Page:}  \text{Provide specific web addresses - not home page. Continue on next page if additional space is needed.} \\ \hline \text{URL}  \hline \text{W W W } \cdot \text{V i 1 1 a g e o f g r e e n i s 1 a n d} \\ \hline \text{C o m } / \text{V i 1 1 a g e } / \text{W a t e r - s e w e r } / \\ \hline \text{URL}  \hline \ \text{URL}  \hline \text{URL}  \hline \ \ \text{URL}  \hline \ \ \text{URL}  \hline \ \ \ \ \ \text{URL}  \hline \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$					
$\bigcirc \text{Web Page:}  \text{Provide specific web addresses - not home page. Continue on next page if additional space is needed.} \\ \hline \text{URL}  \hline \text{W W W } \cdot \text{V i 1 1 a g e o f g r e e n i s 1 a n d} \\ \hline \text{C o m } / \text{V i 1 1 a g e } / \text{W a t e r - s e w e r } / \\ \hline \text{URL}  \hline \ \text{URL}  \hline \text{URL}  \hline \ \ \text{URL}  \hline \ \ \text{URL}  \hline \ \ \ \ \ \text{URL}  \hline \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$					
$\bigcirc \text{Web Page:}  \text{Provide specific web addresses - not home page. Continue on next page if additional space is needed.} \\ \hline \text{URL}  \hline \text{W W W } \cdot \text{V i 1 1 a g e o f g r e e n i s 1 a n d} \\ \hline \text{C o m } / \text{V i 1 1 a g e } / \text{W a t e r - s e w e r } / \\ \hline \text{URL}  \hline \ \text{URL}  \hline \text{URL}  \hline \ \ \text{URL}  \hline \ \ \text{URL}  \hline \ \ \ \ \ \text{URL}  \hline \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$					
$\bigcirc \text{Web Page:}  \text{Provide specific web addresses - not home page. Continue on next page if additional space is needed.} \\ \hline \text{URL}  \hline \text{W W W } \cdot \text{V i 1 1 a g e o f g r e e n i s 1 a n d} \\ \hline \text{C o m } / \text{V i 1 1 a g e } / \text{W a t e r - s e w e r } / \\ \hline \text{URL}  \hline \ \text{URL}  \hline \text{URL}  \hline \ \ \text{URL}  \hline \ \ \text{URL}  \hline \ \ \ \ \ \text{URL}  \hline \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$					
$\bigcirc \text{Web Page:}  \text{Provide specific web addresses - not home page. Continue on next page if additional space is needed.} \\ \hline \text{URL}  \hline \text{W W W } \cdot \text{V i 1 1 a g e o f g r e e n i s 1 a n d} \\ \hline \text{C o m } / \text{V i 1 1 a g e } / \text{W a t e r - s e w e r } / \\ \hline \text{URL}  \hline \ \text{URL}  \hline \text{URL}  \hline \ \ \text{URL}  \hline \ \ \text{URL}  \hline \ \ \ \ \ \text{URL}  \hline \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	() Other:				
nceded. URL $www.villageofgreenisland.$ $www.villageofgreenisland.$ $village/water-sewer/$ $uRL$ $wkwwww.villageofgreenisland.$					
nceded. URL $www.villageofgreenisland.$ $www.villageofgreenisland.$ $village/water-sewer/$ $uRL$					
nceded. URL $www.villageofgreenisland.$ $www.villageofgreenisland.$ $village/water-sewer/$ $uRL$	• Web Page: Provide specific web addresses - not home page. Continu	a an next need if ad-	المستر الم		
URL W W W . V i l l a g e o f g r e e n i s l a n d . C o m / V i l l a g e / W a t e r - s e w e r / . URL URL	nceded.	e on next page n aut	monai	space	5 18
C O m / v i l l a g e / w a t e r - s e w e r /					
	www.villlageofgreenisl	and.			
	com/village/water-sew	e r /			
					<u>+</u>
		—· · · · · · · · · · · · · · · · · · ·		J	<u> </u>
		and	m		

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       SPDFS ID         N Y R 2 0       N Y R 2 0         3. Web Page con't.:       Provide specific web addresses - not home page.         URL       URL         URL       URL         URL       URL         URL       URL		MS	<u> 4 Annual Rer</u>	ort Form	
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.          Name of MS4/Coalition       SPDES ID         N Y R 2 0       N Y R 2 0         3. Web Page con't.:       Provide specific web addresses - not home page.         URL       URL         URL       URL	This report is	s being submitted	for the reportin	g period ending	March 9.
SPDFS ID         N Y R 2 0         3. Web Page con't.:         Provide specific web addresses - not home page.         URL         URL         URL         URL         URL	If submitting	this form as part of a	a joint report on be	half of a coalition	leave SPDES II) blook
Name of MS4/Coalition NYR20	ſ				
	Name of MS4/Coalition				
		Provide specific	web addresses -	not home page.	
				I <u></u> I <u></u>	
			═╎ <u></u> ┽╶┽╴┼┈╎ _╵ ╴	╪═╬╴╎╶╟═┿═╸	
	עזג <u>ן</u> 	<u> </u>	··· / ·· <del>·····</del> · /	······	
	URI.	L.	··· / /		
	│				
					<u> </u>
			[		
URL	URL	<u> </u>			
				<u></u>   <u> </u>	
		<u>╺</u> ┥╍┙╎╴╎╴╷┥╴			
		ļ <del>T. T. T. T.</del> I	I	· <del>····</del> r· ·	l

6932504403

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,	2	0 1	. !	5
-------------------------------------------------------------------------	---	-----	-----	---

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

 Name of MS4/Coalition
 Village of Green Island
 SPDES ID

 N
 Y
 R
 2
 0
 A
 3
 7
 7

#### 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 MG1 The V/Green Is Stormwater Program Coordinator will review with staff their Target Audience Analysis Worksheet and update as needed, potentially focusing on different pollutants of concern. 1-3 MG1 The V/Green Is Stormwater Program Coordinator will post stormwater information on the Village website, as needed will link back to the Coalition website. Typical information: SPDES General Permit info; Annual Report; Newsletter content. 1-5 MG1

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

1-1 TAAW's were updated 1-3 Village does not track individual hits to website although general discussion in the Village shows that the message is getting out. 1-5 Park programs usually draw on many Village children.

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

(ex.: samples/participants/ovents) D. Has your MS4 made progress toward this Measurable Goal during this reporting period?

- 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).

See A. above

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 3 7 7

Name of MS4/Coalition Village of Green Island

#### 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.

Pg2. (cont'd)

1-5 MG1 V/Green Is Parks and Rec Department will coordinate and implement a summer, Project Wet water quality education event. Attendees are kids and employees participating in the Parks and Rec Summer Program.

**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?

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this Measurable Goal during this reporting perio	ess toward this Measurable Go	l during this reporting period?
---------------------------------------------------------------------------------------	-------------------------------	---------------------------------

○ Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	$\bigcirc$ Yes	$\bigcirc$ No
-------------------------------------------------------------------------	----------------	---------------

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

See A. above.

MS4 Ann	ual Report	<u>Form</u>					
This report is being submitted for the	reporting pe	riod endin	g March 9,	2 0	1	5	
If submitting this form as part of a joint re	port on behalf o	of a coalitio		SID	blan	к.	
Name of MS4/Coalition Village of Green Island	 		SPDES ID NYR2	2 0	A	3 7	7
<u>Minimum Control Measure 2</u>	. Public In	volveme	nt/Particip	atic	)n		
The information in this section is being reported (ch			11				
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition How many MS4s contributed to this</li> </ul>	s report?						
1. What opportunities were provided for pul development, evaluation and improvement (SWMP) Plan during this reporting period	t of the Storn	water Ma	nagement P	ı, 'rogı	*am		
• Cleanup Events			# Events	Γ [			3
○ Comments on SWMP Received			# Comments				1
• Community Hotlines	Phone #	(		1_1		T	<u> </u>
Phone # ( )     -	Phone #	$\dot{\boldsymbol{i}}$		i _ í	<u>,</u>		
Phone # ( )	Phone #	(		  _[	<u> </u>		_   
Phone # ( )	Phone #	$\dot{\boldsymbol{i}}$		., , , ] [			ļ
Phone # ( )   -   -	Phone #	$\dot{\boldsymbol{c}}$		  _		$\frac{1}{1}$	
Phone # ( )	Phone #	$\dot{i}$		]_[			<u> </u>
		<b>\</b>				11	0
Community Meetings		•	# Attendees				
Community Meetings     Plantings			# Attendees Sq. Ft.	<u> </u>			
			Sq. Ft.	[ []	 		4
• Plantings					 		4
<ul> <li>Plantings</li> <li>Storm Drain Markings</li> </ul>			Sq. Ft. # Drains				4
<ul> <li>Plantings</li> <li>Storm Drain Markings</li> <li>Stakeholder Meetings</li> </ul>			Sq. Ft. # Drains # Attendees				4
<ul> <li>Plantings</li> <li>Storm Drain Markings</li> <li>Stakeholder Meetings</li> <li>Volunteer Monitoring</li> </ul>		nd Stormw	Sq. Ft. # Drains # Attendees # Events		ent Yes		4
<ul> <li>Plantings</li> <li>Storm Drain Markings</li> <li>Stakeholder Meetings</li> <li>Volunteer Monitoring</li> <li>Other:</li></ul>		nd Stormw	Sq. Ft. # Drains # Attendees # Events				
<ul> <li>Plantings</li> <li>Storm Drain Markings</li> <li>Stakeholder Meetings</li> <li>Volunteer Monitoring</li> <li>Other:</li></ul>		nd Stormw	Sq. Ft. # Drains # Attendees # Events				

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

MCM 2 Page 1 of 6

Γ

0 A

3 7

7

SPDES ID

N Y R 2

1693183102

#### **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,	2	0	1	5

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

Name of MS4/Coalition Village of Green Island

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

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

URI	:				_			_				_																,			
w	w	W	•	$\mathbf{v}$	i	1	1	a	g	e	0	f	g	r	е	e	n	i	s	1	а	n	d	.							
¢	0	m	1	v	i	1	1	a	1	e	1	w	a	t	е	r	-	s	e	w	e	r	1	-					<u>-</u>		
										<u> </u>				]							<u> </u>								<u></u>		
			`																	Ï											
																											<u> </u>	-			
	Ī																	<u> </u>									<u> </u>				
URI	,			·					I .				l. <b>.</b>				I	I				1					J	1			
																		Ï													
																														1	
																				!	·									-+	
URL				I.	I	I				[[	[				1			. 1				I							ı		
								[							ľ					[				.							
										ĺ								_													=
	 						<u>                                     </u>		i						-				<u>.                                    </u>	[										<u>_</u> _	
	1	I I.							I	t			I	l	1	I									1					1	J
				, I			Ţ				I				····-				ĺ	Τ			.	T							
		[											<u> </u>		· .			- †	+				ľ				[			<del></del>	
			`	<u>†</u>												<u> </u>									- <u></u>						
URL	Ι.					i	1							L				I.				ļ	_			.	Į.			1	I
		_	ĺ						1										T				-			- ·	T				I
		ĺ	ï		Ţ		ĺ	·				- 1			_				·		- +					Ť		1			
	$\neg$		<u></u>	Ì			<b></b>	. /		·			<u>.</u>				<u>.                                    </u>		+	<u>_</u>		÷+	+		.				_ _	-	=
URL/	ļ			<b>i</b>					L		I	1				I							.	!			1				1
															$\top$			[			[	[			- 				-		
		<u> </u>					_										1			.					<u> .</u>		L		$=\downarrow$		
		[			I-		1				1			-		╡			[								-+	<u>  </u>			
	1			l.	I	_L		l.	1	. I_			-	Ι.				I	1	[	ļ				1	_			. !		



FAX NO. :5182732235

Apr. 28 2015 05:07PM P16

### **MS4 Annual Report Form**

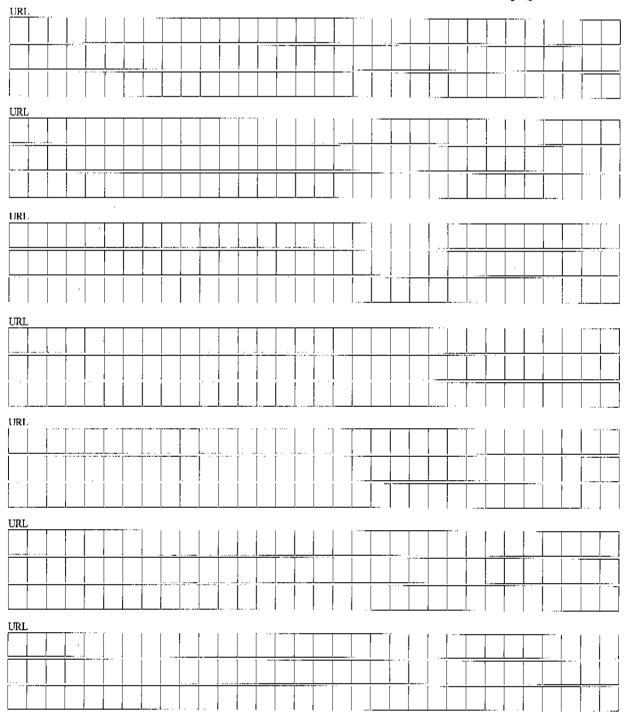
## This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 5 \end{vmatrix}$

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

	 SPI	$\overline{\text{DBS}}$	<u>ID</u>						
Name of MS4/Coalition Village of Green Island	 N	Y	R	2	0	А	3	7	7

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

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



A O

2

7

7

3

SPDES ID

NYR

-

5441172015

## **MS4 Annual Report Form**

## This report is being submitted for the reporting period ending March 9, $2 \begin{vmatrix} 0 \\ 1 \end{vmatrix} 5$

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

Name of MS4/Coalition Village of Green Island

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.

$\bullet$ MS					offic	e											• A	nnu	al F	Кер	ort	(	D SI	ΝM	IP F	'lan		• (	Corr	imei	nts
	Dep	artr	nen	ι			,																							1	1
	v	i	1	1	a	g	e		٥	f		G .	r	е	е	n		I	ទ	1	а	n	d								
	Add	res	8			T	1	I						r				· ·				1				r	r	I	I	L	1
	3	1	'	H	li	a	h		S	t	r	e	e	t								<b>_</b> .									
	City		-			) —	T	-	1	2		d		1		ľ		Б	N	Y		Zip 1	2	1	8	3	_ [				
	G Pho	r	e	e	n		ļI	s		a	n	<u>u</u>						1.		<b>-</b>		-	2	-	0		-			-	
	(	5	1	8	)	2	7	3	_	2	2	0	1																		
O L H	•		<b>.</b>	I	,	l				L			ι.	1		c		****	ما ا	Rep	ort		> SV		ים ז	Dlar		$\sim c$	⁻ or	ime	nte
⊖ Lib	Add	lres	s		<b></b>		1						r	ı	1	ч . Ч	/ ~~		ai i 	кер		-		vi vv			, 		10~	IIIIÇ.	1113
												].													.						1
	City	/	r	1			1		1		I	1	I	(	,		ı	ſ	·····			Zip								1	I.
															ĺ												-				
	Pho	ne	I	I		I		1	1				Γ	1																	
	(			j	)				-				Ĺ																		
O Oth	er															¢	) A	nnu	a) I	Rep	ort	$\langle$	$> \mathbf{S}'$	ŴŇ	1P I	Plar	ı	୍ତ	Con	nme	nts
	Add	Ires	s						·····						,					1											
									Ι.													 . "									
	City	ý	I	L	T	Τ	]								· ۱	{·····	ì	ſ	···			Zip									
											].				l	·											-				
	Pho	ne	<u> </u>	<b>.</b>	1.		1	1	l			-		1																	
	(	,			)				] -																						
⊖ We	b Pa	age	UF	۲L:													A	nnu	al l	Rep	ort	$\langle$	> <b>s</b> `	WN	1P I	Plar	נ	$\circ$ (	Con	nme	nts
	w	w	w	.	v	i	1	1	a	g	e	0	£	g	r	e	е	n	i	s	1	â	n	đ		С	0	m			
		v	ĺi	11	ı.	a	g	e	1	w	a	t	e	1	   _	s	e	w	e	r	1	<u>+</u>					-				
	[/ [	 		÷,		<b></b>	13		′ 	I. <u></u> . T			-		 		1					<u> </u> 					 				
	DL				ida	(1774				000		   no		 	000		0.00	0.01	 1 h/			 sec			hor						
⊖ eM		2889	e pi	rov	iae	spe	çu	IÇΈ	laai	057	sor	ра	ĝe.	wn	ere	rep	ort	Car	1 136	e ac	ce	NSEC	t – t	IOI.	nor	ne	pag	·			
				1								!		1					1			T								hme	ints 
			<u> </u>			<u> </u>	<u> </u>	<u> </u>	<u> </u>			1				1	1					ļ			•	I		ļ			
	1							1										Ì				1									

FROM :

0614183104

## MS4 Annual Report Form

This report is being submitted for the reporting period en-	ding March 9, 2 0 1 5
If submitting this form as part of a joint report on behalf of a coa	alition leave SPDES ID blank.
Village of Green Islund	SPDES ID
Name of MS4/Coalition Village of Green Island	
4.a. If this report was made available on the internet, what date w	vas it posted?
Leave blank if this report was not posted on the internet.	
4.b. For how many days was/will this report be posted?	
If submitting a report for single MS4, answer 5.a If submitting	a joint report, answer 5.b
<b>5.a. Was an Annual Report public meeting held in this reporting</b> If Yes, what was the date of the meeting?	period?         ♥ Yes         ○ No           0         5         /         1         8         /         2         0         1         5
If No, is one planned?	⊖ Yes ⊖ No
5.b. Was an Annual Report public meeting held for all MS4s con-	— — — — — — — — — — — — — — — — — — — —
this reporting period?	🔿 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	$\bigcirc$ Yes $\bigcirc$ No

SWMP in response to comments to this report.

.

3

2013032775

### MS4 Annual Report Form

#### This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \\ 1 & 5 \end{vmatrix}$

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

 Name of MS4/Coalition
 Village of Green Island
 SPDES ID

#### 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.

BMP 2-3 Update SWMP data using MS4web (CBI) BMP 2-6 Water quality message on flyers at HHW Day collection sites where applicable.

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

BMP 2-3 update is complete. BMP 2-6 HHW Day not held during period

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

(ox.: somples/participants/events)

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

🛡 Yes 👘 🔿 No

1

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).

SWMP document has been updated in the past month. BMP 2-2 Public Meeting comments will be collected and added to Coalition wide comments.

## **MS4 Annual Report Form**

	minum iteport form
This report is being submitted for If submitting this form as part of a joi	the reporting period ending March 9, 2 0 1 5 nt report on behalf of a coalition leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition Village of Green Island	$\begin{bmatrix} \mathbf{N} & \mathbf{Y} & \mathbf{R} & 2 & 0 & \mathbf{A} & 3 & 7 & 7 \end{bmatrix}$
<u>Minimum Control Measure 3.</u>	Illicit Discharge Detection and Elimination
The information in this section is being reported	I (check one);
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> </ul>	
How many MS4s contributed to	this report?
1. Enter the number and approx. percen	t of outfalls mapped:
2. How many of these outfalls have been reporting period (outfall reconnaissand	screened for dry weather discharges during this cc inventory)?
3.a.What types of generating sites/sewersh reporting period?	eds were targeted for inspection during this
○ Auto Recyclers	○ Landscaping (Irrigation)
O Building Maintenance	⊖ Marinas
⊖ Churches	O Metal Plateing Operations
○ Commercial Carwashes	⊖ Outdoor Fluid Storage
○ Commercial Laundry/Dry Cleaners	○ Parking Lot Maintenance
$\bigcirc$ Construction Vehicle Washouts	○ Printing
○ Cross-Connections	O Residential Carwashing
○ Distribution Centers	$\odot$ Restaurants
$\bigcirc$ Food Processing Facilities	$\odot$ Schools and Universities
○ Garbage Truck Washouts	$\bigcirc$ Septic Maintenance
$\odot$ Hospitals	○ Swimming Pools
$\odot$ Improper RV Waste Disposal	$\bigcirc$ Vehicle Fueling
$\bigcirc$ Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	
O Sowersheds:	

MCM 3 Page 1 of 4

## MS4 Annual Report Form

<b>This report is being submitted fo</b> If submitting this form as part of a j	or the reporting period ending March 9, 2 0 1 5 oint report on behalf of a coalition leave SPDES ID blank.													
Name of MS4/Coalition Village of Green Island	SPDES ID           N         Y         R         2         0         A         3         7         7													
3.b.What types of illicit discharges have	e been found during this reporting period?													
$\bigcirc$ Broken Lines From Sanitary Sewer	○ Industrial Connections													
$\bigcirc$ Cross Connections	○ Inflow/Infiltration													
○ Failing Septic Systems	○ Pump Station Failure													
<ul> <li>○ Floor Drains Connected To Storm Sewers</li> <li>○ Sanitary Sewer Overflows</li> <li>○ Illegel Drawning</li> </ul>														
⊖ Illegal Dumping ⊖ Straight Pipe Sewer Discharges														
○ Other:														
4. How many illicit discharges/potentia reporting period?	l illegal connections have been detected during this													
5. How many illicit discharges have bee	n confirmed during this reporting period?													
	nnections have been eliminated during this reporting													
<ol> <li>Has the storm sewershed mapping be If No, approximately what percent was</li> </ol>	completed in this reporting period?													
8. Is the above information available in Is this information available on the we If Yes, provide URL(s):	eb? ● Yes ⊖ No													
Please provide specific address of page v	where map(s) can be accessed - not home page.													

### **MS4 Annual Report Form**

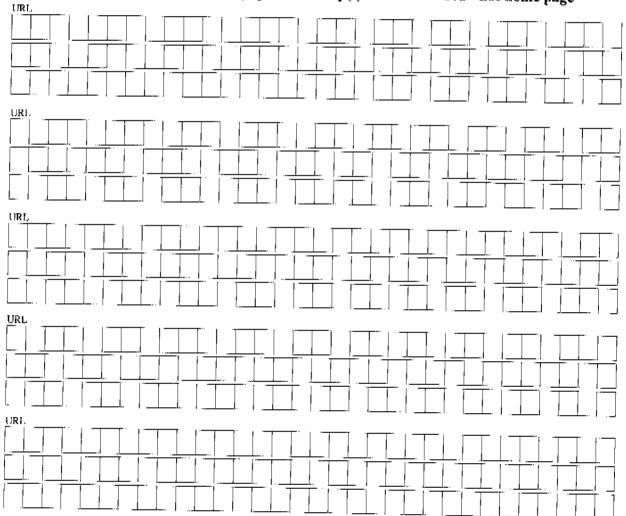
## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

		 	 SPD	ES II	)				
Name of MS4/Coalition	Village of Green Island	 <u> </u>	 N	YF	2	0	A	3 7	7

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

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



- 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?



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,	2	0	1	5
-------------------------------------------------------------------------	---	---	---	---

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

 Name of MS4/Coalition
 Village of Green Island
 SPDES ID

 N
 Y
 R
 2
 0
 A
 3
 7
 7

### 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 MG1 Map new outfalls resulting from Village owned construction activity (estimated 1 or 2 outfalls)

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

Maps updated and posted on AIMS

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

(ex.: samples/participants/events)

1

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

🛡 Yes 🛛 🔾 No

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

● Yes □ ○ No

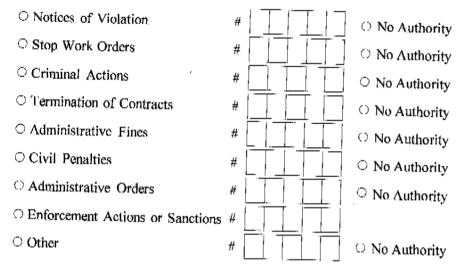
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

3-5 MG1 DPW will inventory 100 % of the outfalls (approx. 10) 3-9 MG1 DPW will continue to document any illicit discharges as required by the MS4

# MS4 Annual Report Form

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 blan	5 k.
Name of MS4/Coalition     Village of Green Island     SPDES 1D       N     Y     R     2     0     A	3 7 7
<u>Minimum Control Measures 4 and 5.</u> Construction Site and Post-Construction Control	
The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this report?</li> </ul>	
<ul> <li>1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulator mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?</li> </ul>	r
1b. Has each Town, City and/or Village contributing to this report documented that the la equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosio Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?	n ond
If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 0 09/2004 • 03/2006	ा NT
2. Does your MS4/Coalition have a SWPPP review procedure in place?	⊖ No
3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	o
<ul> <li>4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?</li> <li>● Yes ○ No</li> </ul>	ONT
If Yes, how many public comments were received during this reporting period?	0
<ul> <li>5. Does your MS4/Coalition provide education and training for contractors about the loc SWPPP process?</li> <li>Yes</li> </ul>	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:



0 %

0 %

9445612573

# **MS4 Annual Report Form**

This report is being submitted for the reporting per If submitting this form as part of a joint report on behalf of	<b>riod ending March 9</b> , 2 0 1 5 of a coalition leave SPDES ID blank.
Name of MS4/Coalition Village of Green Island	SPDES ID       N     Y     R     2     0     A     3     7     7
Minimum Control Measure 4. Construction S	<u>ite Stormwater Runoff Control</u>
The information in this section is being reported (check one): On behalf of an individual MS4	

 $\odot$  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?

