

FINAL

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, 2019 to March 9, 2020

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) by June 1. As stated in SPDES General Permit No. GP-0-15-003, Part V. C. 2, “MS4s” may submit a Joint Annual Report provided they have a legally binding agreement. Each of the “MS4s” included in this report are co-signatories of such an agreement and the Stormwater Coalition Inter-municipal Agreement-Memorandum Of Understanding is posted on the Coalition website.

For Coalition “MS4s” the submission of a FINAL Joint Annual Report first involves posting the DRAFT Joint Annual Report on the internet for public comment (~14 days). If requested by two or more individuals a public meeting is organized and public comments or public meeting notes from local or Coalition led meetings are submitted with the Annual Report. For this report, comments will be submitted with the final submission. Due to Covid-19, Joint Annual Report submissions are staggered.

To learn more about MS4 Permit requirements, go to the NYSDEC website (<https://www.dec.ny.gov/chemical/8695.html>) and/or the Coalition website (<https://stormwateralbanycounty.org/>). To learn more about individual MS4 program implementation, go to the Coalition member page and follow links to individual “MS4” stormwater webpages. Your interest and understanding of stormwater program requirements is appreciated and public comments are strongly encouraged.

Due to social distancing mandates related to the Covid-19 pandemic and difficulties accessing records, the municipalities noted below (*) will be posting their draft and final annual report on the Coalition website at a later date (after June 1, 2020).

TO SUBMIT PUBLIC COMMENTS

1. Go to the Stormwater Coalition website Home page “Public Comment” portal www.stormwateralbanycounty.org.
2. Contact the Local Stormwater Public Contact listed in the Joint Annual Report for each permit holder (See MCC Form).
3. Contact the individuals listed as Public Contacts on the Coalition website (see Member pages).
4. By e-mail swcoalition@albanycounty.com or office phone 518-447-5645 (leave a message).

OTHER INFORMATION

1. Hard copies of this Final Joint Annual Report are available upon request.
2. If interested, contact the Stormwater Coalition office by email swcoalition@albanycounty.com or local MS4/ municipal offices by email (see Final Annual Report MCM 2 Page 4 of 6 for contact information).

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 FINAL 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, 2020. To view the SWMP Plan Annual Evaluation, go to Coalition website Plan/Program tab.

Traditional Non Land Use Control MS4

1. Albany County (NYR20A359)

Non-Traditional MS4

2. University at Albany-SUNY (NYR20A234)

Traditional Land Use Control MS4s

3. City of Albany (NYR20A464)
4. Town of Bethlehem (NYR20A208)
5. City of Cohoes (NYR20A243)
- *6. Town of Colonie (NYR20A190)
7. Village of Green Island (NYR20A377)

8. Town of Guilderland (NYR20A211)
- *9. Village of Menands (NYR20A144)
10. Town of New Scotland (NYR20A463)
11. Village of Voorheesville (NYR20A210)
12. 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) FormMCC form for period ending March 9,

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Name of MS4

ALBANY COUNTY

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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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MCC form for period ending March 9,

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Important Instructions - Please Read

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).

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.

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

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MCC form for period ending March 9,

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ALBANY COUNTY

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

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Name of MS4

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

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

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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) Form

MCC form for period ending March 9,

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Name of MS4

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Section 3 - Partner Information

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

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

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

SPDES Partner ID - If applicable

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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 R I K i t - S v y 1 2 3 O R I F o r m w / O F X Y d a t a

● 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 S W P P P R e v i e w L y r s o n S w I M M a p p e r

● MM6 C o a l T r a i n g B l i t z - S v y 1 2 3 M u n i A s m t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 ALBANY COUNTY DPW

SPDES ID

NYR20A359

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

DANIEL

MI

P

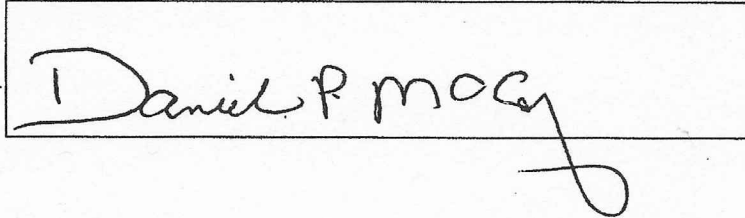
Last Name

MCCOY

Title (Clearly print title of individual signing report)

COUNTY EXECUTIVE

Signature



Date

05 / 20 / 2020

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

ALBANY COUNTY

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☐ Yes ☒ No

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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

ALBANY COUNTY

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

				3
--	--	--	--	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

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

☒ List-Serves

In List

	3	0	0	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

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☒ Printed Materials:

Total # Distributed

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

D	P	W		L	O	B	B	Y											
L	A	W	S	O	N	S		L	A	K	E								

☐ Other:

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

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MS4 Annual Report Form

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

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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

ALBANY COUNTY (DPW)

SPDES ID

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

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URL

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I	P	A	L	I	T	I	E	S	/	A	L	B	A	N	Y	-	C	O	U	N	T	Y	/								

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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

ALBANY COUNTY (DPW)

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.

