

DRAFT

Stormwater Coalition of Albany County Joint Annual Report

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

**Reporting Period
March 10, 2018 to March 9, 2019**

BACKGROUND

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

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

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

HOW TO SUBMIT COMMENTS

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

OTHER INFORMATION

1. Hard copies of this Draft Joint Annual Report are located at the Stormwater Coalition office, 175 Green Street, Albany, NY 12202 and at local MS4/municipal offices (see Draft Annual Report MCM 2 Page 4 of 6 for address information).
2. Public comments are due 4pm, Friday, May 17, 2019.
3. If interested, prior to May 17 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, see order below with shared Coalition data inserted at the end of each individual report. The SPDES Permit No. of each MS4 is in parenthesis. Goals for the upcoming year are based on an updated Joint Stormwater Management Program Plan document completed in April, 2019 (SWMP Doc 2019-2020). To view the SWMP Plan document, see Coalition website.

Traditional Non Land Use Control MS4

1. Albany County (NYR20A359)

Non-Traditional MS4

2. University at Albany-SUNY (NYR20A234)

Traditional Land Use Control MS4s

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

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



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MS4 Annual Report Cover Page**MCC form for period ending March 9,**

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

City of Cohoes

SPDES ID

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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2 0 1 9

Name of MS4 City of Cohoes

SPDES ID

N Y R 2 0 A 2 4 3

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

S h a w n

MI

Last Name

M o r s e

Title

M a y o r

Address

9 7 M o h a w k S t r e e t

City

C o h o e s

State

N Y

Zip

1 2 0 4 7 -

eMail

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Phone

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County

A l b a n y

MCC form for period ending March 9,

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City of Cohoes

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Important Instructions - Please Read

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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).
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- ☐ 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
G a r r y	F	N a t h a n

Title																			
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City	State	Zip
C o h o e s	N Y	1 2 0 4 7 -

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4 City of Cohoes

SPDES ID

N Y R 2 0 A 2 4 3

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

For each contact, select all that apply:

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

First Name

R o b y n

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Last Name

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Title

C i t y P l a n n e r

Address

9 7 M o h a w k S t r e e t

City

C o h o e s

State

N Y

Zip

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Phone

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County

A l b a n y

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2019

Name of MS4 City of Cohoes

SPDES ID

N Y R 2 0 A 2 4 3

Section 3 - Partner Information

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

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

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

SPDES Partner ID - If applicable

N Y R 2 0

Address

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

City

A l b a n y

State

N Y

Zip

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eMail

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Phone

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Legally Binding Agreement in accordance
with GP-0-08-002 Part IV.G.?

☒ Yes ☐ No

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

● MM1 P U B L I C A T I O N S - P R O G R A M S - W E B S I T E

● MM2 S W M P D o c - A R P u b l i c I n p u t - W A V E S t r m

● MM3 O F S y s M a p g S w I M L y r - S v y 1 2 3 O R I F o r m

● MM4 S v y 1 2 3 C o l l e c t r - C o n s I n s p F o r m

● MM5 P C S M P M a p g S w I M - S W P P P R e v i e w L y r s

● MM6 F a c M a p g S w I M - S v y 1 2 3 M u n i F a c F o r m

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,

2019

SPDES ID

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Name of MS4 City of Cohoes

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

S h a w n

MI

Last Name

M o r s e

Title (Clearly print title of individual signing report)

M a y o r

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

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City of Cohoes

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Water Quality Trends

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

- | | |
|---|---|
| How many MS4s are contributed to this report? | 1 |
|---|---|

☐ Yes ☒ No

If Yes, choose one of the following

- ☐ 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.

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Name of MS4/Coalition

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MS4 Annual Report Form**This report is being submitted for the reporting period ending March 9,**

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

Name of MS4/Coalition

City of Cohoes																			
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3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:☐ Construction Site Operators Trained

Trained

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☒ Direct Mailings

Mailings

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☒ Kiosks or Other Displays

Locations

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☐ List-Serves

In List

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☐ Mailing List

In List

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☐ Newspaper Ads or Articles

Days Run

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☒ Public Events/Presentations

Attendees

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☐ School Program

Attendees

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☐ TV Spot/Program

Days Run

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☒ Printed Materials:

Total # Distributed

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

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☐ Other:

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

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Name of MS4/Coalition	City of Cohoes
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MS4 Annual Report Form

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

Name of MS4/Coalition

City of Cohoes

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Insert stormwater information in some City correspondence, and had direct mailings to some businesses.

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

Included a link to the Stormwater Education Facebook page with stormwater information. Number of people reached on Facebook was 2647.

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

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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

Continue to include stormwater information in mailings and encourage residents to visit the Stormwater Education Facebook page for timely posts about stormwater, pollution prevention, green infrastructure, and upcoming events.

MS4 Annual Report Form

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

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 Cohoes

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Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?	1
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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:

- | | | |
|--|-----------------------------------|---|
| <input checked="" type="radio"/> Cleanup Events | # Events | 8 |
| <input checked="" type="radio"/> Comments on SWMP Received | # Comments | 0 |
| <input checked="" type="radio"/> Community Hotlines | Phone # (5 1 8) 4 4 7 - 5 6 4 5 | |
| Phone # () - | Phone # () - | |
| Phone # () - | Phone # () - | |
| Phone # () - | Phone # () - | |
| Phone # () - | Phone # () - | |
| Phone # () - | Phone # () - | |
| <input type="radio"/> Community Meetings | # Attendees | |
| <input type="radio"/> Plantings | Sq. Ft. | |
| <input type="radio"/> Storm Drain Markings | # Drains | |
| <input type="radio"/> Stakeholder Meetings | # Attendees | |
| <input checked="" type="radio"/> Volunteer Monitoring | # Events | 1 |
| <input type="radio"/> Other: | | |

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

- | | | | | | | | |
|---|---|--|--|--|--|--|--|
| <input type="radio"/> List-Serve | # In List | | | | | | |
| <input type="radio"/> Newspaper Advertising | # Days Run | | | | | | |
| <input type="radio"/> TV/Radio Notices | # Days Run | | | | | | |
| <input checked="" type="radio"/> Other: | C o m m o n 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.

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes																			
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SPDES ID

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2. URL(s) con't.:

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

URL

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

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

[illegible][illegible][illegible][illegible][illegible][illegible][illegible]

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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SPDES ID

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

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

☒ MS4/Coalition Office ☐ Annual Report ☐ SWMP Plan ☐ Comments

Department

E	n	g	i	n	e	e	r	i	n	g	D	e	p	a	r	t	m	e	n	t
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Phone

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☐ Library ☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

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City

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☒ Other ☐ Annual Report ☐ SWMP Plan ☐ Comments

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City

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Zip

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Phone

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☒ Web Page URL: ☐ Annual Report ☐ SWMP Plan ☐ Comments

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

☒ eMail ☐ Comments

S	W	C	O	A	L	I	T	I	O	N	@	A	L	B	A	N	Y	.	C	O	M
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MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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4.a. If this report was made available on the internet, what date was it posted?

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

0	4
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 /

2	3
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 /

2	0	1	9
---	---	---	---

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

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

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

☒ Yes ☐ No

If Yes, what was the date of the meeting?

0	4
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 /

2	3
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2	0	1	9
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If No, is one planned?

☐ Yes ☐ No

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

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

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

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Host Spring Clean-Up/ Hazardous Waste and Electronics Recycling. Host Beautification Days. Distribute literature with information about water quality.

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

Public participation has been relatively strong at events. Have reached 400 "likes" on Stormwater Education Facebook page.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

Continue these programs and implement new programs to involve more residents.

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

		1
--	--	---

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

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

 #

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

 %

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

		0
--	--	---

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

☒ Auto Recyclers

☐ Landscaping (Irrigation)

☒ Building Maintenance

☐ Marinas

☐ Churches

☐ Metal Plateing Operations

☐ Commercial Carwashes

☐ Outdoor Fluid Storage

☐ Commercial Laundry/Dry Cleaners

☐ Parking Lot Maintenance

☒ Construction Vehicle Washouts

☐ Printing

☐ Cross-Connections

☐ Residential Carwashing

☐ Distribution Centers

☒ Restaurants

☐ Food Processing Facilities

☐ Schools and Universities

☐ Garbage Truck Washouts

☐ Septic Maintenance

☐ Hospitals

☒ Swimming Pools

☐ Improper RV Waste Disposal

☒ Vehicle Fueling

☐ Industrial Process Water

☒ Vehicle Maint./Repair Shops

☒ Other:

☐ None

E	d	d	y		H	e	a	l	t	h		C	a	r	e		F	a	c	i	l	i	t	y						
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☐ Sewersheds:

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MS4 Annual Report Form

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

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 Cohoes

SPDES ID

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

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

[illegible]

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

		0
--	--	---

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

		0
--	--	---

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

		0
--	--	---

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

☐ Yes ☒ No

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

	8	0	%
--	---	---	---

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

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

URL

[illegible]

URL

[illegible]

2	0	1	9
---	---	---	---

Name of MS4/Coalition	City of Cohoes
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N	Y	R	2	0	A	2	4	3
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URL

[illegible]

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[illegible]

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[illegible]

- | | | | |
|--|---|---|---|
| | 4 | 0 | % |
|--|---|---|---|

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

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

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

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

Complete, distribute, and file IDDE program and track detected and eliminated illicit discharges.

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

Written procedures lead to an organized tracking system and faster documentation and elimination of illicit discharges. Work request forms documented with "Facility Dude" software.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

Periodically review procedures to ensure they are accurate. Continue to document illicit discharges and educate residents of the effects of illicit discharges. Review post-construction O&M requirements.

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

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

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

How many MS4s contributed to this report?

		1
--	--	---

- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?** ☒ Yes ☐ No
- 1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?** ☒ Yes ☐ No ☐ NT

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

☐ 09/2004 ☒ 03/2006 ☐ NT

- 2. Does your MS4/Coalition have a SWPPP review procedure in place?** ☒ Yes ☐ No
- 3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

		1
--	--	---
- 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:

<input type="radio"/> Notices of Violation	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Administrative Fines	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Civil Penalties	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Administrative Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input checked="" type="radio"/> Enforcement Actions or Sanctions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td>2</td></tr></table>						2	
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<input type="radio"/> Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority

MS4 Annual Report Form

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

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

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

		1
--	--	---

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

		1
--	--	---

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

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

1	0	0
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 %

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

1	0	0
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 %

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

☐ Yes ☒ No ☐ NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?

☐ Yes ☒ No ☐ NT

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

☐ Yes ☐ No

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

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

Document construction site inspection and enforce procedures.

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

Streamlines procedures by identifying who is responsible for what parts of inspections and enforcement. Problems noted in inspections were corrected more efficiently.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

Continue to save all inspection reports and resolve construction site issues as quickly as possible. Periodically review procedures to ensure they are accurate.

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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Minimum Control Measure 5. Post-Construction Stormwater Management

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

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

How many MS4s contributed to this report?