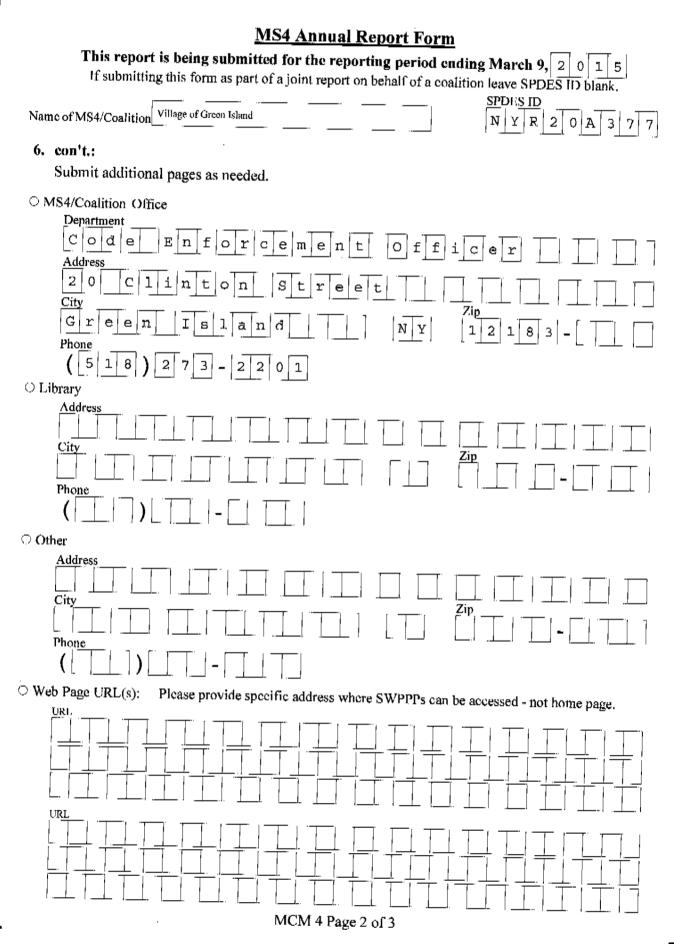
3. What percent of active construction sites were inspected during this reporting period?  $\odot$  NT

- 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 NVS Construction Stormwater Inspection Manual?
- 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPs) of construction projects that are subject to MS4 review and approval?

   Yes O NO O NT

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.



# MS4 Annual Report Form

#### This report is being submitted for the reporting period ending March 9, |2|5

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 Village of Green Island NYR 2 А 3 7

# 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.

BMP 4-2 SWPPP review of Erosion & Sediment Control 4-4 Complaint process 5-9 Operation and Maintenance procedures; post on Coalition website.

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

Worked with Coalition to write procedures and held training with DEC staff. Posted on Coalition website.

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

··· / ····
і   т
 • •

(ox.: samples/participants/events) D. Has your MS4 made progress toward this measurable goal during this reporting period?

🗭 Yes  $\odot$  No

Е.	Is your	MS4 o	on schedule	to meet	the dea	adline set	forth in	the SWMPP?
----	---------	-------	-------------	---------	---------	------------	----------	------------

Yes  $\bigcirc$  No

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

Updating the SWMP.4-8 The V/Green Island Stormwater Program Coordinator and other staff will review existing SWPPP Record Keeping, review requirements, and update as needed. Additional training may be necessary and discussed with Coalition members.

# MS4 Annual Report Form

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

 Name of MS4/Coalition
 Village of Green Island
 N
 Y
 R
 2
 0
 A
 3
 7
 7

# 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?

	# Inventoricd	# Inspections	# Times Maintained
○ Alternative Practices			
Filter Systems	2		
$\odot$ Infiltration Basins			
O Open Channels			
○ Ponds			
$\bigcirc$ Wetlands			
○ Other			

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

 $\bigcirc$  Overlay Districts  $\bigcirc$  Open Space Preservation Program

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



# MS4 Annual Report Form

	This sector is to be a sector of the sector			
	This report is being submitted for the reporting period ending March 9, 2 If submitting this form as part of a joint report on behalf of a coalition leave SPDES	ID blank,	,	
N	amc of MS4/Coalition Village of Green Island $\boxed{\begin{array}{c} N \\ Y \\ R \\ 2 \end{array}}$	о <mark>а</mark> з	7	7
4:	a. Are the MS4s contributing to this report involved in a regional/watershed wide planni	ing effori	t?	
	). Does the MS4 have a banking and credit system for stormwater management practice	$\bigcirc$ Vec	-	No
	interaction management practice	37		
4c	. Do the SWMP Plans for each MS4 contributing to this report include a protocol for ev and approval of banking and credit of alternative siting of a stormwater management	○ Yes aluation	-	No
	'	$\bigcirc$ Yes	• ]	
4d	. How many stormwater management practices have been implemented as part of this sporting period?	ystem in	this	5
			0	
5.	What percent of municipal officials/MS4 staff responsible for program implementation training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?	attende	đ	
	the second provides in this reporting period?	10	0	%

# <u>MS4 Annual Report Form</u>

This report is being submitted for the reporting paried and it as a		-	<u> </u>		
This report is being submitted for the reporting period ending Marc.	h 9,	2	01	1	5

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 Village of Green Island	
	NYR20A377

# 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.

5-4 GI Practices considered in curb cut/off street parking guideline document;

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

	All new curb cut requests must take these guidelines into account;
L	

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

_				
			_ [	
		1	3	
			- 1	
	I		(	

(ex.: samplos/parLic(panLs/events) D. Has your MS4 made progress toward this measurable goal during this reporting period?

🗭 Yes  $\odot$  No

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

Yes  $\odot$  No

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

5-4 MG1 The V/Green Island Stormwater Program Coordinator will help facilitate the incorporation of green infrastructure design guidelines into a policy document which includes curb cut and off street parking guidelines. Once approved, the document will be posted on the Village website. Guidelines are based somewhat on the grant funded Green Infrastructure Local Law Project where appropriate. 5-12 The V/GreenIsland Stormwater Program Coordinator and other staff will review mining CII/DDD Boound Manning mariage and under as pooled Additional training

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Village of Green Island

N Y R 2 0 A 3

7 7

SPDES ID

#### 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?

(ex.: samples/participants/events)

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

 $\bigcirc$  Yes  $\bigcirc$  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).

Pg. 2 (cont'd)

5-12 The V/Green Island Stormwater Program Coordinator and other staff will review existing SWPPP Record Keeping, review requirements, and update as needed. Additional training may be needed.

# MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 5$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Village of Green Island

#### SPDES ID Ν Y R 2 0 A 3 7 7

# 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.

ų

<b>Operation</b> /Activity/Facility	<u>Addressed</u> i	in SWMP?	<u>Self-Assess</u> Operation/Activ performed within years?	ity/Facility 1 the past 3
Street Maintenance	🖲 Yes		• Yes	
Bridge Maintenance.	O Yes			• No
Winter Road Maintenance	• Yes			• No
Salt Storage	• Vec		• Yes	○ No
Solid Waste Management	O Yes		• Yes	$\odot$ No
New Municipal Construction and Land Disturba	nce • Yes		• Yes	$\odot$ No
Right of Way Maintenance	$\odot$ Yes		• Yes	$\bigcirc$ No
Marine Operations	$\odot$ Yes		O Yes	🗣 No
Hydrologic Habitat Modification	() V		······ Yes	No
Parks and Open Space.	• Yes		O Yes	No
Municipal Building	• Yes	0 No	🖲 Yes	$\odot$ No
Stormwater System Maintenance	• Yes		🛡 Yes	$\odot$ No
Stormwater System Maintenance	• Yes	_ ○ No	• Yes	$\odot$ No
Vehicle and Fleet Maintenance	• Yes		🛡 Yes	$\odot$ No
Other	• Yes	○ No	• Yes	$\odot$ No

# MS4 Annual Report Form

# This report is being submitted for the reporting period ending March 9, 2015

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

Name of MS4/Coalition	/illage of Green Island	·	·		SPDES ID NYR	20A3	7 7
		·		<b>]</b>		20A3	<u>7   7</u>

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

● Parking Lots Swept (Number of acres X Number of times swept) # Acres	
• Streets Swept (Number of miles X Number of times swept) # Miles	
○ Catch Basins Inspected and Cleaned Where Necessary #	
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	
○ Phosphorus Applied In Chemical Fertilizer #Lbs.	
O Nitrogen Applied In Chemical Fertilizer # Lbs.	╎─┿┤┿┤╴┤
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	<u> </u>
3. How many stormwater management trainings have been provided to municipa during this reporting period?	al employees
4. What was the date of the last training? $0 2 / 1 3$	/ 2 0 1 5
5. How many municipal employees have been trained in this reporting period?	2 5
6. What percent of municipal employees in relevant positions and departments restormwater management training?	eceive

** INBOU	ND NOTIFICATION : FAX RECEIV	ED WITH ERRORS	**	
TIME RECEIVED April 28, 2015 6:24:02 PM EDT	REMOTE CSID 5182732235	DURATION 93		ATUS iled to
ERROR CODE ( 700 ) Error in fax transmission.				
FROM :	FAX ND. :5182732235		28 2015 05:24	

# MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition	Village of Green Island	 	 	T	SPDES ID
i same or trust coartion		 <u> </u>	 		N Y R 2 0 A 3 7 7

# 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.

Hold and/or sponsor relevant training for all employees and Coalition members.

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

The Village held and/or co-sponsored 5 training sessions throughout the reporting period. Three sessions were held for 25 Green Island municipal employees and two sessions were cosponsored by either DEC or the Coalition. The facility audit training held on 6/24/14 was attended by 19 people and a tour of our Albany Avenue green street project on 8/28/14 was attended by 23 people. Those trained included Green Island employees and Stormwater Coalition members.

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

(ex.: samples/participants/avents)

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

🛡 Yes 🗆 🔿 No

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

🛡 Yes 🛛 🙄 No

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

Continue to provide, mandate and encourage training for all municipal employees.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

# Minimum Control Measure 1. Public Education and Outreach

1 3

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:

• Construction Sites	• Pesticide and Fertilizer Application
• General Stormwater Management Information	• Pet Waste Management
○ Household Hazardous Waste Disposal	○ Recycling
O Illicit Discharge Detection and Elimination	• Riparian Corridor Protection/Restoration
• Infrastructure Maintenance	○ Trash Management
• Smart Growth	• Vehicle Washing
O Storm Drain Marking	$\bigcirc$ Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	$\bigcirc$ Wetland Protection
<pre> • Other: C o a l i t i o n W e b s i t e - W h a Other </pre>	O None t Y o u C a n D o
2. Specific audiences targeted during this reporting period:	
Public Employees     Contractors	
• Residential O Developers	

Businesses
 General Public

- Restaurants Industries
- Other: O Agricultural

								-												
S	t	u	d	е	n	t	ន													
Ot	her																			

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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		-			
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:

<ul> <li>Construction Site Operators Trained</li> </ul>	# Trained		(1)	5
O Direct Mailings	#Mailings			
• Kiosks or Other Displays	# Locations			8
• List-Serves	# In List	4	1 5	8
○ Mailing List	# In List			
$\bigcirc$ Newspaper Ads or Articles	# Days Run			
Public Events/Presentations	# Attendees		1 5	3
School Program	# Attendees		16	6
○ TV Spot/Program	# Days Run			
• Printed Materials:	Total # Distributed	(	5 4	2
Locations (e.g. libraries, town offices, kiosks)				

А	Т	L	a		0	11	L		T.	a		T							
С	i	t	У	А	1	b	a	n	У	S	С	h	0	0	1	Ρ	r	0	g
Ν	0	r	m	a	n	S	k	i	1	1	С	r	е	е	k				
G	Ι		С	0	d	е	R	е	v	i	е	W	Ρ	r	0	g	r	a	m

• Other:

H o s t 4 C W P W e b c a s t s

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

UKI	_				_						_																			 
W	w	w	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	a	n	У	С	0	u	n	t	У	•	0	r	g	

URL

UN	-															

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

SPL	JES	ID				
Ν	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.

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.

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

BMP 1-1 TAAW: 1) Map Set maps-updated 2010 urbanized area; not all formatted for use with TAAW, but will be, still important. ; 2) Collected Measurable Goals sheets; info somewhat useful for budgeting purposes. BMP 1-3 Website: To/From links corrected for all members; disconnected links common; important to monitor links frequently. GoogleAnalytics for website (2828 sessions/2015; 1637 visits (sessions?)-a 1191 increase. BMP 1-7 List Serve-no updates of officials.

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

		4	
_			

(ex.: samples/participants/events)

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

• Yes  $\bigcirc$  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).

Coalition has an updated Joint SWMP Plan titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some Coalition goals for MCM1 presented here. BMP 1-1 TAAW: add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, 1 new doc (plant care).

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

 O

### 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. 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												
• Comments on SWMP Received					0							
• Community Hotlines	Phone # $\left( \begin{array}{c c} 5 & 1 & 8 \end{array} \right)$	4 4 7	-	5	6	4	5					
Phone # ( )	Phone # ( )		-									
Phone # ( )	Phone # ( )		-									
Phone # ( )	Phone # ( )		-									
Phone # ( )	Phone # ( )		-									
Phone # ( )	Phone # ( )		-									
$\bigcirc$ Community Meetings	#	Attendees										
$\bigcirc$ Plantings		Sq. Ft.										
○ Storm Drain Markings		#Drains										
$\bigcirc$ Stakeholder Meetings	#	Attendees										
Volunteer Monitoring     # Events												
O Other:												

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

Program (SWMP) Plan provided?	۲	Ye	es	s ON	
List-Serve     # In List			4	5	8
O 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 5

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

SPL	DES	ID				
Ν	Y	R	2	0		

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

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

URI	_																													
W	w	W	•	s	t	0	r	m	w	a	t	е	r	a	1	b	а	n	У	С	0	u	n	t	У	0	r	g		
URI		I		L		I	L		L				I	L	I		I	L	I		I								. <u> </u>	
																													L	
JRI																														
JRI																														
JRI	Í	1		1									1	1																_
URI				-		1							-				1				1									
																														L
JRI																							_					_		-
																														L
																										 			·	-

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID N Y R 2 0

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

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

MS4/Coalition Office									<ul> <li>Annual Report</li> </ul>						SWMP Plan					• Comments											
	Dep	artı	nen	t																											
	S	t	0	r	m	W	a	t	е	r		С	0	a	1	i	t	i	0	n	-	A	1	b	a	n	У	С	n	t	У
	Ado																														
	1	1	2		S	t	a	t	е		S	t	r	е	е	t	,		R	0	0	m		7	2	0					
	City																	Г		_		Zip					1	[		,	
	Α	1	b	а	n	У												]	N	Y		1	2	2	0	7	-				
	Pho	ne				[																									
	(	5	1	8	)	4	4	7	-	5	6	4	5																		
○ Lib	rary	7														C	A	nnu	al I	Rep	ort	C	) S'	WN	1P ]	Plar	1	0	Con	nme	ents
	Ađo	lres	s																	1										,	
	City	/																Г				Zip					1	r		,	
																											-				
	Pho	ne																_													
	(				)				-																						
	•																														
$\bigcirc$ Oth	er															C	A	nnu	al l	Rep	ort	C	S	WN	1P ]	Plar	1	$\bigcirc$ (	Con	nme	ents
	Ado	ires	s																												
	City	/																Г				Zip					1				
																											-				
	Pho	ne																													
	(				)				-																						
				_												_			1 1			_			(D)	D1			~		
• Wel	o Pa	age	UR	L:														nnu		Rep	ort		) S'	WN	1P	Plat	1	• (	Con	nme	nts
	W	W	W	•	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	
																														$\square$	
	Ple	ease	e pr	ovi	de	spe	cifi	ic a	ddr	ess	of	pag	ge v	whe	ere	rep	ort	car	ı be	e ac	ces	sed	l - r	ot	hor	ne	pag	ge.			
• eMa	ail																											• (	Con	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			

This report is being submitted for the reporting period ending March 9, 2 0	1 5	
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		
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. $05/01/$	2 0 1	L 5
4.b. For how many days was/will this report be posted?	1	L 4
If submitting a report for single MS4, answer 5.a If submitting a joint report, answer	5.b	
5.a. Was an Annual Report public meeting held in this reporting period?       O         If Yes, what was the date of the meeting?       If Yes, what was the date of the meeting?	Yes	O No
If No, is one planned?	Yes	) No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this reporting period?		<b>ing</b> • No
If No, is one planned for each?	Yes	• No
<b>6.</b> Were comments received during this reporting period?	Yes	) No

SWMP in response to comments to this report.

#### This report is being submitted for the reporting period ending Marc

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

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.

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

BMP 2-3 SWMP: SWMPv2 (2012 to 2015) updated. Completed tasks/goals noted, issues explained, title of document, Joint SWMP BMP Data Report. New SWMP needs to be developed for 2015 to 2017 and matched to NYSDEC interim MS4 Permit. Coalition Sub-Committee has met, some decisions: BMPs similar to previous SWMP, some modifications; individual goals for individual members; added MCM 8 Training. BMP 2-6 Clean Up Activities: "Thank You" dropped, no time.

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

(ex.: samples/participants/events)

1

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  No

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

As of May, 2015, Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Document includes new/modified BMPs applicable to all Coalition members; goals are specific to Coalition and individual MS4 members. Some goals for MCM2 presented here. BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

SPI	DES	ID				
Ν	Y	R	2	0		

ch 9,	2	0	1	5	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Stormwater Coalition of Albany County Name of MS4/Coalition

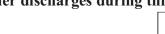
# Minimum Control Measure 3. Illicit Discharge Detection and Elimination

1 3

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

- On behalf of an individual MS4
- On behalf of a coalition
  - How many MS4s contributed to this report?
- 1. Enter the number and approx. percent of outfalls mapped:
- 2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?
- 3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

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



#

%

SPDES ID Υ R 2 0

Ν

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 C	County SPDES ID
3.b.What types of illicit discharges have	been found during this reporting period?
$\bigcirc$ Broken Lines From Sanitary Sewer	$\bigcirc$ Industrial Connections
○ Cross Connections	$\bigcirc$ Inflow/Infiltration
○ Failing Septic Systems	○ Pump Station Failure
$\bigcirc$ Floor Drains Connected To Storm Sewers	○ Sanitary Sewer Overflows
○ Illegal Dumping	○ Straight Pipe Sewer Discharges
Other:	○ None

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

No

O No

O No

÷

○ Yes

• Yes

• Yes

- **7. Has the storm sewershed mapping been completed in this reporting period?** If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

reporting period?

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

URI																										 	
Ρ	А	S	S	W	0	R	D		Р	R	0	Т	Е	С	Т	Е	D										
W	W	W	•	a	i	m	S	g	i	s	•	0	r	g	/	W	е	b	m	а	р	/					
*	*	R	е	ន	t	r	i	С	t	е	d		А	С	С	е	S	s	*	*							
URI																											

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

R 2

0

NY

Name of MS4/Coalition Stormwater Coalition of Albany County

#### 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.

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

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

BMP 3-1 Map Outfalls: no sample form provided to collect outfall location information for construction projects; instead individual MS4s may map post-construction outfalls, no form needed. BMP 3-2 AIMS: map layers updated, process to evaluate AIMS started; now a priority given server issues. BMP 3-4 Storm Sys/Sewershed Mapping: few requests from past year. BMP 3-5 ORI: kits re-stocked as needed; Coalition staff assist, as needed & funded.

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

(ex.: samples/participants/events)

4

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some goals for MCM3 presented here. BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM4 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  No

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

• Yes  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM5 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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		-	_	_	
Ν	Y	R	2	0			

# Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?



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

			Self-Assess	<u>ment</u>
		<b>Opera</b>	tion/Activi	ity/Facility
		<u>perfor</u>	<u>med withir</u>	<u>n the past 3</u>
<b>Operation/Activity/Facility</b>	Addressed in	<u>n SWMP?</u>	<u>vears?</u>	<u> </u>
Street Maintenance	O Yes	○ No	O Yes	○ No
Bridge Maintenance	• Yes	○ No	O Yes	$\bigcirc$ No
Winter Road Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No
Salt Storage	O Yes	○ No	O Yes	$\bigcirc$ No
Solid Waste Management	O Yes	○ No	O Yes	$\bigcirc$ No
New Municipal Construction and Land Disturba	ance $\bigcirc$ Yes	○ No	○ Yes	$\bigcirc$ No
Right of Way Maintenance	O Yes	○ No	$\odot$ Yes	$\bigcirc$ No
Marine Operations	O Yes	○ No	$\odot$ Yes	$\bigcirc$ No
Hydrologic Habitat Modification	O Yes	○ No	O Yes	$\bigcirc$ No
Parks and Open Space	····· O Yes	○ No	$\odot$ Yes	$\bigcirc$ No
Municipal Building	o	○ No	○ Yes	$\bigcirc$ No
Stormwater System Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No
Vehicle and Fleet Maintenance		○ No	○ Yes	$\bigcirc$ No
Other	○ Yes	○ No	⊖ Yes	$\bigcirc$ No

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

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

SPDES ID

Y R 2

0

Ν

1 0

9

2 0 1 4

1 3 0

%

$\bigcirc$ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
$\bigcirc$ Streets Swept (Number of miles X Number of times swept)	# Miles	
$\bigcirc$ Catch Basins Inspected and Cleaned Where Necessary	#	
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	# Acres	
3. How many stormwater management trainings have been provided to	o municipa	l employees
during this reporting period?		1 1

- 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 5

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

SPL	DES	ID			_	
Ν	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.

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

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

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: Coalition provided Inventory and Assessment support to 3 Coalition members, as requested and funded. BMP 6-9 Staff Training: one elected official received Clean Water Act Basics training, not the road show as planned, however training materials were developed for future programs.

#### 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).

The Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No specific Coalition goals for MCM 6; instead Coalition staff as reflected in 2015 Coalition budget and requested by individual members, directly assist MS4s in implementing their individual MCM 6 goals. Training related Coalition goals (organize, host, fund) are described in SWMPv3 MCM 8 Train'g-Staff, Plan'g/Zon'g Bds, Other Muni Officials.

MCC form for period ending March 9, 2 0 1 5

_		SPE	DES	ID						
Name of MS4	TOWN OF GUILDERLAND	Ν	Y	R	2	0	Α	2	1	1

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:

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

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1

Name of MS4 Town of Guilderland

SPDES IDNYR20A

2 1 1

5

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

Firs	t Na	ame			-		-	_	-				-			MI	_	Las	t Na	me					_	_			_		
K	е	n	n	е	t	h										D		R	u	n	i	0	n								
Titl	e																														
Т	0	w	n		S	u	р	е	r	v	i	ß	0	r																	
Add	lres	s																												 	
5	2	0	9		W	е	S	t	е	r	n		Т	u	r	n	р	i	k	е											
City	/																			St	tate		Zip								
G	u	i	1	d	е	r	1	а	n	d										N	1 7	Z	1	2	0	8	4	-			
eMa	ail																														
r	u	n	i	0	n	k	@	t	0	W	n	g	u	i	1	d	е	r	1	a	n	d	•	0	r	g					
Pho	ne																	Cou	nty												
(	5	1	8	)	3	5	6	-	1	9	8	0						A	1	b	a	n	У								

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1

Name of MS4 TOWN OF GUILDERLAND

SPDES ID N Y R 2 0 A

2 1 1

5

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

Firs													MI	_	Las	t Na	me							_			_				
K	е	n	n	е	t	h										А		D	А	r	р	i	n	0							
Titl	e																														
S	t	0	r	m	w	а	t	е	r		М	а	n	а	g	е	m	е	n	t		0	f	f	i	С	i	a	1		
Add	lres	s																													
6	3	3	8		F	r	е	n	С	h	I	S		Μ	i	1	1		R	0	а	d									
City	/																			S	tate		Zip								
G	u	i	1	d	е	r	1	a	n	d										1	N .	Y	1	2	0	8	5	-			
eMa	ail																														
d	a	r	р	i	n	0	k	1	@	n	У	С	a	р	•	r	r	•	С	0	m										
Pho	ne																	Cou	inty												
(	5	1	8	)	8	6	1	-	5	1	0	8						A	1	b	a	n	У								

# MS4 Municipal Compliance Certification (MCC) Form

SPDES ID

Y R 2

0 A

2 1

1

Ν

MCC form for period ending March 9, 2 0 1 5

Name of MS4 TOWN OF GUILDERLAND

### 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	ner	/Co	aliti	onN	Vam	e			_				_																			
S	t	0	r	m		W	a	t	e	r		С	0	a	1	i	t	i	0	n		0	f		А	1	b	a	n	У		
Par	tner	/Co	aliti	ionl	Nan	ne (c	con't	.)	•			•	•						•				•	SPI	DES	Paı	tne	r ID	- If	apr	olica	ble
С	0	u	n	t	У																			Ν	Y	R	2	0	A	3	5	9
Ado	lress	5																														
1	1	2		S	t	а	t	е		S	t	r	e	е	t	,		R	0	0	m		7	2	0							
Cit	y																			St	tate		Zip	•								
А	1	b	a	n	У															ľ	1 Z	7	1	2	0	5	4	-				
eMa	ail																															
n	h	е	i	n	z	е	n	@	a	1	b	а	n	У	С	0	u	n	t	У	•	С	0	m								
Pho	ne						_						_						Lo	- 	y Bi	ndi	na	Agro	om	ont i	no	nor	dan	00		
(	5	1	8	)	4	4	7	-	5	6	4	5								-	SP-0		-	-					Ye		0	No
WI	nat	tas	ks/1	rest	on	sih	iliti	es	are	sha	area	łw	ith	this	s na	nrtn	er (	e o	Ň	IM	1 S	cho	01	Pro	ora	ms	or	Мı	ıltir	ole	Tas	sks)?
	1000	cub.		1001											, b.				,• 10						514				1111		- uc	
• 1	MМ	1	Ε	d	u	С	a	t	i	0	n	a	1		Μ	a	t	e	r	i	a	1	S		,	Ρ	r	0	g	r	a	m
• 1	лм	2	S	М	М	Р		С	0	0	r	d	i	n	a	t	i	0	n	_	W	е	b	s	i	t	е					
•1	VIIVI	4	D	1.1	1.1	-		C		U	-	a	-	11	a		-	0						D	-	C	C					
• 1	MМ	3	S	t	0	r	m		S	У	ន	t	е	m		m	а	р	ı	-	0	R	Ι		S	u	р	р	0	r	t	
• 1	ИΜ	4	Ρ	r	0	С	e	d	u	r	е	s		S	u	p	р	0	r	t												
			_			-					-					Г	Г	-		-												
• 1	MМ	5	Ρ	r	0	С	е	d	u	r	е	s			S	u	р	р	0	r	t											
• 1	ИΜ	6	Т	r	a	i	n	_	g		F	a	С	i	1	i	t	У		A	u	d	i	t		S	u	р	р	0	r	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 Certification	ion(	(M	CC	!) <b>I</b>	For	m					
MCC form for period ending March 9	, 2	0	1	5							
			SPE	DES	ID						
Name of MS4 TOWN OF GUILDERLAND			Ν	Y	R	2	0	A	2	1	1

# **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						-									, 1 i	MI	I		t Na												
K	е	n	n	е	t	h												R	u	n	ĺ	0	n								
Title	e (	Cle	arly	pri	nt ti	tle o	of in	divi	idua	1 <u>si</u> g	<u>gnin</u>	g re	por	t)																	
S	u	p	е	r	v	i	s	0	r		Т	0	w	n		0	f		G	u	i	1	d	е	r	1	a	n	d		
Sign	atu	re																					Dat	e	/			/			

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 5

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

Name of MS4/Coalition^T

TOWN OF GUILDERLAND

# Water Quality Trends

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 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

Yes • No

SPDES ID

0 A

2 1 1

N Y R 2

If Yes, choose one of the following

- Report(s) attached to the annual report
- $\bigcirc$  Web Page(s) where report(s) is/are provided below

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

URL			 	 				 	 	 	 		 	 	 
URL															
URI	_														
URL	_														

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition TOWN OF GUILDERLAND

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 1
 1

# Minimum Control Measure 1. Public Education and Outreach

1

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

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

Other

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 Stormwater	Management Information	Pet Waste Management										
• Household Hazardou	us Waste Disposal	• Recycling										
○ Illicit Discharge Det	tection and Elimination	$\bigcirc$ Riparian Corridor Protection/Restoration										
• Infrastructure Main	tenance	○ Trash Management										
$\bigcirc$ Smart Growth		• Vehicle Washing										
Storm Drain Markin	ıg	$\bigcirc$ Water Conservation										
• Green Infrastructure	Better Site Design/Low Impact Development	$\bigcirc$ Wetland Protection										
Other:		○ None										
2. Specific audience	es targeted during this reporting period:											
• Public Employees	Contractors											
○ Residential	○ Developers											
○ Businesses	• General Public											
○ Restaurants	$\bigcirc$ Industries											
• Other:	○ Agricultural											

This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition	TOWN OF GUILDERLAND
-----------------------	---------------------

SPI	DES	ID						
Ν	Y	R	2	0	А	2	1	1

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

$\bigcirc$ Co	nstr	ucti	on	Site	e Oj	pera	ator	s T	rair	led											# Trained					
$\bigcirc$ Dir	ect	Ma	ilin	gs																	# Mailings					
• Kio	osks	or	Otł	ner	Dis	play	ys														# Locations					2
• Lis	t-Se	erve	S																		# In List			4	5	8
○ Ma	ilin	g L	ist																		# In List					
○ Nev	wsp	ape	r A	ds (	or A	Arti	cles														# Days Run					
Pul	olic	Ev	ents	s/Pr	ese	ntat	tion	s													# Attendees				3	0
$\bigcirc$ Sch	nool	Pr	ogra	am																	# Attendees					
ΟTV	Sp	ot/F	Prog	gran	n																# Days Run					
• Pri								c	C"	1.	1	、 、									Total # Distributed			3	0	0
				e.g. l			tow				DSKS		т	I	Е	R	S		Т							
	Η	A	Ν	D	Ε	D		0	U	Т		F	L	1	凸	ĸ	5		Т	0						
	R	Ε	S	Ι	D	Ε	Ν	Т	S		0	Ν		Κ	R	U	Μ	Κ	Ι	L						
	Α	Ν	D		D	0	0	R		Η	A	Ν	G	Ε	R	S										
○ Oth	ner:																									
• We	b P	age	:	Pro	ovie	le s	pec	ific	we	b a	ddr	esse	es -	not	ho	me	pag	e.	Cor	ntin	ue on next page if ad	ditio	onal	l spa	ace	is

needed.