CATCH BASIN STENCILING PROGRAM CONTINUED, FOCUSED ON MS4 REGULATED AREA. TIME CLOCK POSTER DISTRIBUTION CONTINUED, LARGE SEASONALLY APPROPRIATE POSTERS DISPLAYED AT 8 COUNTY FACILITIES. QUARTERLY STORMWATER TIP POSTED IN COUNTY EXECUTIVE EMAIL. DPW WEBSITE UPDATED FOR CURRENT MS4 RELATED INFORMATION.

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

COUNTY EXECUTIVE STORMWATER TIPS GENERATED INTEREST IN THE STORMWATER PROGRAM, SEVERAL EMPLOYEES REACHED OUT FOR MORE INFORMATION ON SUMP PUMP REGULATIONS FOR THEIR RESIDENCES.

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).

DPW WEBSITE WILL CONTINUE TO BE UPDATED WITH RELEVANT INFORMATION ON MS4 INFORMATION. CATCHBASIN STENCILING PROGRAM WILL ALSO CONTINUE. POSTER DISPLAY PROGRAM WILL CONTINUE, NEW POSTERS ARE BEING DEVELOPED DURING COVID-19 SHUTDOWN. COUNTY EXECUTIVE NEWSLETTER TIPS WILL CONTINUE.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

ALBANY COUNTY (DPW)

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:

- | | | | | | | | | | |
|---|--|--|--|---|---|--|--|---|---|
| <input type="radio"/> Cleanup Events | # Events | | | | | | | | |
| <input type="radio"/> Comments on SWMP Received | # Comments | | | | | | | | |
| <input checked="" type="radio"/> Community Hotlines | 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="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="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="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="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="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="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="text"/> <input type="text"/> <input type="text"/> |
| <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 type="radio"/> Volunteer Monitoring | # Events | | | | | | | | |
| <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

ALBANY COUNTY (DPW)																			
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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.

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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

ALBANY COUNTY (DPW)

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

A	L	B	A	N	Y		C	O	U	N	T	Y		D	P	W		E	N	G	I	N	E	E	R	I	N	G		
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City

V	O	O	R	H	E	E	S	V	I	L	L	E			
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N	Y
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Zip

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Phone

(5	1	8)	6	5	5	-	7	9	2	4
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☐ Library

☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

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City

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Zip

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Phone

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☒ Other

☒ Annual Report ☒ SWMP Plan ☒ Comments

Address

1	7	5		G	R	E	E	N		S	T	R	E	E	T														
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City

A	L	B	A	N	Y								
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N	Y
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Zip

1	2	2	0	2	-				
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Phone

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☐ Web Page URL:

☐ Annual Report ☐ SWMP Plan ☐ Comments

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

☒ eMail

☒ Comments

R	O	B	E	R	T	.	G	U	N	T	H	E	R	@	A	L	B	A	N	Y	C	O	U	N	T	Y	N	Y	.	G
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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

ALBANY COUNTY (DPW)

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

Name of MS4/Coalition

ALBANY COUNTY (DPW)

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.

PUBLIC CONTACT INFORMATION IS UPDATED IS NEEDED IN MS4 PERMIT ANNUAL REPORT MCC FORM, OTHER INTERNAL FORMS. DPW AND NATURAL RESOURCES RECIEVE INQUIRIES AND COMPLAINTS FROM THE PUBLIC REGARDING STORMWATER ISSUES. 24 HR HOTLINE MAINTAINED BY DPW OPERATIONS FOR URGENT ISSUES. WAVE PROGRAM PUBLICIZED ON DPW WEBSITE

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

DPW RECIEVED 9 STORMWATER RELATED COMPLAINTS, ALL ISSUES ADDRESSED, SEVERAL RESOLVED. WAVE PROGRAM HAD A LARGE RESPONSE FROM VOLUNTEERS IN THE AREA.

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).