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

	# Inventoried	# Inspections	# Times Maintained									
<input type="radio"/> Alternative Practices	<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>			
<input checked="" type="radio"/> Filter Systems	<table><tr><td></td><td></td><td>6</td></tr></table>			6	<table><tr><td></td><td></td><td>1</td></tr></table>			1	<table><tr><td></td><td></td><td></td></tr></table>			
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<input checked="" type="radio"/> Infiltration Basins	<table><tr><td></td><td></td><td>1</td></tr></table>			1	<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>			
		1										
<input type="radio"/> Open Channels	<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>			
<input checked="" type="radio"/> Ponds	<table><tr><td></td><td>1</td><td>0</td></tr></table>		1	0	<table><tr><td></td><td></td><td>2</td></tr></table>			2	<table><tr><td></td><td></td><td>2</td></tr></table>			2
	1	0										
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<input type="radio"/> Wetlands	<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>			
<input type="radio"/> Other	<table><tr><td></td><td></td><td>1</td></tr></table>			1	<table><tr><td></td><td></td><td>1</td></tr></table>			1	<table><tr><td></td><td></td><td></td></tr></table>			
		1										
		1										

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

☒ Yes ☐ No

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

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

☒ Other:

R	e	v	i	s	e	d		C	o	d	e		f	o	r		G	r	e	e	n		I	n	f	r	a			
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MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☒ Yes ☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

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

		0
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 %

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

Passed New G.I. planning. Have reduced number of parking spaces.

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

City has reviewed model local law and posted a revised local law. Cohoes local law has been revised to include green infrastructure practices in new construction projects, and has reduced the number of parking spaces and added more green spaces.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

City comp. plan is being updated to include G.I. and better site design

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

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

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

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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2. Provide the following information about municipal operations good housekeeping programs:

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

				3
--	--	--	--	---
- ☒ Streets Swept (Number of miles X Number of times swept) # Miles

	1	4	7	4
--	---	---	---	---
- ☒ Catch Basins Inspected and Cleaned Where Necessary #

		1	6	6
--	--	---	---	---
- ☒ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

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

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

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

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

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

4. What was the date of the last training?

0	4	/	1	9	/	2	0	1	8
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5. How many municipal employees have been trained in this reporting period?

		1
--	--	---

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

	1	0	%
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MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

Green infrastructure reporting is on going. Catch basin cleaning fell short of the goal due to equipment breakdowns. The City of Cohoes hopes to achieve goal this year as equipment is back in operation.

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

More developers are aware of the green infrastructure goals.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

Student interns will be aiding in facility audits as well as O.R.I. inspections

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

How many MS4s contributed to this report?

1	1
---	---

1. Targeted Public Education and Outreach Best Management Practices

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

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

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

2. Specific audiences targeted during this reporting period:

- | | |
|--|---|
| <input checked="" type="radio"/> Public Employees
<input checked="" type="radio"/> Residential
<input checked="" type="radio"/> Businesses
<input type="radio"/> Restaurants
<input checked="" type="radio"/> Other: | <input checked="" type="radio"/> Contractors
<input type="radio"/> Developers
<input checked="" type="radio"/> General Public
<input type="radio"/> Industries
<input type="radio"/> Agricultural |
|--|---|

G	e	n	e	r	a	l	P	u	b	l	i	c	-	C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e		
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Other

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

☒ Construction Site Operators Trained

Trained

			4	7
--	--	--	---	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				7
--	--	--	--	---

☒ List-Serves

In List

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

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

			8	4
--	--	--	---	---

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

			5	6
--	--	--	---	---

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

P	r	e	s	e	n	t	a	t	i	o	n	H	a	n	d	o	u	t	s
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2		C	W	P		W	e	b	c	a	s	t	s						
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H	R	W	s	h	e	d	A	l	l	i	a	n	c	e	-	P	r	e	s
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S	t	o	r	m	M	a	p	g	-	P	a	t	r	o	o	n	C	r	k
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☒ Other:

2		C	W	P		W	e	b	c	a	s	t	-	A	r	c	h	i	v
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☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

Coalition goals for 2018/2019: 1. Maintain/update Coalition website (member info; post DRAFT Joint AR/ SWMP doc for public comment; post new publications); 2. Provide Coalition members with brochures; 3. Provide traditional MS4 members with a Public Education Program Development Tool which displays the location of target audiences (residential, commercial, institution, industrial); the associated pollution generating behaviors; and likely pollutants of concern.

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

1. Coalition website maintained and updated
2. Brochures provided or printed when requested
3. Traditional MS4s provided with hard copy map of their MS4 land use types, matched to target audience types (residential, commercial, institutional, industrial), with info about associated pollution generating behavior, and Pollutants of Concern. Land use/target audience layer on SwIM.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2019/2020 Coalition Goals: 1. Support and update Coalition website; 2. Sponsor one Center for Watershed Protection webcast; 3. Print and distribute stormwater publications for interested members; 4. Understand and explain to members Public Education/Outreach requirements suggested by the DRAFT Permit (GP-0-17-002; 5. Discuss with members the current inventory of printed material/decide which if any publications should be printed in large quantities/modified/dropped.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0			
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Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?	1	1
---	---	---

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:

- | | | | | | |
|---|--|--|--|----------------------|---|
| <input type="radio"/> Cleanup Events | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input checked="" type="radio"/> Comments on SWMP Received | # Comments | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="0"/> |
| <input checked="" type="radio"/> Community Hotlines | Phone # | (<input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="8"/>) | <input type="text" value="4"/> <input type="text" value="4"/> <input type="text" value="7"/> | - | <input type="text" value="5"/> <input type="text" value="6"/> <input type="text" value="4"/> <input type="text" value="5"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> | <input type="text"/> | - | <input type="text"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> | <input type="text"/> | - | <input type="text"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> | <input type="text"/> | - | <input type="text"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> | <input type="text"/> | - | <input type="text"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> | <input type="text"/> | - | <input type="text"/> |
| <input type="radio"/> Community Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Plantings | Sq. Ft. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Storm Drain Markings | # Drains | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Stakeholder Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input checked="" type="radio"/> Volunteer Monitoring | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="4"/> |
| <input checked="" type="radio"/> Other: P u b l i c C o m m e n t s J o i n t D R A F T M S 4 P m t | | | | | |

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

- | | | | | | | |
|---|------------|--|--|--|---|---|
| <input checked="" type="radio"/> List-Serve | # In List | | | | 3 | 4 |
| <input type="radio"/> Newspaper Advertising | # Days Run | | | | | |
| <input type="radio"/> TV/Radio Notices | # Days Run | | | | | |
| <input type="radio"/> Other: | | | | | | |
- ☒ Web Page URL: Enter URL(s) on the following two pages.

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0					
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2. URL(s) con't.:

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

URL

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URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
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SPDES ID

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

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

0	5
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 /

0	3
---	---

 /

2	0	1	9
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4.b. For how many days was/will this report be posted?

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

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

☐ Yes ☐ No

If Yes, what was the date of the meeting?

--	--

 /

--	--

 /

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If No, is one planned?

☐ Yes ☐ No

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

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

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

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

Jan, 2018 the Coalition received notice that MS4Web software used to write/update the Joint Coalition SWMP document had been replaced by MS4Web2.0. Using the new format, the SWMP document was updated. "Goals met" were tracked as Activities, noting what happened, when. New goals were written covering the time frame: 3/10/2018 to 3/9/2019 (2018-2019). These goals included elements of proposed MS4 Permit (GP-0-17-002). 2 WAVE stream events planned for '18.

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

A hybrid Joint Coalition SWMP Plan "Annual Evaluation" document listing activities completed from 3/10/2017 to 3/9/2018 and goals for the permit reporting year 3/2018 to 3/2019) was posted on the Coalition website 4/28/2018. The CBI MS4Web 2.0 SWMP Plan module was used to create the document. Completed 4 Coalition-wide WAVE stream monitoring events (3 days & 4 sites)-1 site Salt Kill; 2 sites Vly Creek; and 1 site Lisha Kill.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2019/2020 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. With Coalition members, identify plausible, doable public participation activities which focus on water quality directly, which could be organized spring, summer or early fall. Develop an implementation plan with members, which respects available time. Develop a budget and staffing plan to implement, include in 2020 Coalition budget if advised.

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Stormwater Coalition of Albany County

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How many MS4s contributed to this report?	1	1
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- ☐ Broken Lines From Sanitary Sewer
- ☐ Cross Connections
- ☐ Failing Septic Systems
- ☐ Floor Drains Connected To Storm Sewers
- ☐ Illegal Dumping
- ☐ Other:
- ☐ Industrial Connections
- ☐ Inflow/Infiltration
- ☐ Pump Station Failure
- ☐ Sanitary Sewer Overflows
- ☐ Straight Pipe Sewer Discharges
- ☐ None

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☐ Yes ☐ No

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☒ Yes ☐ No

☒ Yes ☐ No

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

GRANT: 1. Complete field work system/program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Review/prepare exist'g datasets from UAlb/T-Bethlehem/T-Colonie for Krumkill/Patroon/Ann Lee Pond for sewershed delineations; 3. Complete sewershed delineations; 4. Use Survey123 to develop ORI form; 5. Purchase/load/give tablets w/ORI Form to interested MS4s. OTHER: 6 Stock ORI Kits as needed

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

GRANT: 1&2. Storm system/program mapping completed-data posted on SwiM for Alb Cnty, T/ New Scotland, City/Albany, and V/Green Island. 2&3. Datasets from UAlbany, T/Bethlehem, and T/ Colonie prepared and integrated with V/Colonie, City/Albany, and Albany County datasets to completed 3 storm sewershed delineations (Ann Lee/Patroon/Krumkill). 4&5 ArcGIS Online Survey123/Collector forms created (ORI/Constrution/MuniFac)/loaded to tablets for intersted MS4s.

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

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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2019/2020 Coalition Goals: 1. Stock ORI kits as needed, based on current MS4 Permit; 2. Price water sample costs associated with DRAFT MS4 Permit MCM3 Outfall Sampling and MCM 6 MSGP requirements; 3. Discuss with Coalition members need/value of ORI field training using tablet. Organize if interest.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
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SPDES ID

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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.

GRANT: 1. Use Survey123 to develop MS4 Construction Site Inspection Form; 2. Purchase/load/give tablet w/MS4 Construction Site Inspection Form to interested MS4s. OTHER: 3. Co-sponsor with ACSWCD, 1 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members for distribution to their contacts; post training info on Coalition website; pay tuition(s) as needed, funds permitting.

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

GRANT: 1/2. Survey123 MS4 Construction Site Inspection Form finalized and loaded onto tablets for interested MS4s-two tablet training sessions. OTHER: 3. (One) 4hr E/SC training for Construction Site Operators co-sponsored with ACSWCD (12/7/2018). 21 stormwater related staff from 4 MS4s attended Construction Activity Pmt related trainings (4hr E/SC trainings; 2 Eastern NY SW RTC trainings 4/19/18 Filtration-Infiltrations & 6/19/2018 Small Dam Design) Coalition funded

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

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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2019/2020 Coalition goal: 1. Co-sponsor with ACSWCD, 1 4hr E/SC training for Construction Site Operators/distribute promotional material to Coalition members/post training info on Coalition website/pay tuition as needed, if possible. 2. Discuss with Coalition members need/value of MS4 Construction Site Inspection field training using tablets w/Form. Organize if interest.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

GRANT: 1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop PC SMP inspection form(s) modeled after NYSDEC Maintenance Guidance - SW Mgmt Practices 3. Purchase/load/give tablets w/PC SMPs Inspection Form(s) to interested M

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

GRANT: 1. System and program mapping completed and data posted on SwIM for Alb County, T/NewScotland, City/Albany, and V/Green Island. 2. No Survey123/Collector ArcGIS Online forms created for PC SMP inspections.