URL				nee	ucc				-		-							-							-	-		
W	W	W	•		Т	0	W	Ν	0	F	G	U	Ι	L	D	Е	R	L	А	Ν	D	•	С	0	Μ			
S	Т	0	R	М	W	А	Т	Е	R																			

URL

W	W	W	•	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	

# This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

TOWN OF GUILDERLAND Name of MS4/Coalition

SPDES ID 2 0 A Ν YR 2 1 1

Web URL	Pag	ge o	con	't.:		Pro	ovi	de s	speo	cifi	c w	eb	add	lres	ses	- n	ot	hor	ne	pag	e.							
																												F
URL		I	I			ļ	I						ļ										I		ļ		I	L
																												Ē
URL			I				I		1				1												I			
																												Ē
URL					1					1	1			1									1	1				1
																												Ē
URL		-																										L
																												Ī
URL	_																											-
																												Ē
URL																												-
																												Ē
	+																											F

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition

#### 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.

TOWN WAS TO EDUCATE AND HOLD EVENTS FOR PUBLIC AND EMPLOYEES CONCENTRATING ESPECIALLY ON NORMANSKILL AND KRUMKILL WATERSHEDS.

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

TOWN WAS ABLE TO HAND OUT FLIERS AND DOOR HANGERS IN THIS AREA OF CONCERN. TOWN WILL CONTINUE TO CONCINTRATE ON THESE WATERSHEDS.

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

(ex.: samples/participants/events)

 $\bigcirc$  No

 $\bigcirc$  No

• Yes

D.	Has your 1	MS4 I	made	progress	toward	this	Measurabl	e Goal	during	this re	porting	period?
<b>~</b> •	Ind your		maac	PI OBI COD	co mai a			c Gou			porting	periou

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

WE FELT VERY GOOD ABOUT ALL OUR EDUCATIONAL TRAINING GOALS IN THE AREAS OF CONCERN IN THE FUTURE. THE TOWN WILL CONTINUE TO WORK ON THESE AREAS.



3

TOWN OF GUILDERLAND

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

 Name of MS4/Coalition
 TOWN OF GUILDERLAND
 SPDES ID

## Minimum Control Measure 2. Public Involvement/Participation

2 1 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. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

• Cleanup Events	# Events 3
$\bigcirc$ Comments on SWMP Received	#Comments 0
• Community Hotlines	Phone #     (     5     1     8     6     1     -     5     1     0     8
Phone # $( 5 1 8 ) 4 4 7 - 5 6 4 5$	Phone # ( )
Phone # ( )	Phone # ( )
Phone # ( )	Phone # ( )
Phone # ( )	Phone # ( )
Phone # ( )	Phone # ( )
• Community Meetings	# Attendees 2 0
○ Plantings	Sq. Ft.
Storm Drain Markings	#Drains 3 5
$\bigcirc$ Stakeholder Meetings	# Attendees
○ Volunteer Monitoring	# Events
• Other: R O A D S I D E P I C K	U P

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

Program (SWMP) Plan provided?	Ye	S	0	No
List-Serve     # In List		4	5	8
○ Newspaper Advertising # Days Run				
○ TV/Radio Notices # Days Run				
Other:				

 $\bigcirc$  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 5

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

Name of MS4/Coalition	TOWN OF GUILDERLAND
-----------------------	---------------------

SPI	DES	ID		-		-		
Ν	Y	R	2	0	А	2	1	1

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

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

URL

Η	Т	Т	Ρ	:	/	/	W	W	W	•	Т	0	W	Ν	0	F	G	U	Ι	L	D	Ε	R	L	A	Ν	D	•			
0	R	G	/	Ρ	А	G	Ε	S	/	G	U	Ι	L	D	Ε	R	L	А	Ν	D	-	S	Т	0	R	М	W	A	Т	Ε	R
/	Ι	Ν	D	Е	Χ																										

URL

OIG	-																													
W	W	W	•	S	Т	0	R	М	W	A	Т	Е	R	A	L	В	A	Ν	Y	С	0	U	Ν	Т	Y	•	0	R	G	

UDI

URL	-																		
																		ı	
																		Ī	
I																		ı	
	•	•		•	•			•	•	•	•	•	•						

URL

URL

 -															

U

URL																

URI																

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition	TOWN OF GUILDERLAND
-----------------------	---------------------

SPI	DES	ID						
Ν	Y	R	2	0	А	2	1	1

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

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

UR	Ļ				 	 		 	 	 	 				 	 
URI	[															
URI																
UR	L	 														
URI	L															
URI																
URI	L															

## **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition TOWN OF GUILDERLAND

 SPDES ID

 N
 Y
 R
 2
 0
 A
 2
 1
 1

# **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.

	4/C	loal	itio	n C	)ffic	e											A	nnu	al l	Rep	ort		S	WN	1P I	Plai	1		Con	nme	nts
	<b></b>		men																												
	Η	I	G	Η	W	A	Y		D	Ε	Ρ	A	R	Т	Μ	Ε	Ν	Т													
		ires																													
	6	3	3	8		F	R	Ε	Ν	С	Η	'	S		Μ	I	L	L		R	0	A	D								
	City	y																Г				Zip					1				
	G	U	I	L	D	Ε	R	L	А	Ν	D		С	Т	R			]	N	Y		1	2	0	8	5	-				
	Pho	ne			1.				1					1																	
	(	5	1	8	)	8	6	1	-	5	1	0	8																		
○ Lib	rary Ado	/ dres	s													C	A	nnu	al 1	Rep	ort	C	) S'	WN	1P I	Plai	1	0	Con	nme	nts
	City	v v																				Zip									]
																		Γ									_				
	Pho	ne																									J				
	(				)				_																						
	(				,																										
• Oth	er Add	lres	S	_			_	_						_			A	nnu	al 1	Rep	ort		S S	WN	1P I	Plar	1		Con	nme	nts
						_	_	_	_			Т	R	Е	-			_	-	-	7.0										
	1	1	2		S	Т	A	Т	Е		S	1	л	Б	Ε	Т		R	0	0	М		7	2	0						
	1 City		2		S		A	.L.	E		S	1	ĸ	<u>с</u>	E	Т		R	0	0		Zip	7	2	0		1				
			2 B	A	S N	T.	A	T	E		5		К	E	<u>Е</u>	Т				O Y		Zip 1	7	2	0	4	   <b>_</b>				
	Cit	y L		A		 	A	T	E		5		ĸ		Ľ	Т										4	] -				
	City A	y L		A 8		 	A 4	7	E	5	6	4	5			Т										4	] -				
• We	City A Pho (	u L 5	B 1	8		Y			E	5							A	[]	N			1		0	5		] <b>-</b>		Con	nme	nts
	City A Pho (	u L 5	B 1	8		Y			E - G	5 U				E	R		A	[]	N	Y		1	2	0	5		] <b>-</b> n G	• •	Con	nme	nts
	City A Pho <b>(</b> D Pho T	y L 5 age 0	B 1 UR W	8 L: N	)	Y 4 0	4 F	7	<b>-</b> G	U	6	4	5 D	E	R	L	A	nnu N	N al l	Y Rep	ort O	1 R	2 S`	0 WN /	5 1P 1 P	Plan A	G	Е		nme	ents
	City A Pho (	y L 5 age	B 1 UR	8 8L:		Y 4	4				6	4 L	5					nnu	N 1	Y	ort	1	2 S`	0	5 1P 1	Plar				nme	ents
	City A Pho ( b Pa T G	y L 5 age 0 U	B 1 UR W I	8 L: N L	N ) D	Ч 4 О Е	4 F R	7 L	- G A	U N	6 I D	4 L	5 D S	E	R	L	A	nnu N W	N all D A	Y Rep T	ort O E	1 R R	2 S G /	0 WM / I	5 IP I P N	Plan A D	G E	E X		nme /	ents
	City A Pho ( b Pa G G	y L 5 age 0 U	B 1 UR W I	8 L: N L	N ) D	Ч 4 О Е	4 F R	7 L	- G A	U N	6 I D	4 L	5 D S	E	R	L	A	nnu N W	N all D A	Y Rep	ort O E	1 R R	2 S G /	0 WM / I	5 IP I P N	Plan A D	G E	E X ge.	S	/	
• We	City A Pho C T G Ple ail	y L 5 3 0 U 2 2 age	B UR W I e pr	8 RL: N L	N ) D de	Y 4 E spe	4 F R	7 L ic a	G A ddr	U N	6 I D	4  pag	5 D S ge v	E T	R O ere	L R rep	A M ort	nnu N W car	N D A	Y Rep T	ort O E ces	1 R R ssec	2 G I - r	0 WW / I	5 IP I P N	Plan A D ne	G E paş	E X ge.		/	
• We	City A Pho ( b Pa G G	y L 5 age 0 U	B 1 UR W I	8 L: N L	N ) D	Y 4 E spe	4 F R	7 L	- G A	U N	6 I D	4 L	5 D S	E	R	L R rep	A	nnu N W	N all D A	Y Rep T	ort O E	1 R R ssec	2 S G /	0 WM / I	5 IP I P N	Plan A D	G E	E X ge.	S	/	

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5 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 1 TOWN OF GUILDERLAND 1 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. 2 0 5 1 0 1 5 0 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 No If Yes, what was the date of the meeting? If No, is one planned? ○ Yes No 5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period? ○ Yes No If No, is one planned for each? • 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 5

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

TOWN OF GUILDERLAND Name of MS4/Coalition

#### 7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

THE TOWN WILL UPDATE ITS PUBLIC INFORMATION AND CONTACT LIST. IT WILL BE POSTED ON TOWN WEBSITE WITH A LINK TO COALITION WEB SITE.

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

THE TOWN HAS BEEN BETTER AT KEEPING THE PUBLIC INFORMED WITH THE WEBSITE.

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  $\bigcirc$  No

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

• Yes  $\bigcirc$  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 TOWN WILL BE WORKING TO KEEP ITS WEBSITE UPDATED REGULAR AND PROMOTE IT TO ALL RESIDENTS TO MAKE THEM MORE AWARE OF WHAT IS GOING ON IN STORMWATER. WE HAVE TO MAKE A POINT TO THE RESIDENTS THE VALUE OF WEBSITE.



#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

SPDES ID

9 3 #

1

0 A

2 1 1

9

0 %

NYR2

1

Name of MS4/Coalition TOWN OF GUILDERLAND

## 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
- $\bigcirc$  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?

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

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 TOWN OF GUILDERLAND	N Y R 2 0 A 2 1 1
3.b.What types of illicit discharges have	been found during this reporting period?
$\bigcirc$ Broken Lines From Sanitary Sewer	$\bigcirc$ Industrial Connections
$\odot$ Cross Connections	$\bigcirc$ Inflow/Infiltration
$\bigcirc$ Failing Septic Systems	$\bigcirc$ Pump Station Failure
$\odot$ Floor Drains Connected To Storm Sewers	$\bigcirc$ Sanitary Sewer Overflows
$\bigcirc$ Illegal Dumping	$\bigcirc$ Straight Pipe Sewer Discharges
Other:	None
4. How many illicit discharges/potentia reporting period?	l illegal connections have been detected during this

- 5. How many illicit discharges have been confirmed during this reporting period?
- 6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0

0

0

No

 $\bigcirc$  No

 $\bigcirc$  No

8 9 %

• Yes

• Yes

- 7. Has the storm sewershed mapping been completed in this reporting period? ○ Yes If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

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

W	W	W	•	A	Ι	Μ	G	I	S		0	R	G	/	W	Ε	В	М	А	Ρ	/					
#	#		Ρ	A	S	S	W	0	R	D		Ρ	R	0	Т	Ε	С	Т	Ε	D						
URL	,																									

## This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 5 \end{vmatrix}$

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

Name of MS4/Coalition TOWN OF GUILDERLAND

SPL	DES	ID						
Ν	Y	R	2	0	A	2	1	1

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

Please provide specific address of page where map(s) can be accessed - not home page  $_{\mbox{\tiny URL}}$ 

UKL	í – i																										 
W	W	W	•		A	Ι	М	G	I	S	•	0	R	G	/	W	Ε	В	М	А	Ρ	/					
#	#		Ρ	A	S	S	W	0	R	D		Ρ	R	0	Т	Е	С	Т	Е	D							
URL																											
URL	I																										
URL	I																										
URL	,			I	I	I	I	I	I	II				I					I	I	I						
L				I		I		I	I					I	L				I	I	I			l			

- 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 No NT

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

6 0 8

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition

#### 12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

THE TOWN WILL REVIEW EXISTING MAPS OF OUTFALLS AND IDENTIFY THEM FOR ACCURACY.

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

THE TOWN IS TRYING TO SET UP A NEW MAPPING SYSTEM TO HELP BETTER OUR INFORMATION OF OUTFALLS.

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  $\bigcirc$  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).

WITH A NEW MAPPING SYSTEM WE WILL BE MORE ACCURATE AND BE ABLE TO PUT MORE INFORMATION ABOUT OUR OUTFALLS ON IT.

SPE	DES	ID						
Ν	Y	R	2	0	А	2	1	1

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition TOWN OF GUILDERLAND

SPI	DES	ID						
Ν	Y	R	2	0	A	2	1	1

2 1

0

# <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

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

1

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

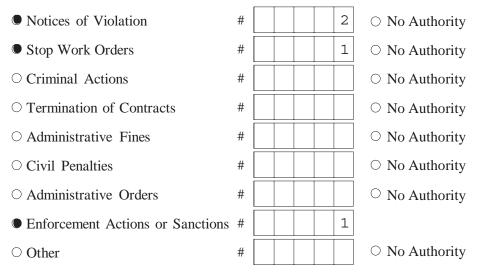
   If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
   09/2004
   03/2006
   NT
- 2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes O No
- 3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting 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 5

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

SPDES ID

ΝY

R 2

0 A 2 1 1

1 0 0 %

0 0 %

Name of MS4/Coalition TOWN OF GUILDERLAND

## Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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.	How many construction projects have been authorized for disturbances of one acre o	or n	nor	re
	during this reporting period?		1	5

- 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?  $\odot$  NT

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

- 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 • 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 5

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

Name of MS4/Coalition TOWN OF GUILDERLAND

SPDES ID

Y R 2 0 A 2 1 1	~								
		Y	R	2	0	А	2	1	1

#### 6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

	Dep	artı	nen	t																											
	Т	0	W	Ν		0	F		G	U	Ι	L	D	Е	R	L	А	Ν	D		H	I	G	H	W	А	Y		D	Е	P
	Add	lres	s																												
	6	3	3	8		F	R	Е	N	C	Η	1	S		М	I	L	L		R	0	A	D								
	City	,																				Zip					1				
	G	U	Ι	L	D	E	R	L	Α	Ν	D		С	Т	Ν			N	IY	<u>r</u>		1	2	0	8	5	-				
	Pho	ne							I																						
	(	5	1	8	)	8	6	1	-	5	1	0	8																		
○ Lib	rary	7																													
	Add	lres	s			1	1	1	1	1				1						1	1	1					1				
	City	,																				Zip					1				
																											-				
	Pho	ne																													
	(				)				-																						
• Oth	ler																														
	Add	lres	s		_		_	-		-	-			_		_	-	_	-	_	_	_					-				
	1	1	2		S	Т	A	Т	Е		S	Т	R	Е	Е	Т															
	City	,						•	·							·						Zip					•				
	Α	L	В	Α	Ν	Y												N	IY			1	2	2	0	7	-				
	Pho	ne																													
	(	5	1	8	)	4	4	7	-	5	6	4	5																		
○ We	b Pa	age	UF	RL(s	3):	Р	leas	se p	rov	ide	spe	cifi	c a	ddro	ess '	whe	ere	SW	PPI	Ps c	can	be a	acce	sse	d -	not	hoi	ne 1	pag	e.	
	URL	-						1			I																	1	. 0		
																														=	
		_																						_				_	_	$\dashv$	
	URL																														
																													=	=	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

TOWN OF GUILDERLAND Name of MS4/Coalition

## 7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

ALL OF THE TOWNS CONSTRUCTION SITES ARE MONITORED AND RECORDS ARE KEPT FOR REVIEW AND FOLLOW UPS.

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

WE HAVE A GOOD SYSTEM FOR FOLLOWING UP ON CONSTRUCTION SITE ACTIVITIES AND ARE ABLE TO KEEP CONTROL THEM. WE KEEP OPEN DIALOG WITH BUILDERS AND DEC THAT HELPS US KEEP SITES IN GOOD ORDER.

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  $\bigcirc$  No

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

• Yes  $\bigcirc$  No

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

WE HAVE A RELIABLE SYSTEM IN PLACE SO CONSTRUCTION SITES ARE MONITORED BY TOWN. ALL RECORDS ARE KEPT ON SITE FOR FOLLOW UP.



2

## **This report is being submitted for the reporting period ending March 9**, 2 0 1 5

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

SPDES ID

ΝY

R 2

Α

2 1 1

0

Name of MS4/Coalition TOWN OF GUILDERLAND

## Minimum Control Measure 5. Post-Construction Stormwater Management

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. 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			
$\bigcirc$ Filter Systems			
$\bigcirc$ Infiltration Basins			
• Open Channels	2	2	1
• Ponds	1 3	1 3	1
$\bigcirc$ Wetlands			
$\bigcirc$ Other			

- 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?
- Building Codes
   Municipal Comprehensive Plans

○ Overlay Districts ○ Open Space Preservation Program

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

1															

#### This report is being submitted for the reporting period ending March 9, 2 5 0 1

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

TOWN OF GUILDERLAND Name of MS4/Coalition

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

○ Yes No

No

%

○ Yes

○ Yes

2 1 1

Α

0

SPDES ID

Ν Υ R 2

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

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? • No

4d. How many stormwater management practices have been implemented as part of this sy	ster	n in	thi	is
reporting period?			0	

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

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

TOWN OF GUILDERLAND Name of MS4/Coalition

#### 6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

TOWN HAS LOCAL LAWS ON CONSTRUCTION ACTIVITES AND PUSHES GREEN INFRASTRUCURE. REGULATIONS ARE IN PLACE TO OBTAINING BEST MANAGEMENT PRACTICES FOR TOWN TO BE A GREENER PLACE.

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

TOWN NEEDS TO BE A LITTLE BETTER ON POST CONSTRUCTION ACTIVITIES. WE DO A GOOD JOB OVERALL, BUT SHOULD IMPROVE POST CONSTRUCTION ACTIVITIES.

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?

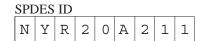
• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  No

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

TOWN NEEDS TO KEEP AN ON GOING SCHEDULE FOR ALL TOWN CONSTRUCTION SITES. I FEEL THIS IS ONE OF OUR STRONG SUITS SO WE WILL MAINTAIN WITH OUR PROGRAM.



SPE	DES	ID	
NT	37	П	2

## **This report is being submitted for the reporting period ending March 9**, 2 0 1 5

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

Name of MS4/Coalition TOWN OF GUILDERLAND



## 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.

			Self-Assess	sment
			<b>Operation/Activ</b>	<u>ity/Facility</u>
			performed withi	n the past 3
<b>Operation/Activity/Facility</b>	Addressed i	n SWMP?	<u>vears</u>	?
Street Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Bridge Maintenance	O Yes	• No	O Yes	• No
Winter Road Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Salt Storage	• Yes	○ No	• Yes	$\bigcirc$ No
Solid Waste Management	• Yes	○ No	• Yes	$\bigcirc$ No
New Municipal Construction and Land Disturbat	nce • Yes	○ No	• Yes	$\bigcirc$ No
Right of Way Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Marine Operations	····· OYes	• No	····· · Yes	• No
Hydrologic Habitat Modification	O Yes	• No	O Yes	• No
Parks and Open Space	• Yes	○ No	• Yes	$\bigcirc$ No
Municipal Building	• Yes	○ No	• Yes	$\bigcirc$ No
Stormwater System Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Vehicle and Fleet Maintenance			• Yes	$\bigcirc$ No
Other	····· OYes	• No	○ Yes	• No

## **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Г

2

1 1

Name of MS4/Coalition TOWN OF GUILDERLAND

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

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

- 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?

0 4

1 6

2 0 1 5

1 2

5 %

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition TOWN OF GUILDERLAND

#### 7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

THE TOWN WILL COMPLETE FACILITIE AUDITS. WE WILL ALSO CLEAN OT BASIN AND SWEEP STREETS REGULARY.

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

THE TOWN DID COMPLETE ALL FACILITY AUDITS THIS YEAR . THIS HELPS KEEP OUR PROGRAM ACCURATE AND INFORMED OF OUR FACILITIES.

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

(ex.: samples/participants/events)

1

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

• Yes  $\bigcirc$  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 TOWN WILL DO 3 FACLITYAUDITS THIS YEAR . WE WILL ALSO SWEEP 50% OF THE ROADS AND CLEAN 10% OF OUR BASINS. WE HAVE A GOOD PROGRAM IN PLACE TO KEEP ACCURATE UPDATES ON THESE ITEMS.

SPI	DES	ID						
Ν	Y	R	2	0	A	2	1	1

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

## Minimum Control Measure 1. Public Education and Outreach

1 3

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:

• Construction Sites	• Pesticide and Fertilizer Application
• General Stormwater Management Information	• Pet Waste Management
$\bigcirc$ Household Hazardous Waste Disposal	○ Recycling
O Illicit Discharge Detection and Elimination	Riparian Corridor Protection/Restoration
• Infrastructure Maintenance	O Trash Management
• Smart Growth	• Vehicle Washing
○ Storm Drain Marking	$\bigcirc$ Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	$\bigcirc$ Wetland Protection
<pre> Other: C o a l i t i o n W e b s i t e - W h a Other </pre>	O NonetYouCanDo
2. Specific audiences targeted during this reporting period:	
Public Employees     Contractors	
• Residential O Developers	

• Businesses • General Public

- $\bigcirc$  Restaurants  $\bigcirc$  Industries
- Other: O Agricultural

								-												
S	t	u	d	е	n	t	S													
Ot	her																			

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	PI	DES	ID				
N	ſ	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:

<ul> <li>Construction Site Operators Trained</li> </ul>	# Trained 3 5
○ Direct Mailings	# Mailings
• Kiosks or Other Displays	# Locations 8
• List-Serves	# In List 4 5 8
○ Mailing List	# In List
$\bigcirc$ Newspaper Ads or Articles	# Days Run
Public Events/Presentations	# Attendees 1 5 3
School Program	# Attendees 1 6 6
○ TV Spot/Program	# Days Run
• Printed Materials:	Total # Distributed642
Locations (e.g. libraries, town offices, kiosks)	

А	1	L	a		0	11	L		T.	a	<u>т</u>	T							
С	i	t	У	А	1	b	a	n	У	S	С	h	0	0	1	Ρ	r	0	g
Ν	0	r	m	a	n	S	k	i	1	1	С	r	е	е	k				
G	I		С	0	d	е	R	е	v	i	е	w	Ρ	r	0	g	r	a	m

• Other:

H o s t 4 C W P W e b c a s t s

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

UKI	-		_		_																									
W	w	w	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	а	n	У	С	0	u	n	t	У	•	0	r	g	

URL

UN	-															

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPL	JES	ID				
Ν	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.