ACDPW STORMWATER PROGRAM TECH WILL UPDATE PUBLIC CONTACT INFO AS NEEDED IN THE MS4 ANNUAL PERMIT REPORT FORM AND OTHER FORMS AS NEEDED. DPW AND NATURAL RESOURCES OFFICE WILL CONTINUE TO HANDLE PUBLIC STORMWATER ISSUES. WAVE INFORMATION, JOINT ANNUAL REPORT WILL BE POSTED ON DPW WEBSITE

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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- On behalf of a coalition

How many MS4s contributed to this report?	1
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1. Enter the number and approx. percent of outfalls mapped:

		2	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)?

☐ None

[illegible]

- Sewersheds:

[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

ALBANY COUNTY (DPW)

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

C	O	N	S	T	R	U	C	T	I	O	N		A	C	T	I	V	I	T	Y		D	I	S	C	H	A	R	G	E	
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4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

	1	0
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5. How many illicit discharges have been confirmed during this reporting period?

	1	0
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6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

		9
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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?

			%
--	--	--	---

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

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o	m	/	w	e	b	m	a	p	/																						

URL

(a	b	o	v	e		i	s		p	a	s	s	w	o	r	d		p	r	o	t	e	c	t	e	d)		

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Name of MS4/Coalition	ALBANY COUNTY (DPW
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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

ALBANY COUNTY (DPW)

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.

DIGITAL ORI FORMS FINALIZED, USED IN INSPECTIONS. 33% OF ORI INSPECTIONS WERE COMPLETED DURING DRY PERIODS THROUGHOUT THE RECORDING PERIOD. IDDE ENFORCEMENT WAS COORDINATED WITH SURROUNDING MUNICIPALITIES, ACHD, ACWPD, IF NEEDED.

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

1 NOV ISSUED TO CONTRACTOR FOR DISCHARGE INTO MS4. FOLLOW UP INSPECTION SHOW THAT DISCHARGES CEASED FROM THAT LOCATION. CASE FROM PRIOR ORI INSPECTION PERIOD CLOSED, HEALTH DEPT FOUND NO CAUSE FOR SUSPICIOUS DISCHARGE, WILL CONTINUE TO MONITOR FOR CHANGES. MULTIPLE VERBAL WARNINGS, STOP WORK ORDERS, WARNING LETTERS ISSUED.

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).

CONTINUE ORI INSPECTIONS TO FINISH THE FINAL 33% OF OUTFALLS FOR 3 YEAR PERIOD. CONTINUE TO TRACK ILLICIT DISCHARGES AND ISSUE NOV'S, STOP WORK ORDERS, ETC IF NEEDED. COORDINATE WITH SURROUNDING MS4Ss FOR ENFORCEMENT ACTION IF NEEDED. LABEL OUTFALLS WITH ID# TO MAKE IDENTIFICATION EASIER FOR PUBLIC SHOULD AN ILLICIT DISCHARGE OCCUR

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

ALBANY COUNTY (DPW)

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?**

	5	0
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- 4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?** ☒ Yes ☐ No ☐ NT
- If Yes, how many public comments were received during this reporting period?

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

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

<input checked="" type="radio"/> Notices of Violation	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	<input type="radio"/> No Authority
				1				
<input checked="" type="radio"/> Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>2</td></tr></table>					2	<input type="radio"/> No Authority
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<input type="radio"/> Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input checked="" type="radio"/> Administrative Fines	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	<input type="radio"/> No Authority
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<input type="radio"/> Civil Penalties	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input checked="" type="radio"/> Administrative Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>2</td></tr></table>					2	<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>						
<input checked="" type="radio"/> Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>4</td></tr></table>					4	<input type="radio"/> No Authority
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

ALBANY COUNTY (DPW)

SPDES ID

N	Y	R	2	0	A	3	5	9
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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?

		1
--	--	---

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

		1
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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	2	0
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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

A	L	B	A	N	Y		C	O	U	N	T	Y		N	U	R	S	I	N	G		H	O	M	E				
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SPDES ID

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6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

A	L	B	A	N	Y		C	O	U	N	T	Y		N	U	R	S	I	N	G		H	O	M	E				
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○ Library

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○ Other

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City

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

URL

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MS4 Annual Report Form

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

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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

ALBANY COUNTY (DPW)

SPDES ID

N	Y	R	2	0	A	3	5	9
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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.

INTERDEPARTMENTAL COORDINATION ON SWPPP REVIEWS WAS STRENGTHENED WITHIN COUNTY GOV'T. ALBANY COUNTY STORMWATER POLICY PASSED BY COUNTY LEG (RESOLUTION 475). COUNTY PLANNING BOARD RECEIVED ASSISTANCE BY SWPT ON GML239 REVIEWS POTENTIALLY NEEDING SPDES COVERAGE.