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

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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2019/2020 Coalition goals: 1. Develop pilot Survey123 PCSMP form using the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017) while the Coalition Stormwater Program Technician is available

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

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- ☐ Catch Basins Inspected and Cleaned Where Necessary #

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

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- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

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- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

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- ☐ Pesticide/Herbicide Applied # Acres

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

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

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4. What was the date of the last training?

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

		2
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

GRANT: 1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop Municipal Self Audit form; 3. Purchase/load/give tablets w/Municipal Self Audit Form to interested MS4s. OTHER: 4. Coordinate circulation of train'g DVDs for members; 5. Fund/organize outside vendor/in-house train'g(s).

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

GRANT: 1. System and program mapping completed and data posted on SwIM for Alb County, T/NewScotland, City/Albany, and V/Green Island. 2/3. Survey123/Collector ArcGIS Online Municipal Self Audit form finalized and loaded onto tablets for interested MS4s. OTHER: 4. Training DVDs circulated among interested users at Coalition Working Group meetings. 5. No outside vendor or in-house trainings.

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

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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2019/2020 Coalition goals: 1. Coordinate circulation of Coalition train'g DVDs for use by Coalition members; 2. Monitor closely DRAFT MS4 Permit requirements regarding MCM 6 municipal facilities (High, Low, MSGP). Explain/prepare Coalition members; 3. Develop Coalition-wide staff development/training needs assessment; identify best approach in-house/vendors/DVDs; research costs/support materials; and match needs to likely DRAFT MS4 Permit requirements.

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2019

Name of MS4

Town of Colonie

SPDES ID

N Y R 2 0 A 1 9 0

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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MCC form for period ending March 9,

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Town of Colonie

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

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Name of MS4

Town of Colonie

SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

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

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Name of MS4

Town of Colonie

SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

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State

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Zip

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MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9,

2019

Name of MS4

Town of Colonie

SPDES ID

N Y R 2 0 A 1 9 0

Section 3 - Partner Information

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

☐ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

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

SPDES Partner ID - If applicable

N Y R 2 0

Address

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

City

A l b a n y

State

N Y

Zip

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Phone

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Legally Binding Agreement in accordance
with GP-0-08-002 Part IV.G.?

☒ Yes ☐ No

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

● MM1 P u b l i c a t i o n s - P r o g r a m s - W e b s i t e

● MM2 S W M P D o c - A R P u b l i c I n p u t - W A V E S t r m

● MM3 O F S y s M a p g S w I M L y r - S v y 1 2 3 O R I F o r m

● MM4 S v y 1 2 3 C o l l e c t r - C o n I n s p F o r m

● MM5 P C S M P M a p g S w I M - S W P P P R e v i e w L y r s

● MM6 F a c M a p g S w I M - S v y 1 2 3 M u n i F a c F o r m

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,

2019

SPDES ID

N Y R 2 0 A 1 9 0

Name of MS4 Town of Colonie

Section 4 - Certification Statement

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

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

First Name

P a u l a

MI

A

Last Name

M a h a n

Title (Clearly print title of individual signing report)

S u p e r v i s o r

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

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SPDES ID

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Name of MS4/Coalition

SPDES ID

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	1	9	0	
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3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☒ Construction Site Operators Trained

Trained

			2	5
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☐ Direct Mailings

Mailings

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☒ Kiosks or Other Displays

Locations

				3
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☐ List-Serves

In List

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☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☐ Public Events/Presentations

Attendees

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☐ School Program

Attendees

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☐ TV Spot/Program

Days Run

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☒ Printed Materials:

Total # Distributed

			2	5	1
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Locations (e.g. libraries, town offices, kiosks)

P	u	b	l	i	c		O	p	e	r	a	t	i	o	n	s			
C	e	n	t	e	r														
T	o	w	n		H	a	l	l											

☒ Other:

S	i	g	n	s		a	t		s	t	r	e	a	m	x	i	n	g	s
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☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

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

SPDES ID

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

1. Require that all post construction stormwater practices have signage in conformance with Chapter 3 of the Design Manual. Town staff will inspect, and photo document prior to signing off on a certificate of occupancy. The number of signs installed will be recorded annually.
2. Town staff will maintain the rain garden and signage for the demonstration rain garden at the Public Operations Center.

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

1. All projects in the reporting year installed signage in conformance with Chapter 3 of the Design Manual (8 signs).
2. The rain garden has been maintained and the signage is in good condition.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

1. The Town will continue to require, inspect, and quantify signs installed for all stormwater management areas.
2. The Town will continue to maintain the rain garden and it's sign.

MS4 Annual Report Form

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

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 Colonie

SPDES ID

N	Y	R	2	0	1	9	0
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Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?	1
---	---

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:

- | | | | | | | | | |
|---|--------------|-----------|-------|---|---------|--|--|--|
| <input type="radio"/> Cleanup Events | # Events | | | | | | | |
| <input type="radio"/> Comments on SWMP Received | # Comments | | | | | | | |
| <input checked="" type="radio"/> Community Hotlines | Phone # | (5 1 8) | 7 8 3 | - | 2 7 5 8 | | | |
| Phone # | () | | | - | | | | |
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| Phone # | () | | | - | | | | |
| Phone # | () | | | - | | | | |
| Phone # | () | | | - | | | | |
| <input type="radio"/> Community Meetings | # Attendees | | | | | | | |
| <input type="radio"/> Plantings | Sq. Ft. | | | | | | | |
| <input type="radio"/> Storm Drain Markings | # Drains | | | | | | | |
| <input type="radio"/> Stakeholder Meetings | # Attendees | | | | | | | |
| <input checked="" type="radio"/> Volunteer Monitoring | # Events | | | | 4 | | | |
| <input type="radio"/> Other: | | | | | | | | |

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

☒ Yes ☐ No

- | | | | | | |
|---|------------|--|--|--|--|
| <input type="radio"/> List-Serve | # In List | | | | |
| <input type="radio"/> Newspaper Advertising | # Days Run | | | | |
| <input type="radio"/> TV/Radio Notices | # Days Run | | | | |
| <input type="radio"/> Other: | | | | | |

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

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2. URL(s) con't.:

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

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

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

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

☒ MS4/Coalition Office

☒ Annual Report

☒ SWMP Plan

☒ Comments

Department

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☐ Library

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

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☐ Other

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

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☒ Web Page URL:

☒ Annual Report

☒ SWMP Plan

☒ Comments

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

☐ eMail

☐ Comments

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	1	9	0	
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4.a. If this report was made available on the internet, what date was it posted?

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

0	5	/	0	3	/	2	0	1	9
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4.b. For how many days was/will this report be posted?

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

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

☐ Yes ☒ No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

☐ Yes ☒ No

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

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

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

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Town and Coalition staff will identify four sites to submit to NYSDEC WAVE program and organize volunteers for WAVE sampling.

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

Four sites were sampled, and submitted to the NYSDEC WAVE program.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

Volunteers will be organize, and samples will be submitted to NYSDEC for more sites during the sampling season.

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

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

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

G	r	e	a	s	e		t	a	n	k		o	v	e	r	f	l	o	w														
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4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

		3
--	--	---

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

		3
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6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

		3
--	--	---

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

--	--	--

 %

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

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

URL

P	a	s	s	w	o	r	d		P	r	o	t	e	c	t	e	d		R	e	s	t	r	i	c	t	e	d			
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

1. Town staff will conduct dry weather screenings for 17% of their known outfalls. We will conduct dry weather sampling for 23% of outfalls in the next reporting year to get back on target for a five year cycle.
2. Town staff will review completed construction projects for potential additional outfalls and update inventory.

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

1. The Town conducted 108 outfall screenings (17%) using the IDDE Program procedures.
2. All completed construction projects were reviewed for additional outfalls and an additional twelve outfalls were added to the Town's inventory. Outfall were GPS'd and added to the GIS.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

1. The Town will conduct dry weather screenings for 23% of their known outfalls.
2. All completed construction projects will be evaluated for potential new outfalls and mapped as needed.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

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Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

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

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

How many MS4s contributed to this report?

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

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

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

☐ 09/2004 ☒ 03/2006 ☐ NT

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

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

	2	8
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? ☒ Yes ☐ No ☐ NT

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

		4
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? ☒ Yes ☐ No

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

<input checked="" type="radio"/> Notices of Violation	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>3</td></tr></table>					3	<input type="radio"/> No Authority
				3				
<input type="radio"/> Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
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<input type="radio"/> Enforcement Actions or Sanctions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

	2	0
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2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

	4	6
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3. What percent of active construction sites were inspected during this reporting period? ☐ NT

1	0	0
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 %

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

1	0	0
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 %

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

☒ Yes ☐ No ☐ NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?

☒ Yes ☐ No ☐ NT

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

☐ Yes ☐ No

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

MS4 Annual Report Form**This report is being submitted for the reporting period ending March 9,**

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

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6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

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○ Library

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○ Other

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	1	9	0
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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

1. Town staff will visit and track all active construction sites in the Town. A preconstruction meeting was held for all projects with earth disturbance.

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

1. More regular maintenance to erosion and sediment control practices on active sites has improved and documented in weekly inspection reports.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

1. Better record keeping to track and document the compliance with the Construction Permit.

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

N	Y	R	2	0	1	9	0	
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MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	1	9	0	
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

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

	2	0
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 %

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	1	9	0
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6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

1. The Town will continue to maintain necessary post-construction records for use in internal operations and the MS4 Permit Annual Report.
2. The Town will continue to require all SWPPP preparers to use the enhanced phosphorous removal chapter in the Design Manual for projects within the Ann Lee/ Stump pond watershed.

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

1. Records for post-construction projects are kept up to date.
2. All projects being designed in the Ann Lee/ Stump pond watershed are using the enhanced phosphorous removal chapter in the Design Manual. Two projects were designed during the reporting year.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

1. By 3/9/20 Town stormwater staff will send out the recently generated form letter for the inspection of post construction practices the were install more than one year ago.
2. The Town will continue to make sure all projects within the Ann Lee Pond (303d) watershed use the enhanced phosphorous removal chapter in the Design Manual.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	1	9	0	
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

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

Self-Assessment
Operation/Activity/Facility
performed within the past 3

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	1	9	0	
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2. Provide the following information about municipal operations good housekeeping programs:

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

			1	2
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- Streets Swept (Number of miles X Number of times swept) # Miles

		3	2	7
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- Catch Basins Inspected and Cleaned Where Necessary #

		2	6	5
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

			7	5
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- Phosphorus Applied In Chemical Fertilizer # Lbs.