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.

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

BMP 1-1 TAAW: 1) Map Set maps-updated 2010 urbanized area; not all formatted for use with TAAW, but will be, still important. ; 2) Collected Measurable Goals sheets; info somewhat useful for budgeting purposes. BMP 1-3 Website: To/From links corrected for all members; disconnected links common; important to monitor links frequently. GoogleAnalytics for website (2828 sessions/2015; 1637 visits (sessions?)-a 1191 increase. BMP 1-7 List Serve-no updates of officials.

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

		4	
_			

(ex.: samples/participants/events)

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

• Yes  $\bigcirc$  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).

Coalition has an updated Joint SWMP Plan titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some Coalition goals for MCM1 presented here. BMP 1-1 TAAW: add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, 1 new doc (plant care).

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

 O

## 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 | 3

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

○ Cleanup Events # Events											
• Comments on SWMP Received	# Comments					0					
• Community Hotlines	Phone #	<b>(</b> 518 <b>)</b> 447	-	5	6	4	5				
Phone # ( )	Phone #		- [								
Phone # ( )	Phone #		-								
Phone # ( )	Phone #		-								
Phone # ( ) – –	Phone #		-								
Phone # ( )	Phone #		- [								
$\bigcirc$ Community Meetings		# Attendees									
$\bigcirc$ Plantings		Sq. Ft.									
○ Storm Drain Markings		#Drains									
○ Stakeholder Meetings # Attendees											
• Volunteer Monitoring					3						
O Other:											

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

Program (SWMP) Plan provided?	• Yes			$\circ$ No	
List-Serve     # In List			4	5	8
O 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 5

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

SPL	DES	ID				
Ν	Y	R	2	0		

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

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

URI	_																														
W	W	W	•	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		
JRI				L		L			I		I		L				L	I				I	<u> </u>							L	L
																															F
																															F
ID I	<u> </u>					ļ			<u> </u>		<u> </u>		ļ				ļ	<u> </u>				<u> </u>									L
JRI																															
																															F
																															L
URI																															Γ
																														<u> </u>	
URI	Í																													<u> </u>	Г
URI	Í			I		I																									Γ
																														<u> </u>	
URI																															Γ
																														L	

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

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

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

	MS4/Coalition Office											Annual Report					• SWMP Plan				1	• Comments									
	Dep											~			-							_	-					~			
	S	t	0	r	m	W	a	t	е	r		С	0	а	1	i	t	i	0	n	-	A	1	b	а	n	У	С	n	t	У
	Add										~								-					-							
	1 City	1	2		S	t	a	t	е		S	t	r	е	е	t	1		R	0	0	m		7	2	0					
	A	1	b	a	n	У												[]	N	Y		Zip 1	2	2	0	7	_				
	Pho					1												Ľ						_	•		ļ				
	(	5	1	8	)	4	4	7	-	5	6	4	5																		
○ Lib	rary	7														C	A	nnu	al I	Rep	ort	C	S	WN	1P 1	Plar	ı	$\circ$	Con	nme	ents
	Ađo	lres	S																	r			~				_				
	City	/																Г				Zip					1				
																											-				
	Pho	ne			1	·			1 1	L.				1																	
	(				)				-																						
○ Oth	~**															C		0011	1 I	Rep	ort	C	1 61	WN	/D 1	Dlar	•	$\circ$ (	~ on	nma	nta
0 Otil	Ado	lres	s		_	_	_	_					_	_				iiiiu		кср	on		0	VV IV	11 1	1 1 1 1 1	1				
	City	/																				Zip					1				
																											-				
	Pho	ne																L									I				
	(				)				-																						
• Wel	D D	200	IIP	т·														nnıı	a1 1	Rep	ort		S	WN	1P 1	Plar	ı		Con	nme	ents
		_		L.	G	+		r	m	5.7	2	t		r	2	1	b	a	n	_							-				
	W	W	W	•	S	t	0	r	m	W	a	L	е	r	a		d	a	11	У	С	0	u	n	t	У	•	0	r	g	
	Please provide specific address of page where report can be accessed - not home page.																														
• eMa	ail																											• (	Con	nme	ents
	Ŋ	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			

This report is being submitted for the reporting period ending March 9, 2 0	1 5	
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		
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. $05/01/2$	2 0 1	1 5
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	5.b	
5.a. Was an Annual Report public meeting held in this reporting period?       O Y         If Yes, what was the date of the meeting?       If Yes, what was the date of the meeting?	les (	⊃ No
If No, is one planned?	les (	⊃ No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this reporting period?	Yes	• No
If No, is one planned for each?	(es (	• No
<b>6.</b> Were comments received during this reporting period? O Y If Yes, attach comments, responses and changes made to	(es	⊃ No

SWMP in response to comments to this report.

## This report is being submitted for the reporting period ending Marc

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

Stormwater Coalition of Albany County Name of MS4/Coalition

## 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.

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.

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

BMP 2-3 SWMP: SWMPv2 (2012 to 2015) updated. Completed tasks/goals noted, issues explained, title of document, Joint SWMP BMP Data Report. New SWMP needs to be developed for 2015 to 2017 and matched to NYSDEC interim MS4 Permit. Coalition Sub-Committee has met, some decisions: BMPs similar to previous SWMP, some modifications; individual goals for individual members; added MCM 8 Training. BMP 2-6 Clean Up Activities: "Thank You" dropped, no time.

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

(ex.: samples/participants/events)

1

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  No

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

As of May, 2015, Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Document includes new/modified BMPs applicable to all Coalition members; goals are specific to Coalition and individual MS4 members. Some goals for MCM2 presented here. BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

SPI	DES	ID				
Ν	Y	R	2	0		

ch 9,	2	0	1	5	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID Υ R 2 0

#

%

Ν

Stormwater Coalition of Albany County Name of MS4/Coalition

## Minimum Control Measure 3. Illicit Discharge Detection and Elimination

1 3

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

- On behalf of an individual MS4
- On behalf of a coalition
  - How many MS4s contributed to this report?
- 1. Enter the number and approx. percent of outfalls mapped:
- 2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?
- 3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

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

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 C	SPDES ID           County         N         Y         R         2         0											
3.b.What types of illicit discharges have	been found during this reporting period?											
$\bigcirc$ Broken Lines From Sanitary Sewer	$\bigcirc$ Industrial Connections											
○ Cross Connections	$\bigcirc$ Inflow/Infiltration											
○ Failing Septic Systems	$\bigcirc$ Pump Station Failure											
$\bigcirc$ Floor Drains Connected To Storm Sewers	○ Sanitary Sewer Overflows											
○ Illegal Dumping	○ Straight Pipe Sewer Discharges											
Other:	○ None											

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

No

O No

O No

÷

○ Yes

• Yes

• Yes

- **7. Has the storm sewershed mapping been completed in this reporting period?** If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

reporting period?

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

URI																											
Ρ	А	S	S	W	0	R	D		Р	R	0	Т	Е	С	Т	Е	D										
W	W	W	•	a	i	m	s	g	i	s	•	0	r	g	/	W	е	b	m	а	р	/					
*	*	R	е	IJ	t	r	i	С	t	е	d		А	С	С	е	S	S	*	*							
URI	URL																										

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

R 2

0

NY

Name of MS4/Coalition Stormwater Coalition of Albany County

#### 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.

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

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

BMP 3-1 Map Outfalls: no sample form provided to collect outfall location information for construction projects; instead individual MS4s may map post-construction outfalls, no form needed. BMP 3-2 AIMS: map layers updated, process to evaluate AIMS started; now a priority given server issues. BMP 3-4 Storm Sys/Sewershed Mapping: few requests from past year. BMP 3-5 ORI: kits re-stocked as needed; Coalition staff assist, as needed & funded.

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

(ex.: samples/participants/events)

4

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some goals for MCM3 presented here. BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM4 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  No

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

• Yes  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM5 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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		-	_	_	
Ν	Y	R	2	0			

#### Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?



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

			Self-Assess	<u>ment</u>
		<b>Opera</b>	tion/Activi	ity/Facility
		<u>perfor</u>	<u>med withir</u>	<u>n the past 3</u>
<b>Operation/Activity/Facility</b>	Addressed in	<u>n SWMP?</u>	<u>vears?</u>	<u> </u>
Street Maintenance	O Yes	○ No	O Yes	○ No
Bridge Maintenance	• Yes	○ No	O Yes	$\bigcirc$ No
Winter Road Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No
Salt Storage	O Yes	○ No	O Yes	$\bigcirc$ No
Solid Waste Management	O Yes	○ No	O Yes	$\bigcirc$ No
New Municipal Construction and Land Disturba	ance $\bigcirc$ Yes	○ No	○ Yes	$\bigcirc$ No
Right of Way Maintenance	O Yes	○ No	○ Yes	$\bigcirc$ No
Marine Operations	O Yes	○ No	$\odot$ Yes	$\bigcirc$ No
Hydrologic Habitat Modification	O Yes	○ No	O Yes	$\bigcirc$ No
Parks and Open Space	····· O Yes	○ No	$\odot$ Yes	$\bigcirc$ No
Municipal Building	o	○ No	⊖ Yes	$\bigcirc$ No
Stormwater System Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No
Vehicle and Fleet Maintenance		○ No	○ Yes	$\bigcirc$ No
Other	○ Yes	○ No	⊖ Yes	$\bigcirc$ No

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

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

SPDES ID

Y R 2

0

Ν

1 0

9

2 0 1 4

1 3 0

%

$\bigcirc$ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
$\bigcirc$ Streets Swept (Number of miles X Number of times swept)	# Miles	
$\bigcirc$ Catch Basins Inspected and Cleaned Where Necessary	#	
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	# Acres	
3. How many stormwater management trainings have been provided to	o municipa	l employees
during this reporting period?		1 1

- 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 5

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

SPL	DES	ID			_	
Ν	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.

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

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

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: Coalition provided Inventory and Assessment support to 3 Coalition members, as requested and funded. BMP 6-9 Staff Training: one elected official received Clean Water Act Basics training, not the road show as planned, however training materials were developed for future programs.

#### 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).

The Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No specific Coalition goals for MCM 6; instead Coalition staff as reflected in 2015 Coalition budget and requested by individual members, directly assist MS4s in implementing their individual MCM 6 goals. Training related Coalition goals (organize, host, fund) are described in SWMPv3 MCM 8 Train'g-Staff, Plan'g/Zon'g Bds, Other Muni Officials.

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

MCC form for period ending March 9, 2 0 1 5

_		SPE	DES	ID						
Name of MS4	Village of Menands	Ν	Y	R	2	0	A	1	4	4

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	С	0	a	1	i	t	i	0	n	0	f	А	1	b	a	n	У
С	0	u	n	t	У																					

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

MCC form for period ending March 9, 2 0 1

Name of MS4 Village of Menands

SPDES ID N Y R 2 0 A

1 4 4

5

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

Firs	t Na	ame					-	_								MI	_	Las	t Na	me	-	_			-			-	_	_	
М	е	g	a	n												М		G	r	е	n	i	е	r							
Title	e																														
Μ	а	У	0	r																											
Add	lres	S																												 	
2	5	0		В	r	0	а	d	W	а	У																				
City	/																			St	tate		Zip								
Μ	е	n	а	n	d	ន														ľ	1 7	Y	1	2	2	0	4	-			
eMa	ail																														
v	i	1	1	а	g	е	0	f	m	е	n	а	n	d	ន	@	h	0	t	m	а	i	1	•	С	0	m				
Pho	ne																	Cou	inty												
(	5	1	8	)	4	3	4	-	2	9	2	2						A	1	b	a	n	У								

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

MCC form for period ending March 9, 2 0 1

Name of MS4 Village of Menands

SPDES ID N Y R 2 0 A

1 4 4

5

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

Firs	t Na	ame			-					-		-	-			MI	_	Las	t Na	ame	_	_	_					-	-		-	
Ρ	a	u	1													С		R	е	u	S	S										
Title	e																															
Е	x	е	С	u	t	i	v	е		Α	ន	ß	i	ន	t	а	n	t		t	0		t	h	е		М	а	У	0	r	
Add	lres	S																														
2	5	0		В	r	0	а	d	w	а	У																					
City	7											-			_					S	tate		Zip	)								
М	е	n	а	n	d	S														1	1	Y	1	2	2	0	4	-				
eMa	uil											-				-												-				
v	i	1	1	a	g	е	0	f	m	е	n	a	n	d	ន	р	a	u	1	@	h	0	t	m	a	i	1	•	С	0	m	
Pho	ne																	Cou	inty													
(	5	1	8	)	4	3	4	-	2	9	2	2						A	1	b	a	n	У									

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

MCC form for period ending March 9, 2 0 1 5

Name of MS4 Village of Menands

SPDES ID

 N
 Y
 R
 2
 0
 A
 1
 4
 4

#### Section 3 - Partner Information

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

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	ion N	Jam	e																										
S	t	0	r	m	w	а	t	е	r		С	0	a	1	i	t	i	0	n		0	f		A	1	b	a	n	У			
Par	tner	/Co	alit	ionl	Nan	ne (c	con't	.)		•													•	SPI	DES	Pa	rtne	r ID	- If	app	olica	ble
C	0	u	n	t	У																			Ν	Y	R	2	0				
Ad	dres	5																													_	
1	1	2		S	t	a	t	е		S	t	r	e	e	t	,		R	0	0	m		7	2	0							
Cit	y									•							•			St	tate		Zip		•	•		•	•			
A	1	b	a	n	У															N	17		1	2	2	0	7	-				
eM	ail																															
n	h	е	i	n	z	е	n	@	a	1	b	а	n	У	С	0	u	n	t	У	•	С	0	m								
Pho	one																		T a	aa11	D	di		1 ~ ~ ~		ant			dan			
(	5	1	8	)	4	4	7	-	5	6	4	5								gall th G	•		-	-					Ye		0	No
W/	hat	tac	ko/1	rocr	on	cih	iliti	00	are	sh	nec	1	ith	thia	n	ortn	or		г <b>Т</b> /	1M	1 S.	cho		Dro	ara	me	or	Mı	11tir	ماد	Та	sks)?
••	nai	ias.	K0/ 1	lest	5011	.510	11111	CS I	are	5110	ucc	1 11	1111	um	, pe	11 111		(U.g	5• IV.	1111	1.0	cno	01	110	gra		UI	IVIC	*iriŀ	ЛС	1 ac	5K5):
	MM	1	Ε	d	u	С	a	t	i	0	n		М	a	t	е	r	i	a	1		&		Р	r	0	g	r	a	m	S	
			_	T.7	ъл	P	/	T.7	-7	<b>T</b> 7	-	/	T.7		1.						P		1.	-				-				
	MM	2	S	W	Μ	Ρ	/	W	A	V	Ε	/	W	е	b	S	i	t	е	-	Ρ	u	b	1	i	С		I	n	р	u	t
	MM	3	А	I	М	S	-	0	R	I		A	s	s	t	-	I	D	D	Е		Р	r	0	С	e	d	u	r	е	s	
			-					.7			_			_																		
	MM	4	Ρ	r	0	С	е	d	u	r	е	ទ		S	u	р	р	0	r	t												
	MM	5	Ρ	r	0	С	е	d	u	r	е	ទ		S	u	р	р	0	r	t												
	MM	6	Т	r	a	i	n	1	g	_	F	a	С	i	1	i	t	У		A	u	d	i	t		S	u	р	р	0	r	t
																		1			_							Ľ	L-	_		_

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 Certificat	ion	$(\mathbf{M})$	CC	<b>!) I</b>	For	m					
	MCC form for period ending March 9	, 2	0	1	5							
				SPI	DES	ID						
Name of MS4	Village of Menands			Ν	Y	R	2	0	A	1	4	4

#### Section 4 - Certification Statement

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

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

First Name	MI	Last Nam	e						
Megan	М	G r e	e n	i e	r				
Title (Clearly print title of individual signing report)									
Mayor									
Signature				Dat	e /	/	,		

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	5	
This report is being submitted for the reporting period chang march >,				- U	

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

SPDES ID Y R 2

0 A

1 4 4

No

N

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. ○ Yes

If Yes, choose one of the following

- $\bigcirc$  Report(s) attached to the annual report
- $\bigcirc$  Web Page(s) where report(s) is/are provided below

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

URL			 												
URL	, ,														
URI															
URL	_														

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Menands

 SPDES ID

 N
 Y
 R
 2
 0
 A
 1
 4
 4

#### 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

Other

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		$\bigcirc$ Pesticide and Fertilizer Application											
• General Stormwater	Management Information	• Pet Waste Management											
○ Household Hazardou	as Waste Disposal	• Recycling											
○ Illicit Discharge Det	ection and Elimination	O Riparian Corridor Protection/Restoration											
○ Infrastructure Maint	tenance	○ Trash Management											
$\bigcirc$ Smart Growth		• Vehicle Washing											
○ Storm Drain Markin	g	$\bigcirc$ Water Conservation											
• Green Infrastructure	/Better Site Design/Low Impact Development	$\bigcirc$ Wetland Protection											
$\bigcirc$ Other:		○ None											
Other													
	es targeted during this reporting period:												
Public Employees	$\bigcirc$ Contractors												
Residential	$\bigcirc$ Developers												
<ul> <li>Businesses</li> </ul>	• General Public												
○ Restaurants	$\bigcirc$ Industries												
O Other:	○ Agricultural												

**This report is being submitted for the reporting period ending March 9**, 2 1 0 5 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition	Village of Menands
-----------------------	--------------------

SPI	DES	ID						
Ν	Y	R	2	0	A	1	4	4

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

$\bigcirc$ Co	nstr	struction Site Operators Trained																Ŧ	# Tr	aine	ed										
○ Dir	ect	Ma	ailir	ıgs																			#	Ma	iling	gs					
• Kio	osks	or	Ot	her l	Disp	olay	S																#1	Loca	atio	ns					1
○ Lis	t-Se	erve	es																					# I	n Li	st					
• Ma	ilin	g L	ist																					# I	n Li	st					
○ Ne	wsp	ape	er A	ds o	or A	rtic	eles																#]	Day	s Rı	ın					
• Pul	olic	Еv	vent	s/Pr	eser	ntati	ions	5															# /	Atte	nde	es					8
○ Scł	School Program																	# /	Atte	nde	es										
○ TV	TV Spot/Program													# Days Run																	
○ Pri																					То	otal	# D	istri	bute	ed					
	Loc	atio	ns (e	e.g. li	ibrar	ies,	tow	1 off	ices,	, kio	sks)																				
○ Oth	her:		•																												
○ We		Page	e:		ovid		peci	fic	weł	b ad	ldre	sse	S - 1	not	hor	ne p	age	e. C	Con	tinı	ie o	n ne	ext	pag	e if	ado	diti	onal	l spa	ace	is
			T																												
			T																												
UR	T			_		I	I	I		I			I	I	I	I	L		I	I	1						I	I		I	]
	+		+																												

L

#### **MS4 Annual Report Form**

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Village of Menands Name of MS4/Coalition

SPE	DES	ID							
Ν	Y	R	2	0	А	1	4	4	

W URL		Pag	e cor	1't.:	Provide specific web addresses - not home page.																					
																										Τ
																										t
																									$\vdash$	t
URL																										1
																										T
																									<u> </u>	Ī
				+																					<u> </u>	Ŧ
																										1
URL	Í																									T
																									$\vdash$	Ť
																									-	ļ
URL																										T
																									-	Ŧ
																								<u> </u>	<u> </u>	Ţ
URL																										Т
					-		-																	$\vdash$	-	ļ
																									<u> </u>	+
<u> </u>																										
URL							1																			Т
				_																					L	ļ
URL						-									1											т
																										Í

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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 1 4 4

Name of MS4/Coalition Village of Menands

#### 4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

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

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

The Village received about ten phone calls in response to this effort.

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

(ex.: samples/participants/events)

• Yes

• Yes

1

 $\bigcirc$  No

 $\bigcirc$  No

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

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).

By March 9, 2016, the Village of Menands will continue to identify sources of pollutants for the targeted audiences. This will be useful for education and program management.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

1 4

4

Ν

Name of MS4/Coalition	Village of Menands	
Name of MIS4/Coalition		

#### Minimum Control Measure 2. Public Involvement/Participation

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. 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	# Ev	ents			
$\bigcirc$ Comments on SWMP Received	#Comm	ents			
$\bigcirc$ Community Hotlines	Phone # ( )	-			
Phone # ( )	Phone # ( )	-			
Phone # ( )	Phone # ( )	-			
Phone # ( )	Phone # ( )	-			
Phone # ( )	Phone # ( )	-			
Phone # ( )	Phone # ( )	-			
• Community Meetings	# Attend	dees		1	5
○ Plantings	Sq	. Ft.			
$\bigcirc$ Storm Drain Markings	#Dr	ains			
$\bigcirc$ Stakeholder Meetings	# Attend	dees			
○ Volunteer Monitoring	# Ev	ents			
Other:					

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

Program (SWMP) Plan provided?	• Yes	$\bigcirc$ No
○ List-Serve # In List		
O Newspaper Advertising # Days Run		
○ TV/Radio Notices # Days Run		
• Other: C o m m u n i t y N e w s l e t t e r		

 $\bigcirc$  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 5

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

Name of MS4/Coalition Village of Menands

SPE	DES	ID						
Ν	Y	R	2	0	А	1	4	4

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

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

UR	L		 				 		 						 	 	 		 			
	 r	1							<u> </u>			I	<u> </u>							I		
UR																						
UR	L																				 	
UR	L.																					
UR																						
UR	L																					
UR	r		 I				 -	I	 		I											

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Menands

SPI	DES	ID						
Ν	Y	R	2	0	A	1	4	4

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

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

UR	<u> </u>			 			 	 		 	 				 	
URI																
UR	, I I															
URI																
URI																
UR																
UR	Ľ.,															

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Village of Menands

SPDES ID N Y R 2 0 A 1 4 4

#### 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	itioı	n C	Offic	e											A	nnu	al l	Rep	ort		S	WN	1P 1	Plar	ı	$\circ$ (	Con	nme	ents
	Dep		nen																												
	V	i	1	1	a	g	e		0	f	f	i	С	е																	
	Add	lres	s																												
	2	5	0		В	r	0	a	d	W	a	У																			
	City	/																_				Zip							,,		
	Μ	е	n	a	n	d	S											1	N.	Y		1	2	2	0	4	-				
	Pho	ne			1.				1	r				1																	
	(	5	1	8	)	4	3	4	-	2	9	2	2																		
○ Lib	rary Ado	lres	s													C	A	nnu	al l	Rep	ort	(	S	WN	1P I	Plar	1	0	Con	nme	ents
	City	/																				Zip									
																											_				
	Pho	ne						I		I																					
	(				)				-																						
									J					J																	
$\bigcirc$ Oth	er Add	1														C	A	nnu	al l	Rep	ort	(	S	WN	1P 1	Plar	1	$\circ$ (	Con	nme	ents
	Aac	ires	s																												
	Cite																					7.									
	City	/																Г				Zip									
																											-				
	Pho	ne							]					]																	
					)				-					]																	
$\cap$ Wei	- D.			т.												C	۸ (	nnu	م 1 1	Pon	ort	C	רא בי	(X/N	1D 1	Plar	,	$\cap$	7.on	nme	nte
○ Wel		age	UK															iiiiu		 				VV 1V	11 1	141	1				ins
																															=
	Dla						::		44		f								. 1						1						
$\sim 10$		ease	e pr	OVI	lae	spe		ic a	.001	ess	01	pag	gev	whe	ere	rep	ort	car	1 De	e ac	ces	sec	l - I	101	nor	ne	pag		~		
⊖eMa	a11													,							1							0	L'on	nme	ents

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5 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 1 4 4 Village Of Menands 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. 4.b. For how many days was/will this report be posted? If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b.. 5.a. Was an Annual Report public meeting held in this reporting period? • Yes ○ No If Yes, what was the date of the meeting? 2 6 1 6 0 1 4 0 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 $\bigcirc$ No If No, is one planned for each? ○ Yes $\bigcirc$ No ○ 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.

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Village of Menands

#### 7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The Village will continue to develop SWMP measurable goals to improve Public Involvement and Participation.

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

There has been an increase in the number of inquiries about the Program as well as hits on the Menands portion of the Joint Annual Report on the Stormwater Coalition website.

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

(ex.: samples/participants/events)

1 2

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

• Yes  $\bigcirc$  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).

By March 9, 2016, the Village will develop procedures for tracking stormwater queries.

SPE	DES	ID							
Ν	Y	R	2	0	A	1	4	4	

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

SPDES ID

3 3 #

0 A

1 4 4

0 %

1 0

NYR2

Name of MS4/Coalition	Village Of Menands
-----------------------	--------------------

#### 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
- $\bigcirc$  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?

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

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 Village of Menands	N Y R 2 0 A 1 4 4
3.b.What types of illicit discharges have	e been found during this reporting period?
$\bigcirc$ Broken Lines From Sanitary Sewer	$\bigcirc$ Industrial Connections
$\bigcirc$ Cross Connections	$\bigcirc$ Inflow/Infiltration
$\bigcirc$ Failing Septic Systems	$\bigcirc$ Pump Station Failure
$\odot$ Floor Drains Connected To Storm Sewers	$\bigcirc$ Sanitary Sewer Overflows
○ Illegal Dumping	$\bigcirc$ 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 be	en confirmed during this reporting period?
( How mony illigit dischanges/illegel a	oppositions have been eliminated during this reporting

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

• Yes

○ Yes

○ Yes

 $\bigcirc$  No

No

• No

%

- **7. Has the storm sewershed mapping been completed in this reporting period?** If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

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

UKI	-																
URI					,												

#### This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 5 \end{vmatrix}$

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	Village of Menands		Ν	Y	R	2	0	А	1	4

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

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

	1		1	1														
UR	L	•																
UR	L		•															 
UR	L	•																
UR	L																	
Ē																		

- 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 No NT

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

5 0 %

4

#### 5 This report is being submitted for the reporting period ending Mar

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

Village Of Menands Name of MS4/Coalition

#### 12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

The Village continued its efforts to verify all outfalls.