		2	0	0
--	--	---	---	---
- Nitrogen Applied In Chemical Fertilizer # Lbs.

1	1	0	5	6
---	---	---	---	---
- Pesticide/Herbicide Applied # Acres

	6	1	1	.	3
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(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

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

				0
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4. What was the date of the last training?

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

		0
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

	5	0	%
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	1	9	0
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7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

1. The Town inspects, cleans out, and records the amount of spoils removed from the catch basins. Data is compiled for MS4 Permit Annual Report.
2. The Town conducts three Hazardous Household Waste Day events annually. Approximately 1260 households participated.

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

1. Approximately 535 cubic yards of sediment was removed from the Town's conveyance system preventing it from entering the waters of the US.
2. The Town conducted three Hazardous Household Waste Day events. All materials collected were quantified and disposed of properly.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

1. Stormwater staff will reassess all municipally owned facilities using the Facility Self Audit Form. This was a goal for the past reporting period. The task was started but not completed.

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

How many MS4s contributed to this report?

1	1
---	---

1. Targeted Public Education and Outreach Best Management Practices

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

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

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

2. Specific audiences targeted during this reporting period:

- | | |
|--|---|
| <input checked="" type="radio"/> Public Employees
<input checked="" type="radio"/> Residential
<input checked="" type="radio"/> Businesses
<input type="radio"/> Restaurants
<input checked="" type="radio"/> Other: | <input checked="" type="radio"/> Contractors
<input type="radio"/> Developers
<input checked="" type="radio"/> General Public
<input type="radio"/> Industries
<input type="radio"/> Agricultural |
|--|---|

G	e	n	e	r	a	l	P	u	b	l	i	c	-	C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e		
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Other

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

☒ Construction Site Operators Trained

Trained

			4	7
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☐ Direct Mailings

Mailings

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☒ Kiosks or Other Displays

Locations

				7
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☒ List-Serves

In List

		1	8	1
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☐ Mailing List

In List

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☐ Newspaper Ads or Articles

Days Run

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☒ Public Events/Presentations

Attendees

			8	4
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☐ School Program

Attendees

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☐ TV Spot/Program

Days Run

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☒ Printed Materials:

Total # Distributed

			5	6
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Locations (e.g. libraries, town offices, kiosks)

P	r	e	s	e	n	t	a	t	i	o	n	H	a	n	d	o	u	t	s
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☒ Other:

2		C	W	P		W	e	b	c	a	s	t	-	A	r	c	h	i	v
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☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

Coalition goals for 2018/2019: 1. Maintain/update Coalition website (member info; post DRAFT Joint AR/ SWMP doc for public comment; post new publications); 2. Provide Coalition members with brochures; 3. Provide traditional MS4 members with a Public Education Program Development Tool which displays the location of target audiences (residential, commercial, institution, industrial); the associated pollution generating behaviors; and likely pollutants of concern.

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

1. Coalition website maintained and updated
2. Brochures provided or printed when requested
3. Traditional MS4s provided with hard copy map of their MS4 land use types, matched to target audience types (residential, commercial, institutional, industrial), with info about associated pollution generating behavior, and Pollutants of Concern. Land use/target audience layer on SwIM.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2019/2020 Coalition Goals: 1. Support and update Coalition website; 2. Sponsor one Center for Watershed Protection webcast; 3. Print and distribute stormwater publications for interested members; 4. Understand and explain to members Public Education/Outreach requirements suggested by the DRAFT Permit (GP-0-17-002; 5. Discuss with members the current inventory of printed material/decide which if any publications should be printed in large quantities/modified/dropped.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0			
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Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?	1	1
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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:

- | | | | | | |
|--|--|--|--|----------------------|---|
| <input type="radio"/> Cleanup Events | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input checked="" type="radio"/> Comments on SWMP Received | # Comments | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="0"/> |
| <input checked="" type="radio"/> Community Hotlines | Phone # | (<input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="8"/>) | <input type="text" value="4"/> <input type="text" value="4"/> <input type="text" value="7"/> | - | <input type="text" value="5"/> <input type="text" value="6"/> <input type="text" value="4"/> <input type="text" value="5"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> | - | <input type="text"/> | <input type="text"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> | - | <input type="text"/> | <input type="text"/> |
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| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> | - | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Community Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Plantings | Sq. Ft. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Storm Drain Markings | # Drains | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Stakeholder Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input checked="" type="radio"/> Volunteer Monitoring | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="4"/> |
| <input checked="" type="radio"/> Other: | P u b l i c C o m m e n t s J o i n t D R A F T M S 4 P m t | | | | |

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

- | | | | | | | |
|---|------------|--|--|--|---|---|
| <input checked="" type="radio"/> List-Serve | # In List | | | | 3 | 4 |
| <input type="radio"/> Newspaper Advertising | # Days Run | | | | | |
| <input type="radio"/> TV/Radio Notices | # Days Run | | | | | |
| <input type="radio"/> Other: | | | | | | |
- ☒ Web Page URL: Enter URL(s) on the following two pages.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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2. URL(s) con't.:

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

URL

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URL

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URL

URL

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
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SPDES ID

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

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

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0	3
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2	0	1	9
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4.b. For how many days was/will this report be posted?

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

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

☐ Yes ☐ No

If Yes, what was the date of the meeting?

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If No, is one planned?

☐ Yes ☐ No

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

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

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

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

Jan, 2018 the Coalition received notice that MS4Web software used to write/update the Joint Coalition SWMP document had been replaced by MS4Web2.0. Using the new format, the SWMP document was updated. "Goals met" were tracked as Activities, noting what happened, when. New goals were written covering the time frame: 3/10/2018 to 3/9/2019 (2018-2019). These goals included elements of proposed MS4 Permit (GP-0-17-002). 2 WAVE stream events planned for '18.

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

A hybrid Joint Coalition SWMP Plan "Annual Evaluation" document listing activities completed from 3/10/2017 to 3/9/2018 and goals for the permit reporting year 3/2018 to 3/2019) was posted on the Coalition website 4/28/2018. The CBI MS4Web 2.0 SWMP Plan module was used to create the document. Completed 4 Coalition-wide WAVE stream monitoring events (3 days & 4 sites)-1 site Salt Kill; 2 sites Vly Creek; and 1 site Lisha Kill.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2019/2020 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. With Coalition members, identify plausible, doable public participation activities which focus on water quality directly, which could be organized spring, summer or early fall. Develop an implementation plan with members, which respects available time. Develop a budget and staffing plan to implement, include in 2020 Coalition budget if advised.

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N	Y	R	2	0				
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	1	1
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				#			%
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

[illegible]

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

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

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

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

☐ Yes ☐ No

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

			%
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8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

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

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

GRANT: 1. Complete field work system/program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Review/prepare exist'g datasets from UAlb/T-Bethlehem/T-Colonie for Krumkill/Patroon/Ann Lee Pond for sewershed delineations; 3. Complete sewershed delineations; 4. Use Survey123 to develop ORI form; 5. Purchase/load/give tablets w/ORI Form to interested MS4s. OTHER: 6 Stock ORI Kits as needed

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

GRANT: 1&2. Storm system/program mapping completed-data posted on SwiM for Alb Cnty, T/ New Scotland, City/Albany, and V/Green Island. 2&3. Datasets from UAlbany, T/Bethlehem, and T/ Colonie prepared and integrated with V/Colonie, City/Albany, and Albany County datasets to completed 3 storm sewershed delineations (Ann Lee/Patroon/Krumkill). 4&5 ArcGIS Online Survey123/Collector forms created (ORI/Constrution/MuniFac)/loaded to tablets for intersted MS4s.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2019/2020 Coalition Goals: 1. Stock ORI kits as needed, based on current MS4 Permit; 2. Price water sample costs associated with DRAFT MS4 Permit MCM3 Outfall Sampling and MCM 6 MSGP requirements; 3. Discuss with Coalition members need/value of ORI field training using tablet. Organize if interest.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
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SPDES ID

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

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

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

GRANT: 1. Use Survey123 to develop MS4 Construction Site Inspection Form; 2. Purchase/load/give tablet w/MS4 Construction Site Inspection Form to interested MS4s. OTHER: 3. Co-sponsor with ACSWCD, 1 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members for distribution to their contacts; post training info on Coalition website; pay tuition(s) as needed, funds permitting.

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

GRANT: 1/2. Survey123 MS4 Construction Site Inspection Form finalized and loaded onto tablets for interested MS4s-two tablet training sessions. OTHER: 3. (One) 4hr E/SC training for Construction Site Operators co-sponsored with ACSWCD (12/7/2018). 21 stormwater related staff from 4 MS4s attended Construction Activity Pmt related trainings (4hr E/SC trainings; 2 Eastern NY SW RTC trainings 4/19/18 Filtration-Infiltrations & 6/19/2018 Small Dam Design) Coalition funded

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2019/2020 Coalition goal: 1. Co-sponsor with ACSWCD, 1 4hr E/SC training for Construction Site Operators/distribute promotional material to Coalition members/post training info on Coalition website/pay tuition as needed, if possible. 2. Discuss with Coalition members need/value of MS4 Construction Site Inspection field training using tablets w/Form. Organize if interest.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

GRANT: 1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop PC SMP inspection form(s) modeled after NYSDEC Maintenance Guidance - SW Mgmt Practices 3. Purchase/load/give tablets w/PC SMPs Inspection Form(s) to interested M

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

GRANT: 1. System and program mapping completed and data posted on SwIM for Alb County, T/NewScotland, City/Albany, and V/Green Island. 2. No Survey123/Collector ArcGIS Online forms created for PC SMP inspections.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2019/2020 Coalition goals: 1. Develop pilot Survey123 PCSMP form using the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017) while the Coalition Stormwater Program Technician is available

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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 #

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

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- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

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- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

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- ☐ Pesticide/Herbicide Applied # Acres

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

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

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4. What was the date of the last training?

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

		2
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

1	0	0	%
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

GRANT: 1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop Municipal Self Audit form; 3. Purchase/load/give tablets w/Municipal Self Audit Form to interested MS4s. OTHER: 4. Coordinate circulation of train'g DVDs for members; 5. Fund/organize outside vendor/in-house train'g(s).

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

GRANT: 1. System and program mapping completed and data posted on SwIM for Alb County, T/NewScotland, City/Albany, and V/Green Island. 2/3. Survey123/Collector ArcGIS Online Municipal Self Audit form finalized and loaded onto tablets for interested MS4s. OTHER: 4. Training DVDs circulated among interested users at Coalition Working Group meetings. 5. No outside vendor or in-house trainings.

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

			0
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2019/2020 Coalition goals: 1. Coordinate circulation of Coalition train'g DVDs for use by Coalition members; 2. Monitor closely DRAFT MS4 Permit requirements regarding MCM 6 municipal facilities (High, Low, MSGP). Explain/prepare Coalition members; 3. Develop Coalition-wide staff development/training needs assessment; identify best approach in-house/vendors/DVDs; research costs/support materials; and match needs to likely DRAFT MS4 Permit requirements.