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

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

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

1 8 (ex.: samples/participants/events)

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  No

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

The Village of Menands Stormwater Program Coordinator will develop written procedures for IDDE compliance by March 9, 2016.



				_
-ch 9,	2	0	1	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Village of Menands

SPI	DES	ID						
Ν	Y	R	2	0	A	1	4	4

1

0

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

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?

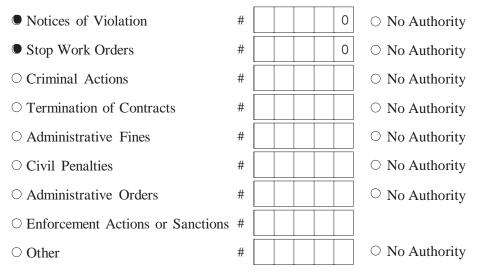
- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory<br/>mechanism that provides equivalent protection to the NYS SPDES General Permit for<br/>Stormwater Discharges from Construction Activities?• Yes• No
- 1b. Has each Town, City and/or Village contributing to this 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
   NT
- 2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No
- 3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?
- **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 5

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

Name of MS4/Coalition Village of Menands

# SPDES ID N Y R 2 0 A 1 4 4

1 0 0 %

0 %

0

### 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
- $\bigcirc$  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?  $\odot$  NT
- 4. What percent of active construction sites were inspected more than once?  $\bigcirc$  NT
- 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? O Yes 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 5

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

Name of MS4/Coalition Village of Menands

N

SPE	DES	ID						
Ν	Y	R	2	0	А	1	4	4

#### 6. con't.:

Submit additional pages as needed.

MS4/Coalition Office
 Department

	Dep	artı	nen	t	_	-	_	_		-				_		_	-		-			_			-		-				
	V	i	1	1	a	g	е		0	f	f	i	С	е																	
	Add	lres	s																												
	2	5	0		В	r	0	a	d	w	a	У																			
	City	/														,				_		Zip					1				
	Μ	е	n	a	n	d	ន											N	I Y	7		1	2	2	0	4	-				
	Pho	ne																													
	(	5	1	8	)	4	3	4	-	2	9	2	2																		
○ Lib	rary	7																													
	Add		s																												
	City	,																				Zip									
																											-				
	Pho	ne								_																					
	(				)				-																						
○ Oth	ner																														
	Add	lres	s																												
	City	7																				Zip									
																											-				
	Pho	ne																	_								1				
	(				)				-																						
○ We	b Pa	age	UR	RL(s	5):	Р	leas	se p	rov	ide	spe	cifi	c a	ddro	ess	whe	ere	SW	PPI	Ps c	an	be a	icce	esse	d -	not	hoi	me	pag	e.	
	URL	-		``	<i></i>			1			I																	,	. 0		
	URL																														

#### This report is being submitted for the reporting period ending Mar

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

Name of MS4/Coalition

#### 7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

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

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

The Village has developed eight updated BMPs to improve our SWMP.

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

(ex.: samples/participants/events)

1

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  No

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

By March 9, 2016, the Village of Menands Stormwater Program Coordinator will implement all eight BMPs mentioned in Section B.

SF	DES	5 ID		-	-	-	-	-
N	r Y	R	2	0	А	1	4	4

-ch 9,	2	0	1	5	

#### This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \\ 1 & 5 \end{vmatrix}$

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

Name of MS4/Coalition Village Of Menands

# SPDES ID N Y R 2 0 A 1 4 4

### 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
• Alternative Practices	0	0	0
• Filter Systems	0	0	0
Infiltration Basins	0	0	0
• Open Channels	0	0	0
Ponds	0	0	0
• Wetlands	0	0	0
• Other	0	0	0

- 2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance? O Yes • No
- **3.** What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?
- Building Codes O Municipal Comprehensive Plans

○ Overlay Districts ○ Open Space Preservation Program

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

00		• •																			
S	5	i	t	е	Р	1	a	n	R	е	v	i	е	W							

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

			SPD	ES I	D						
Name of MS4/Coalition	Village of Menands		Ν	ΥI	R	2	0	A	1	4	4
4a. Are the MS4s co	ntributing to this report involved in a regional	/watershe	ed w	ide ]	pla	nni	0		ort? s		No

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

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

○ Yes

 $\bigcirc$  Yes

• No

• No

%

4d. How many stormwater management practices have been implemented as part of this sy	sten	ı in	thi	S
reporting period?			0	

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

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Village Of Menands

#### 6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

The Village completed all necessary inspections for the one project, a new warehouse at 50 Simmons Lane, that was completed in November, 2014.

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

The project was completed on schedule and all necessary documentation was provided to the Village.

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

(ex.: samples/participants/events)

5

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

• Yes  $\bigcirc$  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 Village expects to have three major construction projects underway in 2015. All of these will involve land disturbance of over one acre. We will continue to refine our BMPs to implement this goal.



#### **This report is being submitted for the reporting period ending March 9**, 2 0 1 5

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

Name of MS4/Coalition Village of Menands

SPL	DES	ID			-		-	
Ν	Y	R	2	0	А	1	4	4

#### 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.

			Self-Assess	ment
			<b>Operation/Activi</b>	ty/Facility
			performed within	n the past 3
<b>Operation/Activity/Facility</b>	Addressed i	n SWMP?	<u>vears?</u>	•
Street Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Bridge Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No
Winter Road Maintenance		○ No	• Yes	$\bigcirc$ No
Salt Storage	• Yes	○ No	• Yes	$\bigcirc$ No
Solid Waste Management	O Yes	○ No	O Yes	$\bigcirc$ No
New Municipal Construction and Land Disturban	nce $\bigcirc$ Yes	○ No	• Yes	$\bigcirc$ No
Right of Way Maintenance	O Yes	○ No	• Yes	$\bigcirc$ No
Marine Operations	• Yes	○ No	• Yes	$\bigcirc$ No
Hydrologic Habitat Modification	O Yes	○ No	····· · Yes	$\bigcirc$ No
Parks and Open Space	• Yes	○ No	• Yes	$\bigcirc$ No
Municipal Building		○ No	• Yes	$\bigcirc$ No
Stormwater System Maintenance		○ No	• Yes	$\bigcirc$ No
Vehicle and Fleet Maintenance		○ No	• Yes	$\bigcirc$ No
Other	• Yes	○ No	○ Yes	$\bigcirc$ No

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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	Village of Menands	Ν	Y	R	2	0	А	1	4	4

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

$\bigcirc$ Parking Lots Swept (Number of acres X Number of times swept)	# Acres								
• Streets Swept (Number of miles X Number of times swept)	# Miles		2	4					
• Catch Basins Inspected and Cleaned Where Necessary	#		2	0					
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>			1						
O Phosphorus Applied In Chemical Fertilizer	# Lbs.								
O Nitrogen Applied In Chemical Fertilizer	# Lbs.								
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	# Acres		•						
3. How many stormwater management trainings have been provided t during this reporting period?	o municipa	l empl	oyees	0					
4. What was the date of the last training?	/	/							
5. How many municipal employees have been trained in this reporting	period?			0					
6. What percent of municipal employees in relevant positions and departments reconstormwater management training?									

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Village of Menands

#### 7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

The Village has functionally completed an inventory of municipal operations and facilities. We can now schedule routine periodic assessments.

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

See A above.

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

(ex.: samples/participants/events)

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

• Yes  $\bigcirc$  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 Village has experienced about a 50% turnover in DPW staff, including the loss of our current foreman due to a serious injury. We expect to hire a new foreman by May 1 and then we will schedule the necessary training for all program involved personnel.

SPI	DES	ID	-		-			
Ν	Y	R	2	0	А	1	4	4

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

#### Minimum Control Measure 1. Public Education and Outreach

1 3

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:

• Construction Sites	• Pesticide and Fertilizer Application								
• General Stormwater Management Information	• Pet Waste Management								
$\bigcirc$ Household Hazardous Waste Disposal	$\bigcirc$ Recycling								
O Illicit Discharge Detection and Elimination	Riparian Corridor Protection/Restoration								
• Infrastructure Maintenance	○ Trash Management								
• Smart Growth	• Vehicle Washing								
○ Storm Drain Marking	$\bigcirc$ Water Conservation								
O Green Infrastructure/Better Site Design/Low Impact Development	$\bigcirc$ Wetland Protection								
<pre> Other: C o a l i t i o n W e b s i t e - W h a Other </pre>	O NonetYouCanDo								
2. Specific audiences targeted during this reporting period:									
Public Employees     Contractors									
• Residential O Developers									

• Businesses • General Public

- $\bigcirc$  Restaurants  $\bigcirc$  Industries
- Other: O Agricultural

								-												
S	t	u	d	е	n	t	ន													
Ot	her																			

## This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	PI	DES	ID				
N	ſ	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:

<ul> <li>Construction Site Operators Trained</li> </ul>	# Trained 3 5
○ Direct Mailings	# Mailings
• Kiosks or Other Displays	# Locations 8
• List-Serves	# In List 4 5 8
○ Mailing List	# In List
$\bigcirc$ Newspaper Ads or Articles	# Days Run
Public Events/Presentations	# Attendees 1 5 3
School Program	# Attendees 1 6 6
○ TV Spot/Program	# Days Run
• Printed Materials:	Total # Distributed642
Locations (e.g. libraries, town offices, kiosks)	

А	1	L	a		0	11	L		T.	a	<u>т</u>	T							
С	i	t	У	А	1	b	a	n	У	S	С	h	0	0	1	Ρ	r	0	g
Ν	0	r	m	a	n	S	k	i	1	1	С	r	е	е	k				
G	I		С	0	d	е	R	е	v	i	е	w	Ρ	r	0	g	r	a	m

• Other:

H o s t 4 C W P W e b c a s t s

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

UKI	-		_		_																									
W	w	w	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	а	n	У	С	0	u	n	t	У	•	0	r	g	

URL

UN	-															

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPL	JES	ID				
Ν	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.

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.

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

BMP 1-1 TAAW: 1) Map Set maps-updated 2010 urbanized area; not all formatted for use with TAAW, but will be, still important. ; 2) Collected Measurable Goals sheets; info somewhat useful for budgeting purposes. BMP 1-3 Website: To/From links corrected for all members; disconnected links common; important to monitor links frequently. GoogleAnalytics for website (2828 sessions/2015; 1637 visits (sessions?)-a 1191 increase. BMP 1-7 List Serve-no updates of officials.

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

		4	
_			

(ex.: samples/participants/events)

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

• Yes  $\bigcirc$  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).

Coalition has an updated Joint SWMP Plan titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some Coalition goals for MCM1 presented here. BMP 1-1 TAAW: add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, 1 new doc (plant care).

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

 O

# 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 3

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

○ Cleanup Events		# Events					
• Comments on SWMP Received		# Comments					0
• Community Hotlines	Phone #	<b>(</b> 518 <b>)</b> 447	-	5	6	4	5
Phone # ( )	Phone #		- [				
Phone # ( )	Phone #		-				
Phone # ( )	Phone #		-				
Phone # ( ) – –	Phone #		-				
Phone # ( )	Phone #		- [				
$\bigcirc$ Community Meetings		# Attendees					
$\bigcirc$ Plantings		Sq. Ft.					
○ Storm Drain Markings		#Drains					
$\bigcirc$ Stakeholder Meetings		# Attendees					
• Volunteer Monitoring		# Events					3
O Other:							

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

Program (SWMP) Plan provided?	۲	Ye	es	0	No
List-Serve     # In List			4	5	8
O 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 5

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

SPL	DES	ID				
Ν	Y	R	2	0		

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

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

URI	_																														
W	W	W	•	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		
JRI				L		L			I		I		L				L	I				I	<u> </u>							L	L
																															F
																															F
ID I	<u> </u>			ļ		ļ			<u> </u>		<u> </u>		ļ				ļ	<u> </u>				<u> </u>									L
JRI																															
																															F
																															L
URI																															Γ
																														<u> </u>	
URI	Í																													<u> </u>	Г
URI	Í			I		I																									Γ
URI																															Γ
																														L	

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

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

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

	MS4/Coalition Office										Annual Report							SWMP Plan					• Comments								
	Dep											~			-							_	-					~			
	S	t	0	r	m	W	a	t	е	r		С	0	а	1	i	t	i	0	n	-	A	1	b	а	n	У	С	n	t	У
	Add										~								-					-							
	1 City	1	2		S	t	a	t	е		S	t	r	е	е	t	1		R	0	0	m		7	2	0					
	A	1	b	a	n	У												1	N	Y		Zip 1	2	2	0	7	_				
	Pho					1												Ľ						_	•		ļ				
	(	5	1	8	)	4	4	7	-	5	6	4	5																		
○ Lib	rary	7														C	A	nnu	al I	Rep	ort	C	S	WN	1P 1	Plar	ı	$\circ$	Con	nme	ents
	Ađo	lres	S																	r			~				_				
	City	/																Г				Zip					1				
																											-				
	Pho	ne			1	·			1 1	L.				1																	
	(				)				-																						
○ Oth	~**															C		0011	1 I	Don	ort	C	1 61	an.	/D 1	Dlar	•	$\cap$	~ on	nma	nta
0 Otil	○ Other O Annual Report O SWMP Plan O Comments																														
	City	/																				Zip					1				
																											-				
	Pho	ne																L									I				
	(				)				-																						
• Wel	D D	200	IIP	τ.														nnıı	a1 1	Rep	ort		S	WN	1P 1	Plar	ı		Con	nme	ents
		_		L.	G	+		r	m	5.7	2	t		r	2	1	b	a	n	_							-				
	W	W	W	•	S	t	0	r	m	W	a	L	е	r	a		d	a	11	У	С	0	u	n	t	У	•	0	r	g	
		ease	e pr	ovi	de	spe	cif	ic a	ddr	ess	of	pag	ge v	whe	ere	rep	ort	car	ı be	e ac	ces	sed	l - r	ot	hor	ne	pag				
• eMa	ail																											• (	Con	nme	ents
	Ŋ	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			

This report is being submitted for the reporting period ending March 9, 2 0	1 5	
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		
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. $05/01/2$	2 0 1	1 5
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	5.b	
5.a. Was an Annual Report public meeting held in this reporting period?       O Y         If Yes, what was the date of the meeting?       If Yes, what was the date of the meeting?	les (	⊃ No
If No, is one planned?	les (	⊃ No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this reporting period?	Yes	• No
If No, is one planned for each?	(es (	• No
<b>6.</b> Were comments received during this reporting period? O Y If Yes, attach comments, responses and changes made to	(es	⊃ No

SWMP in response to comments to this report.

### This report is being submitted for the reporting period ending Marc

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

Stormwater Coalition of Albany County Name of MS4/Coalition

### 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.

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.

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

BMP 2-3 SWMP: SWMPv2 (2012 to 2015) updated. Completed tasks/goals noted, issues explained, title of document, Joint SWMP BMP Data Report. New SWMP needs to be developed for 2015 to 2017 and matched to NYSDEC interim MS4 Permit. Coalition Sub-Committee has met, some decisions: BMPs similar to previous SWMP, some modifications; individual goals for individual members; added MCM 8 Training. BMP 2-6 Clean Up Activities: "Thank You" dropped, no time.

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

(ex.: samples/participants/events)

1

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  $\bigcirc$  No

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

As of May, 2015, Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Document includes new/modified BMPs applicable to all Coalition members; goals are specific to Coalition and individual MS4 members. Some goals for MCM2 presented here. BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

SPI	DES	ID				
Ν	Y	R	2	0		

ch 9,	2	0	1	5	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID Υ R 2 0

#

%

Ν

Stormwater Coalition of Albany County Name of MS4/Coalition

# Minimum Control Measure 3. Illicit Discharge Detection and Elimination

1 3

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

- On behalf of an individual MS4
- On behalf of a coalition
  - How many MS4s contributed to this report?
- 1. Enter the number and approx. percent of outfalls mapped:
- 2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?
- 3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

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

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 C	County SPDES ID											
3.b.What types of illicit discharges have	been found during this reporting period?											
$\bigcirc$ Broken Lines From Sanitary Sewer	$\bigcirc$ Industrial Connections											
○ Cross Connections	$\bigcirc$ Inflow/Infiltration											
○ Failing Septic Systems	○ Pump Station Failure											
$\bigcirc$ Floor Drains Connected To Storm Sewers	$\bigcirc$ Sanitary Sewer Overflows											
○ Illegal Dumping	○ Straight Pipe Sewer Discharges											
Other:	○ None											

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

No

O No

O No

÷

○ Yes

• Yes

• Yes

- **7. Has the storm sewershed mapping been completed in this reporting period?** If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

reporting period?

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

URI																										 	
Ρ	А	S	S	W	0	R	D		Р	R	0	Т	Е	С	Т	Е	D										
W	w	W	•	a	i	m	S	g	i	s	•	0	r	g	/	W	е	b	m	а	р	/					
*	*	R	е	ន	t	r	i	С	t	е	d		А	С	С	е	S	s	*	*							
URI																											

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

R 2

0

NY

Name of MS4/Coalition Stormwater Coalition of Albany County

#### 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.

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

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

BMP 3-1 Map Outfalls: no sample form provided to collect outfall location information for construction projects; instead individual MS4s may map post-construction outfalls, no form needed. BMP 3-2 AIMS: map layers updated, process to evaluate AIMS started; now a priority given server issues. BMP 3-4 Storm Sys/Sewershed Mapping: few requests from past year. BMP 3-5 ORI: kits re-stocked as needed; Coalition staff assist, as needed & funded.

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

(ex.: samples/participants/events)

4

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some goals for MCM3 presented here. BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM4 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM5 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	SPDES ID											
Ν	Y	R	2	0								

# Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?



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

			Self-Assessment						
		<b>Opera</b>	tion/Activi	ity/Facility					
		<u>perfor</u>	<u>med withir</u>	<u>n the past 3</u>					
<b>Operation/Activity/Facility</b>	Addressed in	<u>n SWMP?</u>	<u>vears?</u>	<u> </u>					
Street Maintenance	O Yes	○ No	O Yes	○ No					
Bridge Maintenance	• Yes	○ No	O Yes	$\bigcirc$ No					
Winter Road Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No					
Salt Storage	O Yes	○ No	O Yes	$\bigcirc$ No					
Solid Waste Management	O Yes	○ No	O Yes	$\bigcirc$ No					
New Municipal Construction and Land Disturba	ance $\bigcirc$ Yes	○ No	○ Yes	$\bigcirc$ No					
Right of Way Maintenance	O Yes	○ No	○ Yes	$\bigcirc$ No					
Marine Operations	O Yes	○ No	$\odot$ Yes	$\bigcirc$ No					
Hydrologic Habitat Modification	O Yes	○ No	O Yes	$\bigcirc$ No					
Parks and Open Space	····· O Yes	○ No	$\odot$ Yes	$\bigcirc$ No					
Municipal Building	o	○ No	⊖ Yes	$\bigcirc$ No					
Stormwater System Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No					
Vehicle and Fleet Maintenance		○ No	○ Yes	$\bigcirc$ No					
Other	○ Yes	○ No	⊖ Yes	$\bigcirc$ No					

### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

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

SPDES ID

Y R 2

0

Ν

1 0

9

2 0 1 4

1 3 0

%

$\bigcirc$ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
$\bigcirc$ Streets Swept (Number of miles X Number of times swept)	# Miles	
$\bigcirc$ Catch Basins Inspected and Cleaned Where Necessary	#	
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	# Acres	
3. How many stormwater management trainings have been provided to	o municipa	l employees
during this reporting period?		1 1

- 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 5

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

SPL	DES	ID			_	
Ν	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.

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

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

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: Coalition provided Inventory and Assessment support to 3 Coalition members, as requested and funded. BMP 6-9 Staff Training: one elected official received Clean Water Act Basics training, not the road show as planned, however training materials were developed for future programs.

#### 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).

The Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No specific Coalition goals for MCM 6; instead Coalition staff as reflected in 2015 Coalition budget and requested by individual members, directly assist MS4s in implementing their individual MCM 6 goals. Training related Coalition goals (organize, host, fund) are described in SWMPv3 MCM 8 Train'g-Staff, Plan'g/Zon'g Bds, Other Muni Officials.

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

MCC form for period ending March 9, 2 0 1 5

	SPD	ES	ID						
Name of MS4 Town of New Scotland	Ν	Y	R	2	0	A	4	6	3

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

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1

Name of MS4 Town of New Scotland

SPDES IDNYR20A

4 6 3

5

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

Firs	t Na	ime		-	-	-		_	-				-			MI	_	Las	t Na	me	-	-	_		_	-			_		
Т	h	0	m	a	S													D	0	1	i	n									
Titl	e																														
Т	0	w	n		S	u	р	е	r	v	i	ß	0	r																	
Add	lres	5																												 	
2	0	2	9		Ν	e	w		S	С	0	t	1	а	n	d		R	0	а	d										
City	/																			S	tate		Zip								
S	1	i	n	g	е	r	1	а	n	d	ន									ľ	1 2	Y	1	2	1	5	9	-			
eMa	ail																														
t	d	0	1	i	n	@	t	0	w	n	0	f	n	е	w	S	С	0	t	1	а	n	d	•	С	0	m				
Pho	ne																	Cot	inty												
(	5	1	8	)	4	3	9	-	4	8	8	9						A	1	b	a	n	У								

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1

Name of MS4 Town of New Scotland

SPDES IDNYR20A

4 6 3

5

# 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
- $\odot$  Stormwater Management Program (SWMP) Coordinator
- Report Preparer

Firs	t Na	ame			-							-		-		MI	_	Las	t Na	me					-	_			_		_
J	е	r	е	m	У											Е		С	r	а	m	е	r								
Titl	e																														
В	u	i	1	d	i	n	g		Ι	n	S	р	е	С	t	0	r														
Add	lres	s																												 	
2	0	2	9		Ν	е	w		S	С	0	t	1	а	n	d		R	0	а	d										
City	/																			S	tate		Zip								
S	1	i	n	g	е	r	1	a	n	d										ľ	1 7	Z	1	2	1	5	9	-			
eMa	ail																														
j	С	r	a	m	е	r	@	t	0	W	n	0	f	n	е	w	ន	С	0	t	1	а	n	d	•	С	0	m			
Pho	ne																	Cou	inty												
(	5	1	8	)	4	3	9	-	9	1	5	3						A	1	b	a	n	У								

# MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 5

Name of MS4 Town of New Scotland

SPDES ID

) I L	- 10	10						
Ν	Y	R	2	0	A	4	6	3

# Section 3 - Partner Information

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

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		A	1	b	а	n	У			
Par	tner	/Co	aliti	ionl	Nam	ne (c	on't	.)		•	•	•	•				•							SPI	DES	Pa	rtne	r ID	- If	app	lica	ble
C	0	u	n	t	У																			Ν	Y	R	2	0				
Ado	lres	5																						,		1						
1	1	2		S	t	a	t	е		S	t	r	е	е	t	,		R	0	0	m		7	2	0							
Cit	у												_							St	tate		Zip									
A	1	b	a	n	У															N	1 X		1	2	2	0	7	-				
eM	ail																															
n	h	е	i	n	z	е	n	@	а	1	b	а	n	У	С	0	u	n	t	У	•	С	0	m								
Pho	one		1	1.				1					1						Le	gall	y Bi	ndii	ng /	Agre	em	ent i	in ac	cor	dan	се		
(	5	1	8	)	4	4	7	-	5	6	4	5								-	5P-0		-	-					Ye		0	No
W	hat	tasl	ks/1	resp	oon	sib	iliti	es	are	sha	arec	l w	ith	this	s pa	artn	er (	(e.g	g. N	IM.	1 So	cho	ol	Pro	gra	ms	or	Mu	ıltip	ole	Tas	ks)'
		I		-											-			-							-				-			
	MM	1	Ε	d	u	С	a	t	i	0	n		Μ	a	t	е	r	i	a	1		&		Ρ	r	0	g	r	a	m	S	
• 1	MM	2	S	W	М	Ρ	/	W	A	V	Ε	/	W	е	b	S	i	t	е	/	Ρ	u	b	1	i	С		i	n	р	u	t
	MM	3	A	Ι	М	S	/	0	R	I		А	S	ន	t	-	I	D	D	Ε		Ρ	r	0	С	е	d	u	r	е	S	
• 1	MM	4	Ρ	r	0	С	е	d	u	r	е	S		ន	u	р	р	0	r	t												
• 1	MM	5	Ρ	r	0	С	е	d	u	r	е	S		ន	u	р	р	0	r	t												
	MМ	6	Т	r	a	i	n	I	g		F	a	С	i	1	i	t	У		A	u	d	i	t		s	u	р	р	0	r	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(	<b>M</b>	CC)	F	or	m					
MCC form for period ending March 9	, 2	0	L 5								
		5	SPDI	ES I	ID						
Name of MS4 Town of New Scotland			N	Y	R	2	0	Α	4	6	3

# 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
Thomas		D o l i n
Title (Clearly print title of individual <u>signing</u> report)		
Supervisor		
Signature		Date

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

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

This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Tox

Town of New Scotland

# Water Quality Trends

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 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

Yes 🔍 No

SPDES ID

0 A

4 6 3

N Y R 2

If Yes, choose one of the following

- Report(s) attached to the annual report
- $\bigcirc$  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.