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2	0	1	9
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Name of MS4

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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

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

2 0 1 9

Name of MS4 Village of Green Island

SPDES ID

N Y R 2 0 A 3 7 7

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

E l l e n

MI

M

Last Name

M c N u l t y - R y a n

Title

M a y o r

Address

2 0 C l i n t o n S t r e e t

City

G r e e n I s l a n d

State

N Y

Zip

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eMail

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Phone

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County

A l b a n y

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

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Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? ☒ Yes ☐ No

☒ Yes ☐ No

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y				
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Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

[illegible]

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Address

[illegible]

City

State

Zip

[illegible]

N	Y
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eMail

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Phone

$$(\begin{array}{|c|c|c|} \hline 5 & 1 & 8 \\ \hline \end{array}) \begin{array}{|c|c|c|} \hline 4 & 4 & 7 \\ \hline \end{array} - \begin{array}{|c|c|c|c|} \hline 5 & 6 & 4 & 5 \\ \hline \end{array}$$

Legally Binding Agreement in accordance
with GP-0-08-002 Part IV.G.? ☒ Yes

with GP-0-08-002 Part IV.G.? ☒ Yes ☐ No

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

● MM1 Publications - Programs - Website

[illegible]

● MM3 O F S y s M a p M a p g S w I M L y r - S v y O R I F o r m

● MM4 S v y 1 2 3 C o l l e c t r - C o n s I n s p F o r m

● MM5 P C S M P M a p g S w I M - S W P P P R e v i e w L y r s

● MM6 F a c M a p g S w I M - S v y 1 2 3 M u n i F a c F o r m

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,

2019

SPDES ID

N Y R 2 0 A 3 7 7

Name of MS4 Village of Green Island

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 l l e n

MI

M

Last Name

M c N u l t y - R y a n

Title (Clearly print title of individual signing report)

M a y o r

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

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Village of Green Island

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☐ Yes ☒ No

URL

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URL

[illegible]

URL

[illegible]

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Name of MS4/Coalition

SPDES ID

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

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

☐ Construction Site Operators Trained

Trained

--	--	--	--	--

☒ Direct Mailings

Mailings

				8
--	--	--	--	---

☒ Kiosks or Other Displays

Locations

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

☐ List-Serves

In List

--	--	--	--	--

☒ Mailing List

In List

	1	4	0	0
--	---	---	---	---

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☐ Public Events/Presentations

Attendees

--	--	--	--	--

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☐ Printed Materials:

Total # Distributed

--	--	--	--	--

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

☐ Other:

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

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

URL

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URL

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

SPDES ID

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

13. Public Education Development Tool will be distributed which identifies location of target audiences within the Village, 14. Continue publishing stormwater messages in newsletter; continue to maintain website links to Coalition website; continue to participate in Coalition wide education efforts.

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

All goals were completed

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

			2
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

We will continue to evaluate our program and implement MCM 1 goals from SWMPP in 2019-20.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

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2. URL(s) con't.:

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

URL

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

SPDES ID

2. URL(s) con't.:

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

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MS4 Annual Report Form**This report is being submitted for the reporting period ending March 9,**

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

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

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

0	5	/	0	3	/	2	0	1	9
---	---	---	---	---	---	---	---	---	---

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

	1	4
--	---	---

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

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

If Yes, what was the date of the meeting?

0	5	/	2	1	/	2	0	1	8
---	---	---	---	---	---	---	---	---	---

If No, is one planned?

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

If No, is one planned for each?

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

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

2-1 Village will annually update public contact information in MCC & other MS4 documents 2-2 Village explains DRAFT annual report and Coalition on Village website as well as how to provide comments and feedback. It also advertises MS4 annual public meeting to be held in May.

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

2-1 update is completed (annually) 2-2 posting on website is completed annually

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2-2 Public meeting comments will be collected and added to Coalition wide comments.

2	0	1	9
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SPDES ID

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How many MS4s contributed to this report?	
---	--

		0
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☐ None

[illegible][illegible]

2	0	1	9
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Name of MS4/Coalition

Village of Green Island

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

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| 1 | 0 | 0 | % |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Villager of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

3-9 DPW will continue to document any illicit discharges

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

3-9 DPW and CEO had no illicit discharges and no illegal dumping during this reporting period.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

3-9 DPW and CEO will continue to check and document illicit discharges.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

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

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

How many MS4s contributed to this report?

--	--	--

- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?** ☒ Yes ☐ No
- 1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?** ☒ Yes ☐ No ☐ NT

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

☐ 09/2004 ☒ 03/2006 ☐ NT

- 2. Does your MS4/Coalition have a SWPPP review procedure in place?** ☒ Yes ☐ No
- 3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

		1
--	--	---
- 4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?** ☒ Yes ☐ No ☐ NT
- If Yes, how many public comments were received during this reporting period?

		0
--	--	---
- 5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?** ☒ Yes ☐ No

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

<input type="radio"/> Notices of Violation	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Administrative Fines	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Civil Penalties	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Administrative Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Enforcement Actions or Sanctions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							
<input type="radio"/> Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<input type="radio"/> No Authority

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

--	--	--

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

		1
--	--	---

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

		1
--	--	---

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

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

 %

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

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

 %

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

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

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

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

4-2 SWPPP Review Procedures forms 4-4 Complaint procedures forms 4-5 CI and enforcement forms 4-6 pre-construction meeting forms & procedures 4-7 Village will forward availability of E-SC required training 4-8 Staff will review existing SWPPP record keeping and may need additional training for staff

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

4-2, 4-4, 4-5 4-6 forms are used on our projects 4-7 Village emails notices of E-SC training to all contractors that are known to work in our community 4-8 Village has reviewed procedures with staff and has hired additional staff to assist with inspections

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

			3
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

4-7 Village will continue to forward training opportunities to contractors 4-8 Village hired a PT engineer with SW experience to help improve the review and inspection process we have now. We have also hired an additional PT CEO in 2018-19 to provide more inspection coverage of projects.

2	0	1	9
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Name of MS4/Coalition

SPDES ID

N	Y	R	2	0	A	3	7	7
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How many MS4s contributed to this report?		
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	# Inventoried	# Inspections	# Times Maintained
<input type="radio"/> Alternative Practices	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
<input type="radio"/> Filter Systems	<div><div></div><div></div><div>3</div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div>1</div></div>
<input type="radio"/> Infiltration Basins	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
<input type="radio"/> Open Channels	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
<input type="radio"/> Ponds	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
<input type="radio"/> Wetlands	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
<input type="radio"/> Other	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>

☐ Yes ☒ No

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

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

		0
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 %

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

5-3 if opportunity arises Village will may consider planning concepts included in this BMP 5-5 post construction SWPPP review procedures forms 5-8 Discuss post construction practices and data collection with DPW 5-9 post construction practices inventory procedures and forms 5-12 Village will review existing SWPPP record keeping and update as needed. Additional training may be needed

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

5-3 no opportunity came about during the reporting period 5-5 post construction forms have been developed 5-8 discussions have occurred and action has been taken including joint training with private industrial park owners 5-9 same as 5-8. 5-12 discussions about record keeping updates have occurred and are ongoing.

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

			2
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

5-3 Village has been awarded a grant for a zoning code update which would incorporate planning concepts as outlined in this BMP 5-5, 5-8, 5-9 and 5-12 The Village hired a PT Engineer with SW experience to assist new staff with requirements of these goals and DPW has started use of new forms for post construction monitoring as well. Additional PT CEO was also hired in 2018-19.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

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

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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2. Provide the following information about municipal operations good housekeeping programs:

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

				1
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- ☒ Streets Swept (Number of miles X Number of times swept) # Miles

			1	8
--	--	--	---	---
- ☒ Catch Basins Inspected and Cleaned Where Necessary #

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

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

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

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

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

				0
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4. What was the date of the last training?

1	2	/	1	5	/	2	0	1	7
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5. How many municipal employees have been trained in this reporting period?

		1
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

1	0	0	%
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MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

Village reviews mandated catch basin inspection schedule and clean out where necessary; DPW will collect sweeping data for parking lots and streets; Updated facility inventory and use of self audit form; Village will evaluate and include GI practices where appropriate; DPW will inspect and maintain hydro separators as needed

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

6-3 DPW has completed this BMP as required 6-4 very difficult to collect this data as we use out of town sweeper and sometimes communicating need for collecting data 6-10 Village does not own occupied facilities in MS4 area 6-12 completed as required.

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

			2
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(ex.: samples/participants/events)

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

6-4 will make every effort to collect sweeping data from out of town sweeper 6-11 GI practices will be evaluated for incorporation into new zoning update 6-12 2018 maintenance is being scheduled with ACWPD now

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

How many MS4s contributed to this report?

1	1
---	---

1. Targeted Public Education and Outreach Best Management Practices

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

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

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

2. Specific audiences targeted during this reporting period:

- | | |
|--|---|
| <input checked="" type="radio"/> Public Employees
<input checked="" type="radio"/> Residential
<input checked="" type="radio"/> Businesses
<input type="radio"/> Restaurants
<input checked="" type="radio"/> Other: | <input checked="" type="radio"/> Contractors
<input type="radio"/> Developers
<input checked="" type="radio"/> General Public
<input type="radio"/> Industries
<input type="radio"/> Agricultural |
|--|---|

G	e	n	e	r	a	l	P	u	b	l	i	c	-	C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e		
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Other

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

☒ Construction Site Operators Trained

Trained

			4	7
--	--	--	---	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				7
--	--	--	--	---

☒ List-Serves

In List

		1	8	1
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☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

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☒ Public Events/Presentations

Attendees

			8	4
--	--	--	---	---

☐ School Program

Attendees

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☐ TV Spot/Program

Days Run

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☒ Printed Materials:

Total # Distributed

			5	6
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Locations (e.g. libraries, town offices, kiosks)

P	r	e	s	e	n	t	a	t	i	o	n	H	a	n	d	o	u	t	s
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2		C	W	P		W	e	b	c	a	s	t	s						
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H	R	W	s	h	e	d	A	l	l	i	a	n	c	e	-	P	r	e	s
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S	t	o	r	m	M	a	p	g	-	P	a	t	r	o	o	n	C	r	k
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☒ Other:

2		C	W	P		W	e	b	c	a	s	t	-	A	r	c	h	i	v
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☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

Coalition goals for 2018/2019: 1. Maintain/update Coalition website (member info; post DRAFT Joint AR/ SWMP doc for public comment; post new publications); 2. Provide Coalition members with brochures; 3. Provide traditional MS4 members with a Public Education Program Development Tool which displays the location of target audiences (residential, commercial, institution, industrial); the associated pollution generating behaviors; and likely pollutants of concern.