,														
, ,														
,														

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

# SPDES IDNYR20A463

# Minimum Control Measure 1. Public Education and Outreach

1

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

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

Other

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								٠	Pestic	ide	and Fe	rtili	zer	Apj	plic	atio	n	
• General Stormwater	Management 1	Informat	ion						Pet W	aste	e Mana	gen	nent					
• Household Hazardou	us Waste Dispo	osal						٠	Recyc	ling	5							
Illicit Discharge Det	tection and Elin	mination						0	Ripari	an	Corrido	or F	rote	ectic	on/R	lest	orat	ion
• Infrastructure Maint	tenance								Trash	Ma	nagem	ent						
$\bigcirc$ Smart Growth								•	Vehicl	le V	Vashing	5						
○ Storm Drain Markin	ıg							0	Water	Co	nserva	tion						
• Green Infrastructure	e/Better Site De	0	Wetla	nd 1	Protect	ion												
$\bigcirc$ Other:		0	None															
Other																		
2. Specific audience	es targeted d	uring t	his 1	repo	ortin	g pe	riod:											
• Public Employees	Contractors	5																
○ Residential	Developers																	
○ Businesses	• General Pu	blic																
$\bigcirc$ Restaurants	$\bigcirc$ Industries																	
• Other:	○ Agricultura	ıl																

**This report is being submitted for the reporting period ending March 9**, 2 0 1 5 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPI	DES	ID							
Ν	Y	R	2	0	Α	4	6	3	

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

$\circ$ (	Con	stru	ictio	on S	Site	Op	era	tors	s Tr	ain	ed													ŧ	# Tr	aine	ed					0
ΟI	Dire	ct ]	Ma	iling	gs																			#	Ma	iling	gs					0
• I	Kios	sks	or	Oth	er I	Disp	olay	/S																# 1	Loca	atio	ns					1
• I	List	-Sei	rves	5																					# I:	n Li	st				2	0
$\circ$ 1	Mai	ling	; Li	st																					# I:	n Li	st					
$\circ$ 1	New	vspa	iper	A	ls c	or A	rtic	cles																#1	Days	s Ru	ın					
⊖ I	Pub	lic	Eve	ents	/Pre	eser	ntat	ions	5															# A	Atte	nde	es					
$\circ$ s	Sch	ool	Pro	ogra	m																			# A	Atte	nde	es					
01	ΓV	Spo	ot/P	rog	ram	1																		#1	Day	s Ru	ın					
• I																						To	otal	# D	istri	bute	ed				3	0
	L	Locat	tion	s (e.	g. li	brar	ies,	tow	n off	ices	, kio	sks)																				
		K	i	0	S	k		Т	0	Ν	S		Т	0	W	n		H	a	1	1											
	Ī																															
$\circ$ (	L Dthe	er:																														
	Γ																															
• \	L Web URL		ige:			ovid edec		peci	ific	wel	b ac	ldre	esse	s -	not	hor	ne	page	e. (	Con	tinu	e o	n ne	extj	pag	e if	ado	litio	onal	l sp	ace	is
	h	t	t	p	:	/	/	w	w	w		t	0	w	n	0	f	n	e	w	s	С	0	t	1	a	n	d		С	0	m
	/	t.	0	w	n	r	e	n	0	r	t.	e	r	/	s	t.	0	r		w	а	t.	e	r	m	a	t.		а	S	n	?

URL

m m

=

5 & s m

4 8

=

UN																														 
w	w	W	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	a	n	У	С	0	u	n	t	У	•	0	r	g	

# This report is being submitted for the reporting period ending March 9, 2 0 1 5

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						
Ν	Y	R	2	0	А	4	6	3

Wel	b Pag	ge c	on't	.:		Pro	ovic	le s	spec	cifi	c w	eb	add	lres	ses	- n	ot	hor	ne j	pag	e.				
JRL																							 	 	
-	+																								
JRL																								 	
-	+																								
JRL																									
	+																								
JRL																									
	1																								
JRL																									
	_																								
JRL																									
_																									
JRL																									
				. J.	1													1	1						1

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

#### 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) Identified on-site septic systems for possible POCs of bacteria and viruses and created a detailed list of geographic areas of concern in the finalized Target Audience Analysis Worksheets. Acquired print order "Your Septic System info" and "Septic System Maintance Logs" to distribute to approximately 550 homeowners. (No summary measurement can be made as educational info has yet to be distributed. 3) Publications replenished as needed.

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

No summary measurement can be made as educational info has yet to be distributed. Mailing is scheduled to be distributed late spring/early summer of 2015.

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

(ex.: samples/participants/events)

3

4 6

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

• Yes  $\bigcirc$  No

<b>E.</b> 1	Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	• Yes	○ No

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

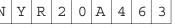
1) 1-9 Produce letter signed by Town Supervisor and dist. septic system publication as direct mailing to approx. 550 residents identified in target audience. 2) 1-3 Staff will update their SW page as part of town website renovation. 3) 1-11 require all post const. SW Practices to require signage per ch. 3 of design manual. 4) research best use of town's new Facebook page to communicate SW info. 5) Continue to include water quality message on HHWC flier. 6) continue to maintain brochure rack.

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

SPDES ID



# Minimum Control Measure 2. Public Involvement/Participation

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. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

• Cleanup Events		# Events	1
$\bigcirc$ 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.	
$\bigcirc$ Storm Drain Markings		#Drains	
$\bigcirc$ Stakeholder Meetings		# Attendees	
○ Volunteer Monitoring		# Events	
O Other:			

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

Program (SWMP) Plan provided?	Ye	s	0	No
List-Serve     # In List		4	5	8
○ Newspaper Advertising # Days Run				
○ TV/Radio Notices # Days Run				
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 5

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

Town of New Scotland Name of MS4/Coalition

SPI	DES	ID						
Ν	Y	R	2	0	Α	4	6	3

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

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

URL

W	w	w	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	a	n	У	С	0	u	n	t	У	•	0	r	g	
URI	,																													

UKL																															
h	t	t	р	:	/	/	w	w	w	•	t	0	w	n	0	f	n	е	w	S	С	0	t	1	a	n	d	•	С	0	m
/	t	0	W	n	r	е	р	0	r	t	е	r	/	S	t	0	r	m	W	a	t	е	r	m	g	t	•	3	a	ទ	р
?	m	m	=	5	&	ទ	m	=	4	8																					

UDI

URL																
						 				 		 	 		 $ \rightarrow$	_
						 	 			 		 	 	 		_

URL

<u> </u>	-		 							 						

URI

UKI	-															

UR	L																
		_	 										 			 	

# This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

SPI	DES	ID						
Ν	Y	R	2	0	А	4	6	3

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

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

UR	Ļ	 		 		 			 								
UR																	
UR	L							 				 					
																]	
UR																	
UR	L							 									
UR	L				 			 									
UR																	]

### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

 SPDES ID

 N
 Y
 R
 2
 0
 A
 4
 6
 3

# **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					Offic	e											A	nnu	al l	Rep	ort		S	WN	1P 1	Plar	1	• (	Con	nme	ents
	Dep						_										_			_				_	_						
	Т	0	W	n		0	f		Ν	е	W		S	С	0	t	1	a	n	d	-		В	1	d	g		D	е	р	t
	Add													_			_		_			_									
	2	0	2	9		Ν	е	W		S	С	0	t	1	a	n	d		R	0	a	d									
	City							-			,							Γ.				Zip	0	-	-	_					
	S	1	i	n	g	е	r	1	a	n	d	S						-	N	Y		1	2	1	5	9	-				
	Pho		_						1	_		_	-	]																	
	(	5	1	8	)	4	3	9	-	9	1	5	3																		
○ Lib	rary Ado	, lres	s													C	A	nnu	al l	Rep	ort	C	) S'	WN	1P 1	Plar	1	0 (	Con	nme	ents
	City	/			L															L		Zip									
																		Γ									_				
	Pho	ne																L													
	1				1				_																						
					)																										
○ Oth	er															C	A	nnu	al I	Rep	ort	C	) S'	WN	1P I	Plar	ı	$\circ$ (	Con	nme	ents
• • • • •	Add	lres	s																	· 1											
	City	/		·		·											I	г	·	·		Zip									
																											-				
	Pho	ne																													
	(				)				-																						
	`				,				]					I																	
• Wel	b Pa	age	UR	RL:													A	nnu	al l	Rep	ort		) S'	WN	1P 1	Plar	1	• (	Con	nme	ents
	h	t	t	р	:	/	/	W	w	W		t	0	W	n	0	f	n	е	W	S	С	0	t	1	a	n	d	•		
	С	0	m	/	t	0	W	n	r	е	р	0	r	t	е	r	/	S	t	0	r	m	W	a	t	е	r	Μ	g	t	•
	a	S	р	?	m		=	5	&	S	m	=	4	8																	
		ease	e pr	ovi	de	spe	cif	ic a	.ddr	ess	of	pag	ge v	whe	ere	rep	ort	car	ı be	e ac	ces	sec	l - r	ot	hor	ne	pag	ge.			
• eMa	ail																											$\circ$ (	Con	nme	ents
	j	С	r	a	m	e	r	@	t	0	W	n	0	f	n	е	W	s	С	0	t	1	a	n	d		С	0	m		
		-											-														-		=		

This report is being submitted for the reporting period ending March 9, 2	2 0 1 5	5
If submitting this form as part of a joint report on behalf of a coalition leave SPDES	S ID blank	
Name of MS4/Coalition     Town of New Scotland       N     Y       R     2	0 4 6	3
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. $05/01$	/ 2 0	1 5
4.b. For how many days was/will this report be posted?	3	6 5
If submitting a report for single MS4, answer 5.a If submitting a joint report, answer	wer 5.b	
5.a. Was an Annual Report public meeting held in this reporting period?         If Yes, what was the date of the meeting?	○ Yes /	• No
If No, is one planned?	○ Yes	• No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this this reporting period?	report dı ○ Yes	uring ● No
If No, is one planned for each?	$\bigcirc$ Yes	• No
<b>6.</b> Were comments received during this reporting period? If Yes, attach comments, responses and changes made to	○ Yes	• No

SWMP in response to comments to this report.

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition

## 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.

Update SWMP data managed using MS4web (CBI)
 BMP 2-6 Clean up activities: Update Hazardous Household Waste Day Flier to include water quality message.

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

1) SWMP Data updated for Town using MS4web

2) Water Quality message included with HHWD Clean Up flyer3) SWMP developed for 2015 to 2017 for all Coalition members; future goals (Section F) reflect new SWMP document.

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) 2-1 TONS SW staff will annually update public contact info in the MS4 Permit Annual Report MCC form (AR2016, ending 3/9/2016) and in documents pertaining to the MS4 SW Program. 2) 2-2, TONS SW staff provides the Town Board with the DRAFT Joint A.R., posts the FINAL Joint Annual Report on Town SW pg. 3) 2-5, SW staff will review existing written complaint procedures, modify as needed to include general SW queries, IDDE complaints, and const. activity.



#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

SPDES ID

0 A

0 #

1 0

0 %

0

1

4 6 3

N Y R 2

1

Name of MS4/Coalition Town of New Scoitland

# 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
- $\bigcirc$  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?

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

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 Town of New Scotland	N Y R 2 0 A 4 6 3
3.b.What types of illicit discharges have	e been found during this reporting period?
$\bigcirc$ Broken Lines From Sanitary Sewer	$\bigcirc$ Industrial Connections
$\bigcirc$ Cross Connections	$\bigcirc$ Inflow/Infiltration
$\bigcirc$ Failing Septic Systems	$\bigcirc$ Pump Station Failure
• Floor Drains Connected To Storm Sewers	$\bigcirc$ Sanitary Sewer Overflows
○ Illegal Dumping	$\bigcirc$ Straight Pipe Sewer Discharges
<ul> <li>Other:</li> <li>4. How many illicit discharges/potentia reporting period?</li> </ul>	○ None
	en confirmed during this reporting period?

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

0

No

0 %

 $\bigcirc$  No

 $\bigcirc$  No

• Yes

• Yes

- 7. Has the storm sewershed mapping been completed in this reporting period? ○ Yes If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

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

W	w	w	•	а	i	m	S	g	i	S	•	0	r	g	/	W	е	b	m	a	р	/					
*	*	R	е	ន	t	r	i	С	t	е	d		Α	С	С	е	ន	S	*	*							
*	*		Ρ	а	ទ	ន	w	0	r	d		Ρ	r	0	t	е	С	t	е	d	*	*					
URL																											

# This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition	Town of New Scotland
-----------------------	----------------------

SPI	DES	ID						
Ν	Y	R	2	0	4	6	3	

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

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

				-											 	 _	 		_	 	 	 	 	
URI	RL																							
URI				I																			I	
URI																								
URI	RL																							
L				I				l	I		I	I		I			 	I						

- 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 No NT
- 11. What percent of staff in relevant positions and departments has received IDDE training?

0 8

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Town of New Scoitland

#### 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.

Continue to address complaints for failing septic systems and utilize ACDOH as needed.
 Continue to be on the alert for cross connections during routine building and fire inspections.
 Utilize Coalition staff to test any new outfalls. 4) Continue to monitor progress of floor drain discharge elimination and to report back to D.E.C. when any progress occurs and to notify them when discharge is eliminated.

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

1) No septic system complaints for this reporting year

2) Potential for cross connections continue to be inspected

3) No outfall tested this year; some planned for upcoming year

4) Town Designated Engineer funded by Town Board to review floor drain issue at DPW garage;

TDE proposed 3 solutions, maintenance costs under review, all for Board to consider/decide.

#### 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  $\bigcirc$  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).

3-1 TONS will confirm the presence of existing outfalls and upload into a GIS platform (AIMS, desktop) all new outfalls identified during ORI field work scheduled to be completed by 12/31/2015.
 3-4 the TONS updates storm system maps to include new infrastructure built. 3) 3-5 TONS SW staff complete outfall inventory of all known outfalls (estimated: 10 outfalls).

SPE	DES	ID						
Ν	Y	R	2	0	А	4	6	3

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

SPI	DES	ID						
Ν	Y	R	2	0	A	4	6	3

4

0

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

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?

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

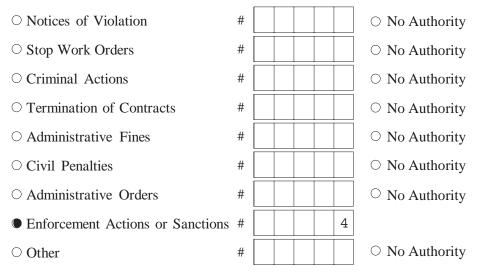
1

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?
- 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 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 5

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

Name of MS4/Coalition Town of New Scotland

# SPDES ID N Y R 2 0 A 4 6 3

1 0 0 %

0 0

%

# Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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.	How many construction projects have been authorized for disturbances of one acre of	)r n	nor	·e
	during this reporting period?			2

- 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?  $\odot$  NT

What percent of active construction sites were inspected more than once?	$\odot$ NT
	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? O 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 5

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

Name of MS4/Coalition Town of New Scotland

SPE	DES	ID				
Ν	Y	R	2	0	А	4

6 3

#### 6. con't.:

Submit additional pages as needed.

• MS4/Coalition Office

	Dep	artr	nen	t																											
	В	u	i	1	d	i	n	g		a	n	d		Z	0	n	i	n	g		D	е	р	a	r	t	m	е	n	t	
	Add	lres	8					_													-				<u> </u>					I	
	Т	0	W	n		Η	a	1	1		2	0	2	9		N	е	w		S	С	0	t	1	a	n	d		R	d	
	City	,																				Zip									
	S	1	i	n	g	е	r	1	а	n	d	S						N	I Y			1	2	1	5	9	-				
	Pho																														
	(	5	1	8	)	4	3	9	-	9	1	5	3																		
⊖ Lib																															
	Add	lress	5																		1										
	City	,																		_		Zip									
																											-				
	Pho	ne																													
	(				)				-																						
○ Oth	er																														
	Add	lres	5																												
	City	,																		_		Zip									_
																											-				
	Pho	ne																													
	(				)				-																						
○ We	b Pa	age	UF	RL(s	5):	Р	leas	se p	rov	ide	spe	cifi	c a	ddre	ess	whe	ere S	SW	PPI	Ps c	an	be a	icce	esse	d -	not	hoi	ne j	page	e.	
	URL																														
	URL	[																										[			]
																															$\overline{}$
																													$\rightarrow$	=	

### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

### 7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

The town will continue to conduct it's SWPPP reviews, site inspection, and enforcement as described in our adopted procedures and maintain records as it currently does with the aid of it's recently upgraded building permit software.

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

The town continues to use procedures for oversight of construction activity; no issues to date.

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) 4-7 T/New Scotland stormwater staff will post the availability of NYSDEC approved 4Hr E-SC training for contractors on their website and Town Hall bulletin board.

SPI	DES	ID						
Ν	Y	R	2	0	А	4	6	3

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

ΝY

1

R 2

Α

4 6 3

0

Name of MS4/Coalition Town of New Scotland

# 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
$\bigcirc$ Alternative Practices			
$\bigcirc$ Filter Systems			
Infiltration Basins	4	8	1
• Open Channels	2	4	1
• Ponds	1	2	0
$\bigcirc$ Wetlands			
$\bigcirc$ Other			

- 2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance? O Yes • No
- **3.** What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?
- Building Codes
   Municipal Comprehensive Plans

• Overlay Districts Open Space Preservation Program

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

															1

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

		-	<u>SPDE</u>	<u>s id</u>						
Name of MS4/Coalition	Town of New Scotland		ΝY	R	2	0	A	4	6	3
4a. Are the MS4s co	ntributing to this report involved in a regional	/watershe	ed wid	le pl	ann	0	<b>effo</b> Yes			No
4b. Does the MS4 ha	we a banking and credit system for stormwate	r manage	ment	pra	ctic	es?				

○ Yes

 $\bigcirc$  Yes

• No

• 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?

4d. How many stormwater management practices have been implemented as part of this sy	sten	ı in	this
reporting period?			0

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

### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

### 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.

Continue to promote and track attendance of Town Officials and relevant staff's training.
 Maintain town wide non structural stormwater practice inventory.

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

1) Training of local officials is ongoing and documented by the SMO in the designated SWMPP file cabinet located in Building Dept.

2) Updated town-wide inventory of non structural practices-one previously active SWPPP project completed and NOT filed, now included in inventory.

### 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  $\bigcirc$  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) 5-3 TONS SW staff, will use related updates to inform members of relevant boards of MS4 Permit requirements regarding non-structural stormwater management tools.2) 5-4 TONS staff, when evaluating and possibly updating existing code language, will recommend utilizing the green infrastructure code language developed by "GILLAC" where considered appropriate. 3) 5-8 staff will update the inventory of post-construction practices and document.

SPI	DES	ID						
Ν	Y	R	2	0	А	4	6	3

### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition

### 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?

(ex.: samples/participants/events)

3

4 6

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

 $\bigcirc$  Yes  $\bigcirc$  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).

4) 5-9 staff develop a set of documents which describe maintenance procedures for practices owned by the Town and procedures for ensuring that privately owned practices are maintained according to the SWPPP operation and maintenance manual. 5) 5-9 staff will inspect all post-construction stormwater practices (privately maintained and those maintained by the Town). Inspection will included documentation of observations.

### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

### 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?

(ex.: samples/participants/events)

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

 $\bigcirc$  Yes  $\bigcirc$  No

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

 $\bigcirc$  Yes  $\bigcirc$  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) 5-12 continue to maintain necessary post-construction records for use in internal operations and the MS4 Permit Annual Report document.



### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

S	SPE	DES	ID						
	Ν	Y	R	2	0	А	4	6	3

# Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?



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

			Self-Assess	sment
			<b>Operation/Activ</b>	<u>ity/Facility</u>
			performed withi	n the past 3
<b>Operation/Activity/Facility</b>	Addressed i	n SWMP?	<u>vears</u>	?
Street Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Bridge Maintenance	O Yes	• No	O Yes	• No
Winter Road Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Salt Storage	• Yes	○ No	• Yes	$\bigcirc$ No
Solid Waste Management	• Yes	○ No	• Yes	$\bigcirc$ No
New Municipal Construction and Land Disturbat	nce • Yes	○ No	• Yes	$\bigcirc$ No
Right of Way Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Marine Operations	····· OYes	• No	····· · Yes	• No
Hydrologic Habitat Modification	O Yes	• No	O Yes	• No
Parks and Open Space	• Yes	○ No	• Yes	$\bigcirc$ No
Municipal Building	• Yes	○ No	• Yes	$\bigcirc$ No
Stormwater System Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Vehicle and Fleet Maintenance			• Yes	$\bigcirc$ No
Other	····· OYes	• No	○ Yes	• No

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

0 1

3 1

2 0 1 4

2

8 %

N Y R 2 0 A

4

6 3

Name of MS4/Coalition	Town of New Scotland
-----------------------	----------------------

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

• Parking Lots Swept (Number of acres X Number of times swept)	# Acres					2
• Streets Swept (Number of miles X Number of times swept)	# Miles			1	5	0
• Catch Basins Inspected and Cleaned Where Necessary	#					6
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#					7
$\bigcirc$ Phosphorus Applied In Chemical Fertilizer	# Lbs.					0
$\bigcirc$ Nitrogen Applied In Chemical Fertilizer	# Lbs.					0
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	# Acres			0	) - [	0
3. How many stormwater management trainings have been provided t	o municipa	l em	pl	oye	ees	
during this reporting period?						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 5

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

Name of MS4/Coalition Town of New Scotland

### 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) Town will inspect and clean as needed a minimum of 25% of its catch basins; 2) Town will sweep 50% of it's municipally owned parking acreage; 3) Update inventory of fixed municipal operations & facilities; 4) Reassess and document all municipal operations and facilities as listed on inventory and complete assessment of created BMPs for compliance; 5) Continue to promote educational opportunities for relevant staff identified in organizational chart and elected officials.

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

Completed inspections on catch basins, cleaned as needed. (% estimate based on 6 catch basins)
 Municipally owned parking acreage swept annually (% estimate based on 2 acres of parking lots)
 Inventory updated (no change); 4) Progress with Highway Garage BMP; 5) New officials on
 Planning Board; training needs identified; need to monitor training received.
 New SWMP Plan for 2015 to 2017-updated goals developed, see Section F.

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

(ex.: samples/participants/events)

5

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

• Yes  $\bigcirc$  No

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

○ Yes ○ No

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

1) 6-1 existing inventory of Town owned properties and facilities will be evaluated, along with additions to determine if they need a facility self-audit. 2) 6-2 as needed new facilities will be evaluated using the Stormwater Coalition Facility Self Audit Form and BMP Summary Sheets developed if necessary. 3) 6-3 TONS will document the number of catch basins in the Town (roads and facilities) and inspect and clean out 50%; documentation will be filed with stormwater staff.

SPI	DES	ID						
Ν	Y	R	2	0	А	4	6	3

### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition

### 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.

# **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?

(ex.: samples/participants/events)

3

4 6

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

○ Yes ○ No

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

○ Yes ○ No

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

4) 6-4 TONS SW staff will document the total road miles in the Town and total parking lot acreage. The Town will sweep 150 road miles (both sides) and 100% of parking lots. 5) 6-8 TONS SW Staff will track number of HHWD Clean Up events organized by the Town over the past year, and collect summary data reports documenting the amount of hazardous waste collected. Typically there is one HWD Collection Day in May. Documentation will be filed with the stormwater staff.

### 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.

Town of New Scotland Name of MS4/Coalition

### 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.

### 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?

(ex.: samples/participants/events)

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

○ Yes  $\bigcirc$  No

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

○ Yes  $\bigcirc$  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) 6-11 TONS staff will consider options for ensuring that Town owned conveyance upgrades consider green infrastructure practices.7) 6-15 TONS SW staff will continue to sweep and remove excess salt from the salt storage loading area as described in the Highway Garage BMP.

SPE	DES	ID							
Ν	Y	R	2	0	А	4	6	3	

5

### **This report is being submitted for the reporting period ending March 9**, 2 0 1 5

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

Name of MS4/Coalition Town of New Scotland

### 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.

# **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?

(ex.: samples/participants/events)

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

 $\bigcirc$  Yes  $\bigcirc$  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).

8) 6-19 TONS SW Staff will evaluate various options presented by the consultant to address discharge issues observed at the Highway Garage during the most recent Facility Self Audit. Board will implement the selected option and construct before 3/9/2016.

SPE	DES	ID							
Ν	Y	R	2	0	A	4	6	3	

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

# Minimum Control Measure 1. Public Education and Outreach

1 3

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:

• Construction Sites	• Pesticide and Fertilizer Application
• General Stormwater Management Information	• Pet Waste Management
$\bigcirc$ Household Hazardous Waste Disposal	○ Recycling
O Illicit Discharge Detection and Elimination	Riparian Corridor Protection/Restoration
• Infrastructure Maintenance	O Trash Management
• Smart Growth	• Vehicle Washing
○ Storm Drain Marking	$\bigcirc$ Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	$\bigcirc$ Wetland Protection
<pre> Other: C o a l i t i o n W e b s i t e - W h a Other </pre>	O NonetYouCanDo
2. Specific audiences targeted during this reporting period:	
Public Employees     Contractors	
• Residential O Developers	

• Businesses • General Public

- $\bigcirc$  Restaurants  $\bigcirc$  Industries
- Other: O Agricultural

								-												
S	t	u	d	е	n	t	S													
Ot	her																			

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	PI	DES	ID				
N	ſ	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:

<ul> <li>Construction Site Operators Trained</li> </ul>	# Trained 3 5
○ Direct Mailings	# Mailings
• Kiosks or Other Displays	# Locations 8
• List-Serves	# In List 4 5 8
○ Mailing List	# In List
$\bigcirc$ Newspaper Ads or Articles	# Days Run
Public Events/Presentations	# Attendees 1 5 3
School Program	# Attendees 1 6 6
○ TV Spot/Program	# Days Run
• Printed Materials:	Total # Distributed642
Locations (e.g. libraries, town offices, kiosks)	

А	1	L	a		0	11	L		T.	a	<u>т</u>	T							
С	i	t	У	А	1	b	a	n	У	S	С	h	0	0	1	Ρ	r	0	g
Ν	0	r	m	a	n	S	k	i	1	1	С	r	е	е	k				
G	I		С	0	d	е	R	е	v	i	е	w	Ρ	r	0	g	r	a	m

• Other:

H o s t 4 C W P W e b c a s t s

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

URI	-		_		_																									
W	w	w	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	а	n	У	С	0	u	n	t	У	•	0	r	g	

URL

UN	-															

### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

SPL	JES	ID				
Ν	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.

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.

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

BMP 1-1 TAAW: 1) Map Set maps-updated 2010 urbanized area; not all formatted for use with TAAW, but will be, still important. ; 2) Collected Measurable Goals sheets; info somewhat useful for budgeting purposes. BMP 1-3 Website: To/From links corrected for all members; disconnected links common; important to monitor links frequently. GoogleAnalytics for website (2828 sessions/2015; 1637 visits (sessions?)-a 1191 increase. BMP 1-7 List Serve-no updates of officials.

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

		4	
_			

(ex.: samples/participants/events)

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

• Yes  $\bigcirc$  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).