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

1. Coalition website maintained and updated
2. Brochures provided or printed when requested
3. Traditional MS4s provided with hard copy map of their MS4 land use types, matched to target audience types (residential, commercial, institutional, industrial), with info about associated pollution generating behavior, and Pollutants of Concern. Land use/target audience layer on SwIM.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2019/2020 Coalition Goals: 1. Support and update Coalition website; 2. Sponsor one Center for Watershed Protection webcast; 3. Print and distribute stormwater publications for interested members; 4. Understand and explain to members Public Education/Outreach requirements suggested by the DRAFT Permit (GP-0-17-002; 5. Discuss with members the current inventory of printed material/decide which if any publications should be printed in large quantities/modified/dropped.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0			
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Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?	1	1
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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:

- | | | | | | |
|--|--|--|--|--|---|
| <input type="radio"/> Cleanup Events | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input checked="" type="radio"/> Comments on SWMP Received | # Comments | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="0"/> |
| <input checked="" type="radio"/> Community Hotlines | Phone # | (<input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="8"/>) | <input type="text" value="4"/> <input type="text" value="4"/> <input type="text" value="7"/> | - | <input type="text" value="5"/> <input type="text" value="6"/> <input type="text" value="4"/> <input type="text" value="5"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| | | | | | |
| <input type="radio"/> Community Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Plantings | Sq. Ft. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Storm Drain Markings | # Drains | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Stakeholder Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input checked="" type="radio"/> Volunteer Monitoring | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="4"/> |
| <input checked="" type="radio"/> Other: | Public Comments Joint DR AFTMS 4 Pmt | | | | |

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

- | | | | | | | |
|---|------------|--|--|--|---|---|
| <input checked="" type="radio"/> List-Serve | # In List | | | | 3 | 4 |
| <input type="radio"/> Newspaper Advertising | # Days Run | | | | | |
| <input type="radio"/> TV/Radio Notices | # Days Run | | | | | |
| <input type="radio"/> Other: | | | | | | |
- ☒ Web Page URL: Enter URL(s) on the following two pages.

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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2. URL(s) con't.:

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

URL

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URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
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SPDES ID

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

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

0	5
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 /

0	3
---	---

 /

2	0	1	9
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4.b. For how many days was/will this report be posted?

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

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

☐ Yes ☐ No

If Yes, what was the date of the meeting?

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 /

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If No, is one planned?

☐ Yes ☐ No

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

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

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

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

Jan, 2018 the Coalition received notice that MS4Web software used to write/update the Joint Coalition SWMP document had been replaced by MS4Web2.0. Using the new format, the SWMP document was updated. "Goals met" were tracked as Activities, noting what happened, when. New goals were written covering the time frame: 3/10/2018 to 3/9/2019 (2018-2019). These goals included elements of proposed MS4 Permit (GP-0-17-002). 2 WAVE stream events planned for '18.

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

A hybrid Joint Coalition SWMP Plan "Annual Evaluation" document listing activities completed from 3/10/2017 to 3/9/2018 and goals for the permit reporting year 3/2018 to 3/2019) was posted on the Coalition website 4/28/2018. The CBI MS4Web 2.0 SWMP Plan module was used to create the document. Completed 4 Coalition-wide WAVE stream monitoring events (3 days & 4 sites)-1 site Salt Kill; 2 sites Vly Creek; and 1 site Lisha Kill.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2019/2020 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. With Coalition members, identify plausible, doable public participation activities which focus on water quality directly, which could be organized spring, summer or early fall. Develop an implementation plan with members, which respects available time. Develop a budget and staffing plan to implement, include in 2020 Coalition budget if advised.

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2 0 1 9

Stormwater Coalition of Albany County

N	Y	R	2	0				
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How many MS4s contributed to this report?	1	1
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[illegible][illegible]

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

[illegible]

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

--	--	--

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?

☐ Yes ☐ No

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

			%
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8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

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

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

GRANT: 1. Complete field work system/program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Review/prepare exist'g datasets from UAlb/T-Bethlehem/T-Colonie for Krumkill/Patroon/Ann Lee Pond for sewershed delineations; 3. Complete sewershed delineations; 4. Use Survey123 to develop ORI form; 5. Purchase/load/give tablets w/ORI Form to interested MS4s. OTHER: 6 Stock ORI Kits as needed

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

GRANT: 1&2. Storm system/program mapping completed-data posted on SwiM for Alb Cnty, T/ New Scotland, City/Albany, and V/Green Island. 2&3. Datasets from UAlbany, T/Bethlehem, and T/ Colonie prepared and integrated with V/Colonie, City/Albany, and Albany County datasets to completed 3 storm sewershed delineations (Ann Lee/Patroon/Krumkill). 4&5 ArcGIS Online Survey123/Collector forms created (ORI/Constrution/MuniFac)/loaded to tablets for intersted MS4s.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2019/2020 Coalition Goals: 1. Stock ORI kits as needed, based on current MS4 Permit; 2. Price water sample costs associated with DRAFT MS4 Permit MCM3 Outfall Sampling and MCM 6 MSGP requirements; 3. Discuss with Coalition members need/value of ORI field training using tablet. Organize if interest.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
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SPDES ID

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

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

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

GRANT: 1. Use Survey123 to develop MS4 Construction Site Inspection Form; 2. Purchase/load/give tablet w/MS4 Construction Site Inspection Form to interested MS4s. OTHER: 3. Co-sponsor with ACSWCD, 1 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members for distribution to their contacts; post training info on Coalition website; pay tuition(s) as needed, funds permitting.

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

GRANT: 1/2. Survey123 MS4 Construction Site Inspection Form finalized and loaded onto tablets for interested MS4s-two tablet training sessions. OTHER: 3. (One) 4hr E/SC training for Construction Site Operators co-sponsored with ACSWCD (12/7/2018). 21 stormwater related staff from 4 MS4s attended Construction Activity Pmt related trainings (4hr E/SC trainings; 2 Eastern NY SW RTC trainings 4/19/18 Filtration-Infiltrations & 6/19/2018 Small Dam Design) Coalition funded

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2019/2020 Coalition goal: 1. Co-sponsor with ACSWCD, 1 4hr E/SC training for Construction Site Operators/distribute promotional material to Coalition members/post training info on Coalition website/pay tuition as needed, if possible. 2. Discuss with Coalition members need/value of MS4 Construction Site Inspection field training using tablets w/Form. Organize if interest.

MS4 Annual Report Form

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

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

GRANT:1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop PC SMP inspection form(s) modeled after NYSDEC Maintenance Guidance - SW Mgmt Practices 3. Purchase/load/give tablets w/PC SMPs Inspection Form(s) to interested M

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

GRANT: 1. System and program mapping completed and data posted on SwIM for Alb County, T/NewScotland, City/Albany, and V/Green Island. 2. No Survey123/Collector ArcGIS Online forms created for PC SMP inspections.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2019/2020 Coalition goals: 1. Develop pilot Survey123 PCSMP form using the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017) while the Coalition Stormwater Program Technician is available

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

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- ☐ Catch Basins Inspected and Cleaned Where Necessary #

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

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- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

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- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

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- ☐ Pesticide/Herbicide Applied # Acres

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

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

				5
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4. What was the date of the last training?

0	3
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 /

0	7
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2	0	1	9
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5. How many municipal employees have been trained in this reporting period?

		2
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

1	0	0
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 %

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

GRANT: 1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop Municipal Self Audit form; 3. Purchase/load/give tablets w/Municipal Self Audit Form to interested MS4s. OTHER: 4. Coordinate circulation of train'g DVDs for members; 5. Fund/organize outside vendor/in-house train'g(s).

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

GRANT: 1. System and program mapping completed and data posted on SwIM for Alb County, T/NewScotland, City/Albany, and V/Green Island. 2/3. Survey123/Collector ArcGIS Online Municipal Self Audit form finalized and loaded onto tablets for interested MS4s. OTHER: 4. Training DVDs circulated among interested users at Coalition Working Group meetings. 5. No outside vendor or in-house trainings.

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

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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

2019/2020 Coalition goals: 1. Coordinate circulation of Coalition train'g DVDs for use by Coalition members; 2. Monitor closely DRAFT MS4 Permit requirements regarding MCM 6 municipal facilities (High, Low, MSGP). Explain/prepare Coalition members; 3. Develop Coalition-wide staff development/training needs assessment; identify best approach in-house/vendors/DVDs; research costs/support materials; and match needs to likely DRAFT MS4 Permit requirements.

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

2	0	1	9
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Name of MS4

TOWN OF GUILDERLAND

SPDES ID

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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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

MCC form for period ending March 9,

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TOWN OF GUILDERLAND

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

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Name of MS4

T	O	W	N	O	F	G	U	I	L	D	E	R	L	A	N	D
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SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

K	E	N	N	E	T	H										
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MI

A

Last Name

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Title

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City

G	U	I	L	D	E	R	L	A	N	D										
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State

N	Y
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Zip

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eMail

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Phone

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County

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MS4 Municipal Compliance Certification (MCC) Form

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

Name of MS4

TOWN OF GUILDERLAND

SPDES ID

N Y R 2 0 A 3 5 9

Section 3 - Partner Information

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

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

A L B A N Y C O U N T Y

SPDES Partner ID - If applicable

N Y R 2 0 A 3 5 9

Address

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

City

A L B A N Y

State

N Y

Zip

1 2 0 2 2 -

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N A N C Y . H E I N Z E N @ A L B A N Y C O U N T Y N Y . G O V

Phone

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

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?

☒ Yes ☐ No

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

● MM1 P U B L I C A T I O N - P R O G R A M S - W E B S I T E

● MM2 S W M P D o c - A R P u b l i c I n p u t - W A V E S t r m

● MM3 O F S y s M a p S w I M L y r - S v y 1 2 3 O R I F o r m

● MM4 S v y 1 2 3 C o l l e c t r - C o n s I n s p F o r m

● MM5 P C S M P M a p g S w I M - S W P P P R e v i e w L y r s

● MM6 F a c M a p g S w I M - S v y 1 2 3 M u n i F a c F o r m

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2 0 1 9

Name of MS4 TOWN OF GUILDERLAND

SPDES ID

N 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 Name

P E T E R

MI

G

Last Name

B A R B E R

Title (Clearly print title of individual signing report)

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

Signature

Date

0 5 / 2 3 / 2 0 1 9

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

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Name of MS4/Coalition

SPDES ID

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

T	O	W	N	O	F	G	U	I	L	D	E	R	L	A	N	D
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SPDES ID

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

☐ Construction Site Operators Trained

Trained

--	--	--	--	--

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				2
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☒ List-Serves

In List

		1	2	0
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☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☐ Public Events/Presentations

Attendees

--	--	--	--	--

☐ School Program

Attendees

--	--	--	--	--

☒ TV Spot/Program

Days Run

		1	0	0
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☒ Printed Materials:

Total # Distributed

			6	0
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Locations (e.g. libraries, town offices, kiosks)

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K	I	O	S	K			F	L	I	E	R	S		B	U	S	Y		
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☐ Other:

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Name of MS4/Coalition

TOWN OF GUILDERLAND

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URL

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

MAINTAIN TOWN WEB SITE WITH UPDATES AND LINK TO COALITION WEB SITE. BUSY KIOSK UP BY BUILDING DEPARTMENT. DID STORM DRAIN MARKINGS IN MANY LOCATIONS.