Coalition has an updated Joint SWMP Plan titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some Coalition goals for MCM1 presented here. BMP 1-1 TAAW: add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, 1 new doc (plant care).

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

 O

# 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 3

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											
• Comments on SWMP Received		# Comments					0				
• Community Hotlines	<b>(</b> 518 <b>)</b> 447	-	5	6	4	5					
Phone # ( )	Phone #		- [								
Phone # ( )	Phone #		-								
Phone # ( )	Phone #		-								
Phone # ( ) – –	Phone #		-								
Phone # ( )	Phone #		- [								
$\bigcirc$ Community Meetings		# Attendees									
$\bigcirc$ Plantings		Sq. Ft.									
○ Storm Drain Markings		# Drains									
$\bigcirc$ Stakeholder Meetings		# Attendees									
Volunteer Monitoring     # Events											
O Other:											

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

Program (SWMP) Plan provided?	۲	Ye	es	$s \circ N$	
List-Serve     # In List			4	5	8
O 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 5

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

SPL	DES	ID				
Ν	Y	R	2	0		

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

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

URI	_																														
W	W	W	•	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		
JRI				L		L			I		I		L				L	I				I								L	L
																															F
																															F
ID I	<u> </u>					ļ			<u> </u>		<u> </u>		ļ				ļ	<u> </u>				<u> </u>									L
JRI																															
																															F
																															L
URI																															Γ
																														<u> </u>	
URI	Í																													<u> </u>	Г
URI	Í			I		I																									Γ
URI																															Γ
																														L	

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

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

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

MS4/Coalition Office										• Annual Report						SWMP Plan					• Comments										
	Dep											~			-							_	-					~			
	S	t	0	r	m	W	a	t	е	r		С	0	а	1	i	t	i	0	n	-	A	1	b	а	n	У	С	n	t	У
	Add										~								-					-							
	1 City	1	2		S	t	a	t	е		S	t	r	е	е	t	1		R	0	0	m		7	2	0					
	A	1	b	a	n	У												1	N	Y		Zip 1	2	2	0	7	_				
	Pho					1												Ľ						_	•		ļ				
	(	5	1	8	)	4	4	7	-	5	6	4	5																		
○ Lib	rary	7														C	A	nnu	al I	Rep	ort	C	S	WN	1P 1	Plar	ı	$\circ$ (	Con	nme	ents
	Ađo	lres	S																	r			~				_				
	City	/																Г				Zip					1				
																											-				
	Pho	ne			1	·			1 1	L.				1																	
	(				)				-																						
○ Oth	~**															C		0011	1 I	Rep	ort	C	1 61	WN	/D 1	Dlar	•	$\circ$ (	~ on	nma	nta
0 Otil	Ado	lres	s		_	_	_	_					_	_				iiiiu		кср	on		0	VV IV	11 1	1 1 1 1 1	1				
	City	/																				Zip					1				
																											-				
	Pho	ne																L									I				
	(				)				-																						
• Wel	D D	200	IIP	τ.														nnıı	a1 1	Rep	ort		S	WN	1P 1	Plar	ı		Con	nme	ents
		_		L.	G	+		r	m	5.7	2	t		r	2	1	b	a	n	_							-				
	W	W	W	•	S	t	0	r	m	W	a	L	е	r	a		d	a	11	У	С	0	u	n	t	У	•	0	r	g	
		ease	e pr	ovi	de	spe	cif	ic a	ddr	ess	of	pag	ge v	whe	ere	rep	ort	car	ı be	e ac	ces	sed	l - r	ot	hor	ne	pag				
• eMa	ail																											• (	Con	nme	ents
	Ŋ	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			

This report is being submitted for the reporting period ending March 9, 2 0	1 5	
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		
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. $05/01/2$	2 0 1	1 5
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	5.b	
5.a. Was an Annual Report public meeting held in this reporting period?       O Y         If Yes, what was the date of the meeting?       If Yes, what was the date of the meeting?	les (	⊃ No
If No, is one planned?	les (	⊃ No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this reporting period?	Yes	• No
If No, is one planned for each?	(es (	• No
<b>6.</b> Were comments received during this reporting period? O Y If Yes, attach comments, responses and changes made to	(es	⊃ No

SWMP in response to comments to this report.

### This report is being submitted for the reporting period ending Marc

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

Stormwater Coalition of Albany County Name of MS4/Coalition

### 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.

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.

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

BMP 2-3 SWMP: SWMPv2 (2012 to 2015) updated. Completed tasks/goals noted, issues explained, title of document, Joint SWMP BMP Data Report. New SWMP needs to be developed for 2015 to 2017 and matched to NYSDEC interim MS4 Permit. Coalition Sub-Committee has met, some decisions: BMPs similar to previous SWMP, some modifications; individual goals for individual members; added MCM 8 Training. BMP 2-6 Clean Up Activities: "Thank You" dropped, no time.

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

(ex.: samples/participants/events)

1

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  $\bigcirc$  No

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

As of May, 2015, Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Document includes new/modified BMPs applicable to all Coalition members; goals are specific to Coalition and individual MS4 members. Some goals for MCM2 presented here. BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

SPI	DES	ID				
Ν	Y	R	2	0		

ch 9,	2	0	1	5	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID Υ R 2 0

#

%

Ν

Stormwater Coalition of Albany County Name of MS4/Coalition

# Minimum Control Measure 3. Illicit Discharge Detection and Elimination

1 3

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

- On behalf of an individual MS4
- On behalf of a coalition
  - How many MS4s contributed to this report?
- 1. Enter the number and approx. percent of outfalls mapped:
- 2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?
- 3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

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

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 C	County SPDES ID													
3.b.What types of illicit discharges have	been found during this reporting period?													
$\bigcirc$ Broken Lines From Sanitary Sewer	$\bigcirc$ Industrial Connections													
○ Cross Connections	$\bigcirc$ Inflow/Infiltration													
○ Failing Septic Systems	○ Pump Station Failure													
$\bigcirc$ Floor Drains Connected To Storm Sewers	○ Sanitary Sewer Overflows													
○ Illegal Dumping	○ Straight Pipe Sewer Discharges													
Other:	○ None													

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

No

O No

O No

÷

○ Yes

• Yes

• Yes

- **7. Has the storm sewershed mapping been completed in this reporting period?** If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

reporting period?

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

URI																										 	
Ρ	А	S	S	W	0	R	D		Р	R	0	Т	Е	С	Т	Е	D										
W	w	W	•	a	i	m	S	g	i	s	•	0	r	g	/	W	е	b	m	а	р	/					
*	*	R	е	ន	t	r	i	С	t	е	d		А	С	С	е	S	s	*	*							
URI																											

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

R 2

0

NY

Name of MS4/Coalition Stormwater Coalition of Albany County

### 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.

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

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

BMP 3-1 Map Outfalls: no sample form provided to collect outfall location information for construction projects; instead individual MS4s may map post-construction outfalls, no form needed. BMP 3-2 AIMS: map layers updated, process to evaluate AIMS started; now a priority given server issues. BMP 3-4 Storm Sys/Sewershed Mapping: few requests from past year. BMP 3-5 ORI: kits re-stocked as needed; Coalition staff assist, as needed & funded.

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

(ex.: samples/participants/events)

4

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some goals for MCM3 presented here. BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM4 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM5 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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		-	_	_	
Ν	Y	R	2	0			

# Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?



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

			Self-Assess	<u>ment</u>
		<b>Opera</b>	tion/Activi	ity/Facility
		<u>perfor</u>	<u>med withir</u>	<u>n the past 3</u>
<b>Operation/Activity/Facility</b>	Addressed in	<u>n SWMP?</u>	<u>vears?</u>	<u> </u>
Street Maintenance	O Yes	○ No	O Yes	○ No
Bridge Maintenance	• Yes	○ No	O Yes	$\bigcirc$ No
Winter Road Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No
Salt Storage	O Yes	○ No	O Yes	$\bigcirc$ No
Solid Waste Management	O Yes	○ No	O Yes	$\bigcirc$ No
New Municipal Construction and Land Disturba	ance $\bigcirc$ Yes	○ No	○ Yes	$\bigcirc$ No
Right of Way Maintenance	O Yes	○ No	○ Yes	$\bigcirc$ No
Marine Operations	O Yes	○ No	$\odot$ Yes	$\bigcirc$ No
Hydrologic Habitat Modification	O Yes	○ No	O Yes	$\bigcirc$ No
Parks and Open Space	····· O Yes	○ No	$\odot$ Yes	$\bigcirc$ No
Municipal Building	o	○ No	⊖ Yes	$\bigcirc$ No
Stormwater System Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No
Vehicle and Fleet Maintenance		○ No	○ Yes	$\bigcirc$ No
Other	○ Yes	○ No	⊖ Yes	$\bigcirc$ No

### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

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

SPDES ID

Y R 2

0

Ν

1 0

9

2 0 1 4

1 3 0

%

$\bigcirc$ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
$\bigcirc$ Streets Swept (Number of miles X Number of times swept)	# Miles	
$\bigcirc$ Catch Basins Inspected and Cleaned Where Necessary	#	
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	# Acres	
3. How many stormwater management trainings have been provided to	o municipa	l employees
during this reporting period?		1 1

- 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 5

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

SPL	DES	ID			_	
Ν	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.

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

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

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: Coalition provided Inventory and Assessment support to 3 Coalition members, as requested and funded. BMP 6-9 Staff Training: one elected official received Clean Water Act Basics training, not the road show as planned, however training materials were developed for future programs.

### 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).

The Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No specific Coalition goals for MCM 6; instead Coalition staff as reflected in 2015 Coalition budget and requested by individual members, directly assist MS4s in implementing their individual MCM 6 goals. Training related Coalition goals (organize, host, fund) are described in SWMPv3 MCM 8 Train'g-Staff, Plan'g/Zon'g Bds, Other Muni Officials.

MCC form for period ending March 9, 2 0 1 5

	SPD	ES	ID						
Name of MS4 City of Watervliet	Ν	Y	R	2	0	A	0	8	7

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

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1

Name of MS4 City of Watervliet

SPDES ID N Y R 2 0 A 0

8 7

5

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

Firs	t Na	ime		_	-											MI		Las	t Na	me					-				_	-	
М	i	С	h	а	е	1										Ρ		М	a	n	n	i	n	g							
Title	e																														
Μ	а	У	0	r																											
Add	lres	5																													 
2		1	5	t	h		S	t	r	е	е	t																			
City	/			-																S	tate		Zip								-
W	а	t	е	r	v	1	i	е	t											ľ	1 7	Z	1	2	1	8	9	-			
eMa	ail																											-			
m	m	a	n	n	i	n	g	@	W	a	t	е	r	v	1	i	е	t	•	С	0	m									
Pho	ne																	Cou	nty												
(	5	1	8	)	2	7	0	-	3	8	0	0						A	1	b	a	n	У								

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1

Name of MS4 City of Watervliet

SPDES ID N Y R 2 0 A 0

8 7

5

# 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
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

Firs	t Na	ame						_								MI	_	Las	t Na	me		-			-	-			_		
D	а	v	i	d												R		D	r	е	ß	ន	е	1							
Titl	e																														
М	Ε	0		1																											
Add	lres	s																												 	
2	2	2		W	а	t	е	r	v	1	i	е	t	-	S	h	а	k	е	r		R	d								
City	/							-							-					St	tate		Zip								
W	а	t	е	r	v	1	i	е	t											N	1 7	Ζ	1	2	1	8	9	-			
eMa	ail																														
d	d	r	е	S	ន	е	1	@	W	a	t	е	r	v	1	i	е	t	•	С	0	m									
Pho	ne																	Cou	inty												
(	5	1	8	)	7	8	5	-	7	0	8	2						A	1	b	a	n	У								

# MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 5

Name of MS4 City of Watervliet

SPDES ID

	JI I		ID						
N Y R 2 0 A 0 8 7	Ν	Y	R	2	0	А	0	8	7

# Section 3 - Partner Information

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

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		С	0	a	1	i	t	i	0	n		0	f		A	1	b	a	n	У			
Par	tner	/Co	aliti	ionl	Nam	ne (c	on't	.)		•														SPI	DES	Pa	rtne	r ID	- If	app	olica	ble
С	0	u	n	t	У																			Ν	Y	R	2	0				
Ado	dres	s																														
1	1	2		S	t	а	t	е		S	t	r	e	e	t		R	0	0	m		7	2	0								
Cit	y																			St	tate		Zip	•		•		•	•	•		
А	1	b	a	n	У															N	1 Z	7	1	2	2	0	7	–				
eM	ail																															
Ν	Η	е	i	n	z	е	n	@	а	1	b	а	n	У	С	0	u	n	t	У	•	С	0	m								
Pho	one												-						La	gall	v D	ndi	na	Agre	am	ant	in or	2007	dan	00		
(	5	1	8	)	4	4	7	–	5	6	4	5								th G									Ye		0	No
W	hat	tas	ks/1	rest	on	sib	iliti	es	are	sha	arec	ł w	ith	this	s pa	nrtn	er	(e.9	г. N	1M	1 S	cho	01	Pro	gra	ms	or	Μı	ıltir	ole	Tas	sks)?
				1.0.01											· · ·						- ~				<u> </u>				1			
	MM	1	Ε	d	u	С	a	t	i	0	n		М	a	t	е	r	i	a	1		&		Ρ	r	0	g	r	а	m	S	
	MM	2	S	W	М	Р	/	W	A	V	Е	/	W	e	b	s	i	t	е	_	Р	u	b	1	i	С		I	n	p	u	t
- 1		-					<i>'</i>					/						-												L.		
• 1	MM	3	Α	Ι	Μ	S	-	0	R	Ι	-	Α	S	S	t	-	I	D	D	E		Ρ	r	0	С	е	d	u	r	е	S	
•	MM	4	Ρ	r	0	С	е	d	u	r	е	s		S	u	p	p	0	r	t												
		•••	_	_	-	-	-				-					Ŀ	Ŀ	-		-												
• 1	VIIVI												1				-										1	-				
	MM	5	Ρ	r	0	С	е	d	u	r	е	S		S	u	р	р	0	r	t												
			P T	r r	o a	c i	e n	d '	u g	r -	e F	s a	С	S i	u 1	p i	p t	о У	r	t A	u	d	i	t		S	u	p	p	0	r	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(	( <b>M</b> (	CC	) <b>I</b>	For	m					
MCC form for period ending March 9	, 2	0	1	5							
			SPD	DES	ID						
Name of MS4 City of Watervliet			Ν	Y	R	2	0	Α	0	8	7

# Section 4 - Certification Statement

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

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

M       i       c       h       a       e       l       l	MI P	Last Nam Mar		i n	g				
M       a       y       o       r       Image: second secon									
Signature			]						
				Dat	te	/	/		

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	5	
This report is being submitted for the reporting period chung March 2,			- 1		

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

Name of MS4/Coalition

#### Water Quality Trends

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 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.

○ Yes No

0 A

0 8 7

SPDES ID Y R 2

N

If Yes, choose one of the following

- $\bigcirc$  Report(s) attached to the annual report
- $\bigcirc$  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.

URI				 	 			 	 	 					
URI															
URI															
URI	_														

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition City of Watervliet

# SPDES ID N Y R 2 0 A 0 8 7

### Minimum Control Measure 1. Public Education and Outreach

1

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

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

Other

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 Stormwater	Management Information	Pet Waste Management
○ Household Hazardou	us Waste Disposal	Recycling
○ Illicit Discharge Det	tection and Elimination	$\bigcirc$ Riparian Corridor Protection/Restoration
• Infrastructure Maint	tenance	Trash Management
$\bigcirc$ Smart Growth		• Vehicle Washing
Storm Drain Markin	g	$\bigcirc$ Water Conservation
• Green Infrastructure	Hetter Site Design/Low Impact Development	$\bigcirc$ Wetland Protection
O Other:		O None
2. Specific audience	es targeted during this reporting period:	
• Public Employees	$\odot$ Contractors	
• Residential	$\bigcirc$ Developers	
○ Businesses	• General Public	
○ Restaurants	$\bigcirc$ Industries	
O Other:		

This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition	City of Watervliet

SPI	DES	ID						
Ν	Y	R	2	0	А	0	8	7

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

⊖ Co	nstr	ucti	on S	Site	Op	era	ator	s T	rain	ed													÷	# Tr	aine	ed					
⊖ Diı	ect	Ma	ilinį	gs																			#	Ma	ilin	gs					
• Kie	osks	or	Oth	er I	Disp	olay	ys																#]	Loca	atio	ns					1
$\bigcirc$ Lis	t-Se	rves	5																					# I	n Li	st					
⊖ Ma	iling	g Li	st																					# I	n Li	st					
○ Ne	wsp	apei	A	ds c	or A	rti	cles																#]	Day	s Ru	ın					
• Pu	olic	Eve	ents	/Pro	eser	ntat	ion	S															# /	Atte	nde	es				4	0
$\bigcirc$ Scl	nool	Pro	ogra	m																			# /	Atte	nde	es					
• TV	TV Spot/Program# Days RunPrinted Materials:Total # Distributed																	4	6	8											
• Pri																			4	0											
	Printed Materials: Total # Distributed Locations (e.g. libraries, town offices, kiosks)																														
	K	е	е	р		V	1	i	е	t		Ν	е	а	t		D	a	У												
○ Otl	her:						I		I	I				I	I	I	I	I													
• We		age:			ovid edec		pec	ific	we	b ad	ddre	esse	s -	not	hoi	me	pag	e. (	Con	tinı	ie o	n n	ext	pag	e if	ado	litio	onal	l sp	ace	is
W	w	W	•	S	t	0	r	m	w	a	t	e	r	a	1	b	a	n	У	С	0	u	n	t	У	•	0	r	g		

URL

UIU	-															

### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition City of Watervliet

SPL	DES	ID						
Ν	Y	R	2	0	А	0	8	7

Web _{JRL}	Pag	ge c	OII	ι.:	PT(	JV1(	le s	spee	111	CW	eD	auc	res	ses	- n	IOL .	nor		pag	e.							
																											Ī
																											F
JRL	_																										
																											Ē
																											F
RL					 					I																	
																											Ē
																											Ē
RL	_								<u> </u>			<u> </u>		<u> </u>							ļ						-
																											F
																											F
JRL																											-
																											Ī
																											F
RL																											
																											t
																											L
JRL																											
																											╞
					<u> </u>		<u> </u>			-							L					L		L	$\square$	_	-

#### This report is being submitted for the reporting period ending March

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

City of Watervliet Name of MS4/Coalition

#### 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.

With the help from the coalition the City continued to distribute printed material out to the general public using various methods (ie. City Hall Brochure Rack, "Keep Vliet Neat Day" Packet) The City continues to use it public access TV Ch. 17 to broadcast stormwater related material.

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

The City's Ch 17 Public TV reaches about 10,000 residents throughout the city. Printed material helps the city engage the public with various topics related to stormwater.

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

3 (ex.: samples/participants/events)

 $\bigcirc$  No

 $\bigcirc$  No

• Yes

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

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

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

The City will review the existing Target Audience Analyst Worksheet and update it so it includes the entire municipality not just select watersheds. City will discuss w/Public access TV Coord. how to best document and track frequency of videos shown. City will continue to distribute stormwater packet to all volunteers at cleanup event. City will maintain City hall's brochure rack and stencil various storm drains that were identified in the facility self audit.



	_			
9	2	0	1	5

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition City of Watervliet

 SPDES ID

 N
 Y
 R
 2
 0
 A
 0
 8
 7

### Minimum Control Measure 2. Public Involvement/Participation

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. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

• Cleanup Events	# Events		1
$\bigcirc$ Comments on SWMP Received	# Comments		
$\bigcirc$ Community Hotlines	Phone # ( )	-	
Phone # ( )	Phone # ( )	-	
Phone # ( )	Phone # ( )	-	
Phone # ( )	Phone # ( )	-	
Phone # ( )	Phone # ( )	-	
Phone # ( )	Phone # ( )	-	
$\bigcirc$ Community Meetings	# Attendees		
○ Plantings	Sq. Ft.		
$\bigcirc$ Storm Drain Markings	# Drains		
$\bigcirc$ Stakeholder Meetings	# Attendees		
○ Volunteer Monitoring	# Events		
O Other:			

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

Program (SWMP) Plan provided?	• Yes	○ No
○ List-Serve # In List		
O Newspaper Advertising # Days Run		
○ TV/Radio Notices # Days Run [		
• Other: C i t y C o u n c i l M e e t i n g		

• 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 5

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

Name of MS4/Coalition City of Watervliet

SPE	DES	ID						
Ν	Y	R	2	0	А	0	8	7

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

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

URL																															
w	w	W	•	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		
URL		ļ																												<u></u>	<u> </u>
w	w	w		w	a	t	е	r	v	1	i	е	t		С	0	m	/	С	i	t	У	/	w	a	t	е	r	_	s	e
w	e	r		h	t	m																									
URL																															
URL								1					1	1			1														
URI	_						,		,															,						,	
URL																														<u> </u>	
																														L	
URL																															

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition City of Watervliet

SPI	DES	ID						
Ν	Y	R	2	0	А	0	8	7

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

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

URI	-	 	 	 	 		 		 	 		 	 	 	 	 	 
URI																	]
													_			_	
			 				 				 	 	 _	 	 	 _	
URI																	
URI		 	 		,					 			 			 	 
			 									 	 _			_	
URI																	
			 				 				 	 	 _	 		 _	 
URI																	
URI		 															 
	1																

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition	City of Watervliet
-----------------------	--------------------

SPI	DES	ID						-
Ν	Y	R	2	0	A	0	8	7

#### 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	itio	n C	offic	e											A	nnu	al l	Rep	ort		S	WN	1P I	Plar	ı	• (	Con	nme	ents
	Dep	artr	nen	t																									,,		
	W	a	t	е	r	v	1	i	е	t		F	i	1	t	е	r		Ρ	1	а	n	t								
	Add	lres	S																												
	2	2	2		W	a	t	е	r	v	1	i	е	t	-	S	h	a	k	е	r		R	d							
	City	/																Г				Zip									
	W	a	t	е	r	V	1	i	е	t								]	N	Y		1	2	1	8	9	-				
	Pho																														
	(	5	1	8	)	7	8	5	-	7	0	8	2																		
○ Lib	rary Ado	lres	s													C	) A	nnu	al l	Rep	ort	C	) S'	WN	1P 1	Plar	1	0(	Con	nme	ents
	City	/																				Zip									
																											-				
	Pho	ne						I																							]
	(				)				-																						
	•				,	L																									
• Oth	er Add	Ires	\$														A	nnu	al l	Rep	ort	C	S	WN	1P 1	Plar	1	• (	Con	nme	ents
	C	i	t	У		Н	a	1	1		2		1	5	t	h		S	t	r	е	е	t								
	City		-	1				_	_		_		_	-				-		_		Zip	0								
	W	a	t	е	r	v	1	i	е	t								]	N	Y		1	2	1	8	9	-				
	Pho	ne																												]	
	(	5	1	8	)	2	7	0	-	3	8	0	0																		
_	•													I		_												~ .	~		
• Wel	o Pa	age	UR	L:													A	nnu		Rep			) S'	WN	1P I	Plar	1	$\square$	Con	nme	ents
	W	W	W	•	W	a	t	е	r	v	1	i	е	t	•	С	0	m	/	С	i	t	У	/	W	a	t	е	r	-	S
	е	W	е	r		h	t	m																							
	Ple	ease	e pr	ovi	de	spe	cifi	ic a	ddr	ess	of	pag	ре у	whe	ere	rep	ort	car	ı be	e ac	ces	sed	l - r	ot	hor	ne	nag	re.			
○ eMa			· P-	011	ue	5 <b>P</b> •				000	UI	puz	>~			rop	011	eui	100					101		iic ,	P**8	-	Con	nme	ents

This report is being submitted for the reporting period ending March 9,	2 0 1 5	5
If submitting this form as part of a joint report on behalf of a coalition leave SPDF	ES ID blank	
Name of MS4/Coalition     City of Watervliet       N     Y       R     2	2 0 A 0	8 7
4.a. If this report was made available on the internet, what date was it posted?		
Leave blank if this report was not posted on the internet.	/	
4.b. For how many days was/will this report be posted?		
If submitting a report for single MS4, answer 5.a If submitting a joint report, an	swer 5.b	
5.a. Was an Annual Report public meeting held in this reporting period?         If Yes, what was the date of the meeting?         If Yes, what was the date of the meeting?	○ Yes	• No
If No, is one planned?	• Yes	○ No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this this reporting period?	s <b>report du</b> O Yes	<b>tring</b> ● No
If No, is one planned for each?	$\bigcirc$ Yes	• No
<b>6. Were comments received during this reporting period?</b> If Yes, attach comments, responses and changes made to	$\bigcirc$ Yes	○ No

SWMP in response to comments to this report.

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition City of Watervliet

#### 7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The City has updated the Organizational Chart. The City held its annual "Keep Vliet Neat" cleanup event.

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

The updated organizational chart has helped in streamlining the process for stormwater responsibilities. The cleanup event produced 40 volunteers.

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

(ex.: samples/participants/events)

2

7

0 8

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

• Yes  $\bigcirc$  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 City will annually update public contact information as needed. City will look to update its procedures on how it will respond to stormwater questions/complaints and how it will be documented. City will continue to organize and track number of volunteers for its' annual cleanup event.

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

SPDES ID

2 8 #

0 A

0 8

7

0 %

0

1 0

NYR2

1

Name of MS4/Coalition City of Watervliet
------------------------------------------

#### 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
- $\bigcirc$  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?