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

1. TOWN WEB SITE WAS MAINTAIN
2. KIOSK ACTIVITIE WAS MONITORED AND KIOSK KEPT FULL.
- 3.DID MARK (PAINT) STORM DRAINS
4. FLIERS HANDED OUT IN VARIOUS PUBLIC LOCATIONS.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

DOING A GOOD JOB OVERALL IN MCM 1. MADE GOOD PROGRESS LAST YEAR AND CONTINUE TO FOLLOW UP THIS YEAR. CITIZENS ARE MUCH MORE AWARE OF STORMWATER WHICH IS VERY POSITIVE OVERALL. STORMWATER PROGRAM IN GUILDERLAND IS GENERALLY UNDERSTOOD BY RESIDENTS.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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Minimum Control Measure 2. Public Involvement/Participation

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

		1
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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

				2
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☒ Comments on SWMP Received

Comments

				0
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☒ Community Hotlines

Phone #

(5 1 8)

3 5 6

- 1 9 8 0

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
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☐ Plantings

Sq. Ft.

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☒ Storm Drain Markings

Drains

		5	2
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☐ Stakeholder Meetings

Attendees

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☐ Volunteer Monitoring

Events

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☒ Other:

P	U	B	L	I	C		C	O	M	M	E	N	T	S		O	N		P	E	R	M	I	T				
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2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?

☒ Yes ☐ No

☒ List-Serve

In List

		3	4
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☐ Newspaper Advertising

Days Run

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☐ TV/Radio Notices

Days Run

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☒ Other:

T	O	W	N		O	F		G	U	I	L	D	E	R	L	A	N	D		W	E	B	S	I	T	E		
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☒ Web Page URL: Enter URL(s) on the following two pages.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

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

SPDES ID

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

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

☒ MS4/Coalition Office

☒ Annual Report ☒ SWMP Plan ☒ Comments

Department

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☐ Library

☐ Annual Report ☐ SWMP Plan ☐ Comments

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☐ Other

☐ Annual Report ☐ SWMP Plan ☐ Comments

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☒ eMail

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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

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

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

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

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

☐ Yes ☒ No

If Yes, what was the date of the meeting?

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If No, is one planned?

☐ Yes ☒ No

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

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

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

MS4 Annual Report Form

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

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Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

TOWN HAS UPDATED INFORMATION ON WEB SITE AND FLOW CHART. ALSO HAVE MAINTAIN A LIST OF COMPLAINTS AND RESPONSES. ALONG WITH LISTING ACTIVITIES COMPLETED 3/10/2018 THROUGH 3/9/2019.

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

PUBLIC HAS KNOWLEDGE TO CALL STORM WATER OFFICER ABOUT ISSUES AND HOW THEY CAN BE MORE PROACTIVE. CITIZENS IN TOWN ARE AWARE OF STORMWATER PROGRAM AS CALLS HAVE INCREASED EACH YEAR. WE HAVE PUT IN A SWMP PLAN FOR THE YEAR AHEAD TO BE FOLLOWED.

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

			1
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(ex.: samples/participants/events)

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

TOWN WILL PUT TOGETHER A SWMP PLAN FOR UPCOMING YEAR. WE WILL ALSO WORK WITH COALITION ON GOALS TO BE MET.

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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

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

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

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 %

MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

THE TOWN HAS REMAPPED ALL OF ITS BASINS AND OUTFALLS, THANKS TO THE COALITIONS GRANT. THIS GIVES TOWN ACCURATE WAY TO CHECK ON PROBLEM AREAS OF CONCERN.

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

WE NOW HAVE A ACCURATE NUMBER OF OUTFALLS FOR THE FIRST TIME IN A WHILE. BECAUSE THE DEFINATION OF WHAT IS A OUTFALL IS HAS CHANGE AND MAPPING EVERYTHING THIS PAST YEAR. WE WILL WORK NOW TO GET MORE ACCURATE OUTFALL INFORMATION.

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

			1
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(ex.: samples/participants/events)

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

THIS WAS A COMPLEX AND TIME CONSUMING JOB DONE BY THE COALITION GRANT ALONG WITH SOME HIGHWAY HELP. NOW WE CAN START TO CONCENTRATE ON OUR OUTFALL INSPECTIONS AND POST PRACTICES.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF GUILDERLAND

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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

		1
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?

☒ Yes ☐ No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?

☒ Yes ☐ No ☐ NT

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

☐ 09/2004 ☒ 03/2006 ☐ NT

2. Does your MS4/Coalition have a SWPPP review procedure in place?

☒ Yes ☐ No

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

	2	2
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?

☒ Yes ☐ No ☐ NT

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

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

☐ Yes ☒ No

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

		7
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2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

	2	2
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3. What percent of active construction sites were inspected during this reporting period? ☐ NT

1	0	0
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 %

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

1	0	0
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 %

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

☒ Yes ☐ No ☐ NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?

☒ Yes ☐ No ☐ NT

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

☒ Yes ☐ No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

ALL THE TOWN CONSTRUCTION SITES ARE MONITOR AND RECORDS KEPT ON FILE. THEY ARE THERE TO REVIEW IF NEEDED. WE WILL BE TRANSFERING INFORMATION ONTO LAPTOP FOR MORE ACCURATED MONITORING.

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

WE HAVE WRITTEN PROCEDURES IN PLACE TO MONITOR ALL CONSTRUCTION SITES. OFTEN TOWN REVIEWS DEC ACTIVE CONSTRUCTION SITES TO MAKE SURE ALL ARE ON FILE. STORM WATER OFFICER CHECKS SITES REGULARY FOR COMPLIANCE. ALONG WITH NEW LAPTOP FOR FASTER MORE ACCURATE MONITORING.

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

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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

INSPECTION SITES AND RULES ARE FOLLOWED TO DEC BLUE BOOK . MAKE SURE CONTRACTORS FOLLOW RULES OF THE BLUE BOOK. NOTIFICATIONS TO CONTRACTORS IMMEDIATLY IF ANY VIOLATION IS OCCURING. THIS HAS ALWAYS BEEN OUR GOAL.

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

TOWN OF GUILDERLAND

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Minimum Control Measure 5. Post-Construction Stormwater Management

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

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

How many MS4s contributed to this report?	1
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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			
● Infiltration Basins	5	1	1
● Open Channels	2	2	2
● Ponds	5 4	4 7	1
○ Wetlands			
○ Other			

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

☒ 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

[illegible]

MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☐ Yes ☒ No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

☐ Yes ☒ No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

☐ Yes ☒ No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		0
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

	5	0
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 %

MS4 Annual Report Form

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2	0	1	9
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Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

TOWN IS CONSTANTLY PUSHING GREEN INFRASTRUCTURE THROUGH IT'S PLANNING BOARD. ALL NEW SITES ARE LOOK AT TO SEE WHAT THEY PROVIDE IN GREEN INFRASTRUCTURE.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

WE ARE DOING A BETTER JOB OVER ALL, BUT THERE IS ALWAYS MORE TO ADCHIEVE. TOWN IS ON THE RIGHT TRACK , BUT TIME AND STAFFING ARE ALWAYS A FACTOR.WE DO THE BEST JOB WE CAN ON THIS ISSUE.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☒ Yes ☐ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

TOWN PLANNING BOARD WILL CONSTANTLY PUSHING FOR GREEN INFRASTRUCTURE.WE WILL LOOK AT ALL NEW PROJECTS TO SEE WHAT CAN BE DONE BY ADDING GREEN INFRASTRUCTURE.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

TOWN OF GUILDERLAND									
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SPDES ID

N	Y	R	2	0	A	2	1	1
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- ☒ On behalf of an individual MS4
☐ On behalf of a coalition

How many MS4s contributed to this report?

		1
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- 1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>	<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>
Street Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Bridge Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Other.....	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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2. Provide the following information about municipal operations good housekeeping programs:

- ☒ Parking Lots Swept (Number of acres X Number of times swept) # Acres

				3
--	--	--	--	---
- ☒ Streets Swept (Number of miles X Number of times swept) # Miles

		2	1	0
--	--	---	---	---
- ☒ Catch Basins Inspected and Cleaned Where Necessary #

		1	1	5
--	--	---	---	---
- ☒ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

			2	2
--	--	--	---	---
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

				0
--	--	--	--	---
- ☒ Nitrogen Applied In Chemical Fertilizer # Lbs.

	2	5	0	0
--	---	---	---	---
- ☒ Pesticide/Herbicide Applied # Acres

		1	4	.	
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 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

				1
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4. What was the date of the last training?

0	4
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 /

2	0
---	---

 /

2	0	1	8
---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	3	2
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

	7	5
--	---	---

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

2	0	1	9
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Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

TOWN SWEEPS ROADS EVERY SPRING AND COMPLETED ABOUT 3/4 OF ENTIRE TOWN. WE HAVE ALSO CLEAN OUT 22PONDS AND HAVE MAPPED ALL OUR PONDS THIS YEAR.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

TOWN YEARLY CLEANS RETENTION PONDS, SWEEPS ROADS AND CLEANS OUT DITCHES AND CATCH BASINS.WE CLEAN OUT AS MANY BASINS AS WE CAN WITH THE EQUIPMENT WE HAVE.

C. How many times was this observation measured or evaluated in this reporting period?

			1
--	--	--	---

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☒ Yes ☐ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

TOWN HAS COMPLETED ALL FACILITY AUDITS IN 3 YEAR PERIOD. OUR INVOLVEMENT TO THE MEASUREABLE GOAL IS VERY GOOD AND WILL CONTINUE TO BE IN THE FUTURE, AS A SCHEDULE IS IN PLACE FOR YEARLY ACTIVITY.WE ALSO HAVE A NEW LAPTOP FOR RECORD KEEPING THAT WILL HELP MONITORING ALL INSPECTIONS.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0					
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Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

- ☐ On behalf of an individual MS4
☒ On behalf of a coalition

How many MS4s contributed to this report?

1	1
---	---

1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- | | |
|--|--|
| <input checked="" type="radio"/> Construction Sites
<input checked="" type="radio"/> General Stormwater Management Information
<input type="radio"/> Household Hazardous Waste Disposal
<input type="radio"/> Illicit Discharge Detection and Elimination
<input checked="" type="radio"/> Infrastructure Maintenance
<input checked="" type="radio"/> Smart Growth
<input type="radio"/> Storm Drain Marking
<input type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development
<input checked="" type="radio"/> Other: | <input checked="" type="radio"/> Pesticide and Fertilizer Application
<input checked="" type="radio"/> Pet Waste Management
<input type="radio"/> Recycling
<input checked="" type="radio"/> Riparian Corridor Protection/Restoration
<input type="radio"/> Trash Management
<input checked="" type="radio"/> Vehicle Washing
<input type="radio"/> Water Conservation
<input type="radio"/> Wetland Protection
<input type="radio"/> None |
|--|--|

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
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Other

2. Specific audiences targeted during this reporting period:

- | | |
|--|---|
| <input checked="" type="radio"/> Public Employees
<input checked="" type="radio"/> Residential
<input checked="" type="radio"/> Businesses
<input type="radio"/> Restaurants
<input checked="" type="radio"/> Other: | <input checked="" type="radio"/> Contractors
<input type="radio"/> Developers
<input checked="" type="radio"/> General Public
<input type="radio"/> Industries
<input type="radio"/> Agricultural |
|--|---|

G	e	n	e	r	a	l	P	u	b	l	i	c	-	C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e		
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Other

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

2	0	1	9
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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0					
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3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☒ Construction Site Operators Trained

Trained

			4	7
--	--	--	---	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				7
--	--	--	--	---

☒ List-Serves

In List

		1	8	1
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

			8	4
--	--	--	---	---

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

			5	6
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Locations (e.g. libraries, town offices, kiosks)

P	r	e	s	e	n	t	a	t	i	o	n	H	a	n	d	o	u	t	s
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2		C	W	P		W	e	b	c	a	s	t	s						
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H	R	W	s	h	e	d	A	l	l	i	a	n	c	e	-	P	r	e	s
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S	t	o	r	m	M	a	p	g	-	P	a	t	r	o	o	n	C	r	k
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☒ Other:

2		C	W	P		W	e	b	c	a	s	t	-	A	r	c	h	i	v
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☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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4. Evaluating Progress Toward Measurable Goals MCM 1

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Coalition goals for 2018/2019: 1. Maintain/update Coalition website (member info; post DRAFT Joint AR/ SWMP doc for public comment; post new publications); 2. Provide Coalition members with brochures; 3. Provide traditional MS4 members with a Public Education Program Development Tool which displays the location of target audiences (residential, commercial, institution, industrial); the associated pollution generating behaviors; and likely pollutants of concern.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

1. Coalition website maintained and updated
2. Brochures provided or printed when requested
3. Traditional MS4s provided with hard copy map of their MS4 land use types, matched to target audience types (residential, commercial, institutional, industrial), with info about associated pollution generating behavior, and Pollutants of Concern. Land use/target audience layer on SwIM.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this Measurable Goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☐ Yes ☒ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

2019/2020 Coalition Goals: 1. Support and update Coalition website; 2. Sponsor one Center for Watershed Protection webcast; 3. Print and distribute stormwater publications for interested members; 4. Understand and explain to members Public Education/Outreach requirements suggested by the DRAFT Permit (GP-0-17-002; 5. Discuss with members the current inventory of printed material/decide which if any publications should be printed in large quantities/modified/dropped.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 9

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0			
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Minimum Control Measure 2. Public Involvement/Participation

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?	1	1
---	---	---

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:

- | | | | | | |
|--|--|--|--|--|---|
| <input type="radio"/> Cleanup Events | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input checked="" type="radio"/> Comments on SWMP Received | # Comments | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="0"/> |
| <input checked="" type="radio"/> Community Hotlines | Phone # | (<input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="8"/>) | <input type="text" value="4"/> <input type="text" value="4"/> <input type="text" value="7"/> | - | <input type="text" value="5"/> <input type="text" value="6"/> <input type="text" value="4"/> <input type="text" value="5"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | |
| <input type="radio"/> Community Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Plantings | Sq. Ft. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Storm Drain Markings | # Drains | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Stakeholder Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input checked="" type="radio"/> Volunteer Monitoring | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="4"/> |
| <input checked="" type="radio"/> Other: | Public Comments Joint DR AFTMS 4 Pmt | | | | |

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? ☒ Yes

- | | | | | | | |
|---|------------|--|--|--|---|---|
| <input checked="" type="radio"/> List-Serve | # In List | | | | 3 | 4 |
| <input type="radio"/> Newspaper Advertising | # Days Run | | | | | |
| <input type="radio"/> TV/Radio Notices | # Days Run | | | | | |
| <input type="radio"/> Other: | | | | | | |
- ☒ Web Page URL: Enter URL(s) on the following two pages.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

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URL

URL

URL

URL

URL

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
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SPDES ID

N	Y	R	2	0				
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4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5
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 /

0	3
---	---

 /

2	0	1	9
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4.b. For how many days was/will this report be posted?

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

☐ Yes ☐ No

If Yes, what was the date of the meeting?

--	--

 /

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 /

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If No, is one planned?

☐ Yes ☐ No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

2	0	1	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

Jan, 2018 the Coalition received notice that MS4Web software used to write/update the Joint Coalition SWMP document had been replaced by MS4Web2.0. Using the new format, the SWMP document was updated. "Goals met" were tracked as Activities, noting what happened, when. New goals were written covering the time frame: 3/10/2018 to 3/9/2019 (2018-2019). These goals included elements of proposed MS4 Permit (GP-0-17-002). 2 WAVE stream events planned for '18.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

A hybrid Joint Coalition SWMP Plan "Annual Evaluation" document listing activities completed from 3/10/2017 to 3/9/2018 and goals for the permit reporting year 3/2018 to 3/2019) was posted on the Coalition website 4/28/2018. The CBI MS4Web 2.0 SWMP Plan module was used to create the document. Completed 4 Coalition-wide WAVE stream monitoring events (3 days & 4 sites)-1 site Salt Kill; 2 sites Vly Creek; and 1 site Lisha Kill.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☒ Yes ☐ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

2019/2020 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. With Coalition members, identify plausible, doable public participation activities which focus on water quality directly, which could be organized spring, summer or early fall. Develop an implementation plan with members, which respects available time. Develop a budget and staffing plan to implement, include in 2020 Coalition budget if advised.

2	0	1	9
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Name of MS4/Coalition

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[illegible][illegible]

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

GRANT: 1. Complete field work system/program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Review/prepare exist'g datasets from UAlb/T-Bethlehem/T-Colonie for Krumkill/Patroon/Ann Lee Pond for sewershed delineations; 3. Complete sewershed delineations; 4. Use Survey123 to develop ORI form; 5. Purchase/load/give tablets w/ORI Form to interested MS4s. OTHER: 6 Stock ORI Kits as needed

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

GRANT: 1&2. Storm system/program mapping completed-data posted on SwiM for Alb Cnty, T/New Scotland, City/Albany, and V/Green Island. 2&3. Datasets from UAlbany, T/Bethlehem, and T/Colonie prepared and integrated with V/Colonie, City/Albany, and Albany County datasets to completed 3 storm sewershed delineations (Ann Lee/Patroon/Krumkill). 4&5 ArcGIS Online Survey123/Collector forms created (ORI/Constrution/MuniFac)/loaded to tablets for intersted MS4s.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☒ Yes ☐ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

2019/2020 Coalition Goals: 1. Stock ORI kits as needed, based on current MS4 Permit; 2. Price water sample costs associated with DRAFT MS4 Permit MCM3 Outfall Sampling and MCM 6 MSGP requirements; 3. Discuss with Coalition members need/value of ORI field training using tablet. Organize if interest.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
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SPDES ID

N	Y	R	2	0					
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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

GRANT: 1. Use Survey123 to develop MS4 Construction Site Inspection Form; 2. Purchase/load/give tablet w/MS4 Construction Site Inspection Form to interested MS4s. OTHER: 3. Co-sponsor with ACSWCD, 1 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members for distribution to their contacts; post training info on Coalition website; pay tuition(s) as needed, funds permitting.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

GRANT: 1/2. Survey123 MS4 Construction Site Inspection Form finalized and loaded onto tablets for interested MS4s-two tablet training sessions. OTHER: 3. (One) 4hr E/SC training for Construction Site Operators co-sponsored with ACSWCD (12/7/2018). 21 stormwater related staff from 4 MS4s attended Construction Activity Pmt related trainings (4hr E/SC trainings; 2 Eastern NY SW RTC trainings 4/19/18 Filtration-Infiltrations & 6/19/2018 Small Dam Design) Coalition funded

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☐ Yes ☒ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

2019/2020 Coalition goal: 1. Co-sponsor with ACSWCD, 1 4hr E/SC training for Construction Site Operators/distribute promotional material to Coalition members/post training info on Coalition website/pay tuition as needed, if possible. 2. Discuss with Coalition members need/value of MS4 Construction Site Inspection field training using tablets w/Form. Organize if interest.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0					
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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.

GRANT: 1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop PC SMP inspection form(s) modeled after NYSDEC Maintenance Guidance - SW Mgmt Practices 3. Purchase/load/give tablets w/PC SMPs Inspection Form(s) to interested M

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

GRANT: 1. System and program mapping completed and data posted on SwIM for Alb County, T/NewScotland, City/Albany, and V/Green Island. 2. No Survey123/Collector ArcGIS Online forms created for PC SMP inspections.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☐ Yes ☒ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

2019/2020 Coalition goals: 1. Develop pilot Survey123 PCSMP form using the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017) while the Coalition Stormwater Program Technician is available

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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2. Provide the following information about municipal operations good housekeeping programs:

- ☐ Parking Lots Swept (Number of acres X Number of times swept) # Acres

--	--	--	--	--
- ☐ Streets Swept (Number of miles X Number of times swept) # Miles

--	--	--	--	--
- ☐ Catch Basins Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Pesticide/Herbicide Applied # Acres

					.	
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(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

				5
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4. What was the date of the last training?

0	3
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 /

0	7
---	---

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2	0	1	9
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5. How many municipal employees have been trained in this reporting period?

		2
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

1	0	0
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 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0					
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

GRANT: 1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop Municipal Self Audit form; 3. Purchase/load/give tablets w/Municipal Self Audit Form to interested MS4s. OTHER: 4. Coordinate circulation of train'g DVDs for members; 5. Fund/organize outside vendor/in-house train'g(s).

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

GRANT: 1. System and program mapping completed and data posted on SwIM for Alb County, T/NewScotland, City/Albany, and V/Green Island. 2/3. Survey123/Collector ArcGIS Online Municipal Self Audit form finalized and loaded onto tablets for interested MS4s. OTHER: 4. Training DVDs circulated among interested users at Coalition Working Group meetings. 5. No outside vendor or in-house trainings.

C. How many times was this observation measured or evaluated in this reporting period?

			0
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☒ Yes ☐ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

2019/2020 Coalition goals: 1. Coordinate circulation of Coalition train'g DVDs for use by Coalition members; 2. Monitor closely DRAFT MS4 Permit requirements regarding MCM 6 municipal facilities (High, Low, MSGP). Explain/prepare Coalition members; 3. Develop Coalition-wide staff development/training needs assessment; identify best approach in-house/vendors/DVDs; research costs/support materials; and match needs to likely DRAFT MS4 Permit requirements.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):

- ☐ On behalf of an individual MS4
☒ On behalf of a coalition

How many MS4s contributed to this report?

	1	1
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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	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? ☐ Yes ☐ No ☒ N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? ☐ Yes ☐ No ☒ N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

			%
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Estimate what percentage was mapped in this reporting period.

			%
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0					
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3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? ☐ Yes ☐ No ☒ N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?

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 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? ☐ Yes ☐ No ☒ N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? ☐ Yes ☐ No ☒ N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? ☐ Yes ☐ No ☒ N/A

7b. How many projects have been sited in this reporting period?

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7c. What percent of the projects included in 7b have been completed in this reporting period?

--	--	--

 %

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 ☒ N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? ☐ Yes ☐ No ☒ N/A

MS4 Annual Report Form

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2	0	1	9
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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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