$\bigcirc$ Auto Recyclers	$\bigcirc$ Landscaping (Irrigation)
<ul> <li>Building Maintenance</li> </ul>	○ Marinas
$\bigcirc$ Churches	○ Metal Plateing Operations
$\bigcirc$ Commercial Carwashes	○ Outdoor Fluid Storage
○ Commercial Laundry/Dry Cleaners	○ Parking Lot Maintenance
$\bigcirc$ Construction Vehicle Washouts	○ Printing
$\odot$ Cross-Connections	○ Residential Carwashing
$\bigcirc$ Distribution Centers	○ Restaurants
$\bigcirc$ Food Processing Facilities	$\bigcirc$ Schools and Universities
$\bigcirc$ Garbage Truck Washouts	○ Septic Maintenance
$\bigcirc$ Hospitals	$\bigcirc$ Swimming Pools
$\bigcirc$ Improper RV Waste Disposal	○ Vehicle Fueling
$\bigcirc$ Industrial Process Water	○ Vehicle Maint./Repair Shops
• Other: S e w e r L i n e s C	O None         1       e       a       n       e       d
O Sewersheds:	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 Watervliet	N Y R 2 0 A 0 8 7
3.b.What types of illicit discharges have	been found during this reporting period?
$\bigcirc$ Broken Lines From Sanitary Sewer	○ Industrial Connections
$\bigcirc$ Cross Connections	$\bigcirc$ Inflow/Infiltration
$\bigcirc$ Failing Septic Systems	$\bigcirc$ Pump Station Failure
$\odot$ Floor Drains Connected To Storm Sewers	• Sanitary Sewer Overflows
$\bigcirc$ Illegal Dumping	$\bigcirc$ Straight Pipe Sewer Discharges
O Other:	○ None
4. How many illicit discharges/potentia reporting period?	l 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 connections have been eliminated during this reporting period?

• Yes

• Yes

• Yes

 $\bigcirc$  No

 $\bigcirc$  No

 $\bigcirc$  No

%

- **7.** Has the storm sewershed mapping been completed in this reporting period? If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

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

Ρ	а	ន	S	W	0	r	d		Ρ	r	0	t	е	С	t	е	d									
W	W	w	•	a	i	m	S	g	i	ទ	•	0	r	g	/	W	е	b	m	a	р					
URL																										 

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 Watervliet	N	Y	R	2	0	А	0	8	7

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

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

			 	 	 			 	 	 	 	 	 _	 	 ·		· · · ·		
UR	T					-											·]		
UR	L	· · · · · ·		 I	 			 	 	 	 	 			 I				
$\vdash$	-			 										 		 		=	
UR	L																		
F														 					
UR	L		 		 			 	 	 	 	 	 	 					
																	Ĺ	,	

- 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 No NT

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

9 0 8

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition City of Watervliet

#### 12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

The City had 1 sewer backup that was caused by grease/debris buildup in the sewer main. The City was unable to update/complete its stormwater GIS mapping due to time and resources but does plan on it this year. City has updated its IDDE procedures.

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

The sewer main backup was found and eliminated immediately. The updated IDDE procedures will better organize the process for city employees when an IDDE is needed.

#### 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?

• 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 City will review existing outfall mapping and update as needed. City will obtain a letter from the City's Attorney certifying their local law is equivalent to DEC's model local law. The City will continue to review, update, track, and file IDDE as they will arise. The City plans on working toward s finishing the GISing of the storm system.

SPE	DES	ID							
Ν	Y	R	2	0	A	0	8	7	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition City of Watervliet

SPI	DES	ID						
Ν	Y	R	2	0	A	0	8	7

1

0

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

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?

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

1

 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?

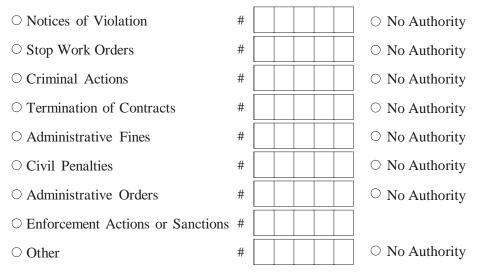
 If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law

II Tes, Towns, Chies and	villages provide date	of equivalent is 1.5	Sample Loc	al Law.	
			09/2004	• 03/2006	$\odot$ 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 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 5

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

SPDES ID

ΝY

R 2

0 A 0 8

1 0 0 %

0 0

%

7

Name of MS4/Coalition City of Watervliet

### Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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.	How many construction projects have been authorized for disturbances of one acre of	or n	nor	·e
	during this reporting period?			1

- 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?  $\odot$  NT

4.	What percent of active construction sites were inspected more than once?	$\odot$ NT
4.	what percent of active construction sites were inspected more than once?	$\cup$ r

- 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?

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 5

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

Name of MS4/Coalition City of Watervliet

SPDES ID

v	R	2	0	Δ	0	8	7
-	1	2	0	п	0	0	

#### 6. con't.:

Submit additional pages as needed.

• MS4/Coalition Office

	Dep	artr	nen	t																											
	W	а	t	е	r		Р	1	a	n	t																				
	Add	lres	s																												
	2	2	2		W	a	t	е	r	v	1	i	е	t	-	S	h	a	k	e	r		R	d							
	City	/																		_		Zip									
	W	a	t	е	r	v	1	i	е	t								N	Y	7		1	2	1	8	9	-				
	Pho	ne							I																						
	(	5	1	8	)	7	8	5	-	7	0	8	2																		
⊖ Lib	rary	7																													
	Add	lres	s	1																	1							1			
	City	7																		_		Zip						[			
																											-				
	Pho	ne							1																						
	(				)				-																						
• Oth	ner																														
	Add	lres	s																												
	5	0	1		1	9	t	h		S	t	r	е	е	t																
	City	7								L												Zip									
	W	a	t	е	r	v	1	i	е	t								N	r   Y	7		1	2	1	8	9	-				
	Pho	ne																													
	(				)				-																						
○ We	b Pa	age	UR	RL(s	3):	Р	leas	se p	rov	ide	spe	cifi	c a	ddre	ess '	whe	ere S	SW	PPI	Ps o	can	be a	acce	sse	d -	not	hoi	me	pag	e.	
	URL			(-				·· r			~r -																		r0		
																															$\neg$
	URL																														

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

Name of MS4/Coalition City of Watervliet

#### 7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

The City's 1 construction site requiring a SWPPP has been completed and the NOT was filed with DEC. The City is still in the process of reviewing and updating its SWPP review procedures.

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

The overall SWPPP for the project was effective for the erosion ans sediment control for the site.

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

(ex.: samples/participants/events)

1

7

0 8

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

• Yes  $\bigcirc$  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 Coordinator will obtain a letter from the City's Attorney certifying the cities local law in equivalent to DEC's model local law. City will continue to review and update its procedures for SWPPP review process.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

ΝY

R 2

Α

0 8

0

7

Name of MS4/Coalition City of Watervliet

#### Minimum Control Measure 5. Post-Construction Stormwater Management

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. 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			
• Filter Systems	2	2	0
Infiltration Basins	1	1	0
$\bigcirc$ Open Channels			
$\bigcirc$ Ponds			
$\bigcirc$ Wetlands			
• Other	4	4	3

- 2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance? O Yes • No
- **3.** What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?
- Building Codes • Municipal Comprehensive Plans

○ Overlay Districts ○ Open Space Preservation Program

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


#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	City of Watervliet	Ν	Y	R	2	0	Α	0	8	7

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

• Yes  $\bigcirc$  No

• No

No

%

○ Yes

○ Yes

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

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?

 Jow many stormwater		 	

to many stormwater management practices have been implemented as part of this sy	sten	1 111	l un	13
reporting period?			0	

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

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

If submitting this form as part of a joint report on behalf of a coalition leave S

City of Watervliet Name of MS4/Coalition

#### 6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

The City continues to inspect and maintain any post-construction practices its responsible for. The City has inventoried the new practices that are privately owned and operated.

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

The treatment systems are cleaned each year pulling large amount of floatables and sediment from the storm system.

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

2 (ex.: samples/participants/events)

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  No

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

City is in the process of reviewing its post construction procedures. The City will continue to update its inventory when new projects arise. Stormwater Coordinator will obtain a letter from the City's Attorney that certifies the city's construction activity local law is equivalent to DEC's model local law.



· · ·			
SPDES	IDł	olar	ık.
	$\mathbf{n}$	Jul	

	Ν	Y	R	2	(

#### **This report is being submitted for the reporting period ending March 9**, 2 0 1 5

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

Name of MS4/Coalition City of Watervliet



#### 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.

			Self-Assess	sment
			<b>Operation/Activ</b>	<u>ity/Facility</u>
			performed within	n the past 3
<b>Operation/Activity/Facility</b>	Addressed i	n SWMP?	<u>vears</u>	?
Street Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Bridge Maintenance	• Yes	• No	O Yes	• No
Winter Road Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Salt Storage	• Yes	○ No	• Yes	$\bigcirc$ No
Solid Waste Management	• Yes	○ No	• Yes	$\bigcirc$ No
New Municipal Construction and Land Disturba	nce • Yes	○ No	• Yes	$\bigcirc$ No
Right of Way Maintenance	O Yes	• No	O Yes	No
Marine Operations	····· OYes	• No	····· · Yes	• No
Hydrologic Habitat Modification	····· · Yes	• No	O Yes	• No
Parks and Open Space	• Yes	○ No	• Yes	$\bigcirc$ No
Municipal Building	• Yes	○ No	• Yes	$\bigcirc$ No
Stormwater System Maintenance	• Yes	○ No	• Yes	$\bigcirc$ No
Vehicle and Fleet Maintenance	• Yes		• Yes	$\bigcirc$ No
Other	····· O Yes	• No	····· · Yes	• No

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	City of Watervliet	Ν	Y	R	2	0	А	0	8	7

0 1 2 8 2 0 1 5

> 2 1

0 %

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

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

- 3. How many stormwater management trainings have been provided to municipal employees during this reporting period? 2
- 4. What was the date of the last training?
- 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? 9

#### This report is being submitted for the reporting period ending M 5

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

City of Watervliet Name of MS4/Coalition

#### 7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

The City has increased its organic waste participation to 98 residence. The City continues its street sweeping and catch basin cleaning program. City did 2 electronic recycling days. The City completed its 3 year facility self audit assessments to all its facilites using the updated stormwater coalition self audit form. The audit created BMPs that will be looked into by the respective parties for each facility.

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

The electronic recycling events collected a total of 7 tons worth of waste. The organic recycling collection was about 5.5 tons for the year. Catch basin cleaning program did 118 catch basins and 3 floatable treatment systems, helping remove sediment and floatable form the storm system.

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

3 (ex.: samples/participants/events)

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  No

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

After facility self audit was done, BMPs were created for each facility. These BMPs will be reviewed and applied by the respective parties of each facility. The street sweeping and catch basin cleaning program will continue. The city will establish a sweeping schedule for publicly own parking lots. City will hold employee training geared towards spills and skill for municipal type employees.



farch 9	),	2	0	1

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

#### Minimum Control Measure 1. Public Education and Outreach

1 3

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:

• Construction Sites	• Pesticide and Fertilizer Application
• General Stormwater Management Information	• Pet Waste Management
$\bigcirc$ Household Hazardous Waste Disposal	○ Recycling
O Illicit Discharge Detection and Elimination	Riparian Corridor Protection/Restoration
• Infrastructure Maintenance	O Trash Management
• Smart Growth	• Vehicle Washing
○ Storm Drain Marking	$\bigcirc$ Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	$\bigcirc$ Wetland Protection
<pre> Other: C o a l i t i o n W e b s i t e - W h a Other </pre>	O NonetYouCanDo
2. Specific audiences targeted during this reporting period:	
Public Employees     Contractors	
• Residential O Developers	

• Businesses • General Public

- $\bigcirc$  Restaurants  $\bigcirc$  Industries
- Other: O Agricultural

								-												
S	t	u	d	е	n	t	S													
Ot	her																			

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	PI	DES	ID				
N	ſ	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:

<ul> <li>Construction Site Operators Trained</li> </ul>	# Trained 3 5
○ Direct Mailings	# Mailings
• Kiosks or Other Displays	# Locations 8
• List-Serves	# In List 4 5 8
○ Mailing List	# In List
$\bigcirc$ Newspaper Ads or Articles	# Days Run
Public Events/Presentations	# Attendees 1 5 3
School Program	# Attendees 1 6 6
○ TV Spot/Program	# Days Run
• Printed Materials:	Total # Distributed642
Locations (e.g. libraries, town offices, kiosks)	

А	1	L	a		0	11	L		T.	a	<u>т</u>	T							
С	i	t	У	А	1	b	a	n	У	S	С	h	0	0	1	Ρ	r	0	g
Ν	0	r	m	a	n	S	k	i	1	1	С	r	е	е	k				
G	I		С	0	d	е	R	е	v	i	е	w	Ρ	r	0	g	r	a	m

• Other:

H o s t 4 C W P W e b c a s t s

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

URI	-		_		_																									
W	w	w	•	ន	t	0	r	m	w	a	t	е	r	a	1	b	а	n	У	С	0	u	n	t	У	•	0	r	g	

URL

UN	-															

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

SPL	JES	ID				
Ν	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.

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.

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

BMP 1-1 TAAW: 1) Map Set maps-updated 2010 urbanized area; not all formatted for use with TAAW, but will be, still important. ; 2) Collected Measurable Goals sheets; info somewhat useful for budgeting purposes. BMP 1-3 Website: To/From links corrected for all members; disconnected links common; important to monitor links frequently. GoogleAnalytics for website (2828 sessions/2015; 1637 visits (sessions?)-a 1191 increase. BMP 1-7 List Serve-no updates of officials.

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

		4	
_			

(ex.: samples/participants/events)

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

• Yes  $\bigcirc$  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).

Coalition has an updated Joint SWMP Plan titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some Coalition goals for MCM1 presented here. BMP 1-1 TAAW: add sub-watershed delineations to Map Set; clarify directions. BMP 1-3 Website: check/correct Member To/From links, post reg docs, promote public comment portal, post new edu info. BMP 1-7 List Serve: update municipal contacts. BMP 1-4 Publications: maintain inventory, 1 new doc (plant care).

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

 O

#### 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 3

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

○ Cleanup Events		# Events					
• Comments on SWMP Received		# Comments					0
• Community Hotlines	Phone #	<b>(</b> 518 <b>)</b> 447	-	5	6	4	5
Phone # ( )	Phone #		- [				
Phone # ( )	Phone #		-				
Phone # ( )	Phone #		-				
Phone # ( ) – –	Phone #		-				
Phone # ( )	Phone #		- [				
$\bigcirc$ Community Meetings		# Attendees					
$\bigcirc$ Plantings		Sq. Ft.					
○ Storm Drain Markings		#Drains					
$\bigcirc$ Stakeholder Meetings		# Attendees					
• Volunteer Monitoring		# Events					3
O Other:							

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

Program (SWMP) Plan provided?	۲	Ye	es	0	No
List-Serve     # In List			4	5	8
O 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 5

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

SPL	DES	ID				
Ν	Y	R	2	0		

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

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

URI	_																														
W	W	W	•	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		
JRI				L		L			I		I		L				L	I				I	<u> </u>							L	L
																															F
																															F
ID I	<u> </u>			ļ		ļ			<u> </u>		<u> </u>		ļ				ļ	<u> </u>				<u> </u>									L
JRI																															
																															F
																															L
URI																															Γ
																														<u> </u>	
URI	Í																													<u> </u>	Г
URI	Í					I																									Γ
URI																															Γ
																														L	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

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

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

	MS4/Coalition Office										• Annual Report							SWMP Plan				1	• Comments								
	Dep											~			-							_	-					~			
	S	t	0	r	m	W	a	t	е	r		С	0	а	1	i	t	i	0	n	-	A	1	b	а	n	У	С	n	t	У
	Add										~								-					-							
	1 City	1	2		S	t	a	t	е		S	t	r	е	е	t	1		R	0	0	m		7	2	0					
	A	1	b	a	n	У												1	N	Y		Zip 1	2	2	0	7	_				
	Pho					1												Ľ						_	•		ļ				
	(	5	1	8	)	4	4	7	-	5	6	4	5																		
○ Lib	rary	7														C	A	nnu	al I	Rep	ort	C	S	WN	1P 1	Plar	ı	$\circ$ (	Con	nme	ents
	Ađo	lres	S																	r			~				_				
	City	/																Г				Zip					1				
																											-				
	Pho	ne			1	·			1 1	L.				1																	
	(				)				-																						
$\bigcirc Oth$	~**															C		0011	1 I	Don	ort	C	1 61	an.	/D 1	Dlar	•	$\cap$	~ on	nma	nta
0 Otil	○ Other ○ Annual Report ○ SWMP Plan ○ Comments																														
	City	/																				Zip					1				
																											-				
	Pho	ne																L									I				
	(				)				-																						
• Wel	D D	200	IIP	т·														nnıı	a1 1	Rep	ort		S	WN	1P 1	Plar	ı		Con	nme	ents
		_		L.	G	+		r	m	5.7	2	t		r	2	1	b	a	n	_							-				
	W	W	W	•	S	t	0	r	m	W	a	L	е	r	a		d	a	11	У	С	0	u	n	t	У	•	0	r	g	
		ease	e pr	ovi	de	spe	cif	ic a	ddr	ess	of	pag	ge v	whe	ere	rep	ort	car	ı be	e ac	ces	sed	l - r	ot	hor	ne	pag				
• eMa	ail																											• (	Con	nme	ents
	Ŋ	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			

This report is being submitted for the reporting period ending March 9, 2 0	1 5	
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		
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. $05/01/2$	2 0 1	1 5
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	5.b	
5.a. Was an Annual Report public meeting held in this reporting period?       O Y         If Yes, what was the date of the meeting?       If Yes, what was the date of the meeting?	les (	⊃ No
If No, is one planned?	les (	⊃ No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this reporting period?	Yes	• No
If No, is one planned for each?	(es (	• No
<b>6.</b> Were comments received during this reporting period? O Y If Yes, attach comments, responses and changes made to	(es	⊃ No

SWMP in response to comments to this report.

#### This report is being submitted for the reporting period ending Marc

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

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.

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

BMP 2-3 SWMP: SWMPv2 (2012 to 2015) updated. Completed tasks/goals noted, issues explained, title of document, Joint SWMP BMP Data Report. New SWMP needs to be developed for 2015 to 2017 and matched to NYSDEC interim MS4 Permit. Coalition Sub-Committee has met, some decisions: BMPs similar to previous SWMP, some modifications; individual goals for individual members; added MCM 8 Training. BMP 2-6 Clean Up Activities: "Thank You" dropped, no time.

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

(ex.: samples/participants/events)

1

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

• Yes  $\bigcirc$  No

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

• Yes  $\bigcirc$  No

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

As of May, 2015, Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Document includes new/modified BMPs applicable to all Coalition members; goals are specific to Coalition and individual MS4 members. Some goals for MCM2 presented here. BMP 2-2 Annual Report & Public Comments: promote and monitor public comment portal on Coalition website. BMP 2-11 WAVE: Monitor 4 sites w/ volunteers.

SPI	DES	ID				
Ν	Y	R	2	0		

ch 9,	2	0	1	5	

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID Υ R 2 0

#

%

Ν

Stormwater Coalition of Albany County Name of MS4/Coalition

#### Minimum Control Measure 3. Illicit Discharge Detection and Elimination

1 3

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

- On behalf of an individual MS4
- On behalf of a coalition
  - How many MS4s contributed to this report?
- 1. Enter the number and approx. percent of outfalls mapped:
- 2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?
- 3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

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

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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 C	County SPDES ID											
3.b.What types of illicit discharges have	been found during this reporting period?											
$\bigcirc$ Broken Lines From Sanitary Sewer	$\bigcirc$ Industrial Connections											
○ Cross Connections	$\bigcirc$ Inflow/Infiltration											
○ Failing Septic Systems	○ Pump Station Failure											
$\bigcirc$ Floor Drains Connected To Storm Sewers	$\bigcirc$ Sanitary Sewer Overflows											
○ Illegal Dumping	○ Straight Pipe Sewer Discharges											
Other:	○ None											

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

No

O No

O No

÷

○ Yes

• Yes

• Yes

- **7. Has the storm sewershed mapping been completed in this reporting period?** If No, approximately what percent was completed in this reporting period?
- 8. Is the above information available in GIS? Is this information available on the web? If Yes, provide URL(s):

reporting period?

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

URI																										 	
Ρ	А	S	S	W	0	R	D		Р	R	0	Т	Е	С	Т	Е	D										
W	W	W	•	a	i	m	S	g	i	s	•	0	r	g	/	W	е	b	m	а	р	/					
*	*	R	е	ន	t	r	i	С	t	е	d		А	С	С	е	S	s	*	*							
URI																											

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

R 2

0

NY

Name of MS4/Coalition Stormwater Coalition of Albany County

#### 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.

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

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

BMP 3-1 Map Outfalls: no sample form provided to collect outfall location information for construction projects; instead individual MS4s may map post-construction outfalls, no form needed. BMP 3-2 AIMS: map layers updated, process to evaluate AIMS started; now a priority given server issues. BMP 3-4 Storm Sys/Sewershed Mapping: few requests from past year. BMP 3-5 ORI: kits re-stocked as needed; Coalition staff assist, as needed & funded.

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

(ex.: samples/participants/events)

4

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

• Yes  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). Some goals for MCM3 presented here. BMP 3-2 AIMS: Coalition decides what to do about AIMS (replace, decommission, enhance); Coalition works with AIMS vendor to update new layers and maintain web application for as long as possible given budget constraints. BMP 3-8 IDDE Procedures: Coalition assists MS4s with IDDE Procedures.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM4 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1$ 5

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

SPDES ID Y R 2 0

N

Stormwater Coalition of Albany County Name of MS4/Coalition

#### 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.

BMP 4-2 SWPPP Review E/SC; 4-4 Complaint; 4-5 Construction Inspection & Enforcement; 4-6 Education-Construction Activity; 5-5 SWPPP Review Procedures Post Construction; 5-9 Operations and Maintenance Procedures: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor/support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure info posted on Coalition website.

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

Coalition supported all individual MS4 efforts to write procedures (sharing of procedures, organized a Procedures Training with NYSDEC staff, circulated regulatory comments about procedures). Procedure information posted on Coalition website Member pages.

#### 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  $\bigcirc$  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 Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No Coalition goals for MCM5 presented here. Instead, Coalition "Procedures" goals are found in MCM 7 Stormwater Program Management. BMP 7-7 Procedures and Forms Compendium: Coalition will assist MS4s in consolidating existing/new documents into compendium of procedures/forms named in multiple MCMs of MS4 Permit.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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				
Ν	Y	R	2	0		

#### Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?



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

			Self-Assessment						
		<b>Opera</b>	tion/Activi	ity/Facility					
		<u>perfor</u>	<u>med withir</u>	<u>n the past 3</u>					
<b>Operation/Activity/Facility</b>	Addressed in	<u>n SWMP?</u>	<u>vears?</u>	<u> </u>					
Street Maintenance	O Yes	○ No	O Yes	○ No					
Bridge Maintenance	• Yes	○ No	O Yes	$\bigcirc$ No					
Winter Road Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No					
Salt Storage	O Yes	○ No	O Yes	$\bigcirc$ No					
Solid Waste Management	O Yes	○ No	O Yes	$\bigcirc$ No					
New Municipal Construction and Land Disturba	ance $\bigcirc$ Yes	○ No	○ Yes	$\bigcirc$ No					
Right of Way Maintenance	O Yes	○ No	$\odot$ Yes	$\bigcirc$ No					
Marine Operations	O Yes	○ No	$\odot$ Yes	$\bigcirc$ No					
Hydrologic Habitat Modification	O Yes	○ No	O Yes	$\bigcirc$ No					
Parks and Open Space	····· O Yes	○ No	$\odot$ Yes	$\bigcirc$ No					
Municipal Building	o	○ No	○ Yes	$\bigcirc$ No					
Stormwater System Maintenance	O Yes	○ No	O Yes	$\bigcirc$ No					
Vehicle and Fleet Maintenance		○ No	⊖ Yes	$\bigcirc$ No					
Other	○ Yes	○ No	⊖ Yes	$\bigcirc$ No					

#### **This report is being submitted for the reporting period ending March 9,** 2 0 1 5

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

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

SPDES ID

Y R 2

0

Ν

1 0

9

2 0 1 4

1 3 0

%

$\bigcirc$ Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
$\bigcirc$ Streets Swept (Number of miles X Number of times swept)	# Miles	
$\bigcirc$ Catch Basins Inspected and Cleaned Where Necessary	#	
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	# Acres	
3. How many stormwater management trainings have been provided to	o municipa	l employees
during this reporting period?		1 1

- 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 5

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

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.

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

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

BMP 6-1 and 6-2 Inventory and Assessment-Municipal Facilities and Operations: Coalition provided Inventory and Assessment support to 3 Coalition members, as requested and funded. BMP 6-9 Staff Training: one elected official received Clean Water Act Basics training, not the road show as planned, however training materials were developed for future programs.

#### 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).

The Coalition has an updated Joint SWMP Plan, titled SWMPv3 (2015-2017), also posted on Coalition website (Plan/Program tab). No specific Coalition goals for MCM 6; instead Coalition staff as reflected in 2015 Coalition budget and requested by individual members, directly assist MS4s in implementing their individual MCM 6 goals. Training related Coalition goals (organize, host, fund) are described in SWMPv3 MCM 8 Train'g-Staff, Plan'g/Zon'g Bds, Other Muni Officials.

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Stormwater Coalition of Albany County Name of MS4/Coalition

#### SPDES ID Ν Υ R 2 0

### Additional Watershed Improvement Strategy Best Management Practices

3 1

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?

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		
Onondaga 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	itional 1,2,3,4,7a-d,9		Pathogens		

#### 1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? ○ Yes

○ No ● N/A

#### 2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?

○ Yes ○ No

• N/A

%

%

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

Estimate what percentage was mapped in this reporting period.

Additional BMPs Page 1 of 3

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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	Stormwater Coalition of Albany County	Ν	Y	R	2	0		

- 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? O Yes O No O N/A
- 4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?
- 5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? Yes No N/A
- 6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? ○ Yes ○ No ● N/A
- 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading?
   Yes
   No
   N/A
- 7b. How many projects have been sited in this reporting period?
- 7c. What percent of the projects included in 7b have been completed in this reporting period?
- 7d. What percent of projects planned in previous years have been completed?

○ No Projects Planned

%

%

- 8a.Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands?

   Yes
   No
- 8b.Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? ○ Yes ○ No ● N/A

#### This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

9. Has your MS4/Coalition developed and implemented a program of native planting? Yes
No
N/A

10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?
Yes
No
N/A
11. Does your MS4/Coalition have a pet waste bag program?
Yes
No
N/A

12. Does your MS4/Coalition have a program to manage goose populations?

Yes
No
N/A