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

MULTIPLE GML239 REVIEWS WERE SHOWN NEEDING CONSTRUCTION ACTIVITY PERMIT COVERAGE. COORDINATION BETWEEN COUNTY DEPTS ENSURED COMPLIANCE ON NURSING HOME PROJECT, OTHER SWPPP ISSUES RESOLVED. MULTIPLE JAF PERMITS SUBMITTED TO DIVISION OF ENVIRONMENTAL PERMITS FOR DPW PROJECTS.

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).

CONTINUE GML239 REVIEWS FOR STORMWATER COMPLIANCE, IMPLEMENT GI POLICY ON ALL NEW COUNTY DEVELOPMENT WHERE NECESSARY. MAINTAIN COMPLIANCE WITH ALL ENVIRONMENTAL PERMITS ALBANY COUNTY MAINTAINS/ MAY MAINTAIN WITHIN THE NEW RECORDING PERIOD.

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Name of MS4/Coalition	ALBANY COUNTY (DPW)
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N	Y	R	2	0	A	3	5	9
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How many MS4s contributed to this report?	1
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	# Inventoried	# Inspections	# Times Maintained
● Alternative Practices	<input type="text"/>	<input type="text"/> 1	<input type="text"/>
○ Filter Systems	<input type="text"/>	<input type="text"/>	<input type="text"/>
● Infiltration Basins	<input type="text"/>	<input type="text"/> 3	<input type="text"/> 1
○ Open Channels	<input type="text"/>	<input type="text"/>	<input type="text"/>
● Ponds	<input type="text"/>	<input type="text"/> 1	<input type="text"/> 1
○ Wetlands	<input type="text"/>	<input type="text"/>	<input type="text"/>
○ Other	<input type="text"/>	<input type="text"/>	<input type="text"/>

☒ 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

ALBANY COUNTY (DPW)

SPDES ID

N	Y	R	2	0	A	3	5	9
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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

ALBANY COUNTY (DPW)

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.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
MULTIPLE LEVEL 1 INSPECTIONS DONE AT COUNTY FACILITIES, ANY DEFICIENCIES FOUND HAVE BEEN REPORTED. PCSMPS THROUGHTOUT COUNTY ROW/DRAINAGE EASEMENTS WERE INSPECTED AND MAINTAINED IF NEEDED. INSPECTIONS AND MAINTENANCE FOCUSED ON URBANIZED MS4 AREA.

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

AREAS WITHIN COLONIE WERE MAINTAINED TO CLEAR SEDIMENT FROM INFILTRATION DITCHES THAT WERE CAUSING MINOR FLOODING. SEDIMENT BUILD UP WAS REMOVED AND AREA IS FUNCTIONING PROPERLY TO INFILTRATE RUNOFF FROM ROADWAY. OTHER DRAINAGE DITCHES WERE CLEANED TO PREVENT FLOODING FROM OCCURRING.

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).

CONTINUE PCSMP INSPECTIONS FOLLOWING PRIOR INSPECTION SCHEDULES. UPDATES TO SWCO FOR ONLINE MAPPING OF PCSMPS WILL CONTINUE. SWPT WILL CONTINUE UPDATING AND MAINTAINING INVENTORY OF PRACTICES, TYPES OF PRACTICE, MAINTENANCE PERFORMED, AND LOCATION BASED ON THE URBANIZED/NON-URBANIZED AREA.

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

ALBANY COUNTY (DPW)

SPDES ID

N	Y	R	2	0	A	3	5	9
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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 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 type="radio"/> Yes <input type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes <input 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 checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input checked="" type="radio"/> Yes <input 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 type="radio"/> Yes <input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input 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,

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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

ALBANY COUNTY (DPW)

SPDES ID

N	Y	R	2	0	A	3	5	9
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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

			5	7
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- Catch Basins Inspected and Cleaned Where Necessary #

			3	6
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- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

				8
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- Phosphorus Applied In Chemical Fertilizer # Lbs.

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

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

			0	.	
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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?

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

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

--	--	--

 %

MS4 Annual Report Form

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

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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

ALBANY COUNTY (DPW)

SPDES ID

N	Y	R	2	0	A	3	5	9
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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.

DPW WILL SWEEP 50 ROAD MILES AND 10 ACRES OF PARKING LOTS WITHIN THE URBANIZED AREA OF ALBANY COUNTY. TWO FACILITIES DUE TO BE AUDITED WERE COMPLETED, TIMES UNION CENTER AND CORRECTIONAL FACILITY. ROVING TRAINING WAS HELD BY STORMWATER COALITION, 39 MEMBERS OF COUNTY LEG WERE TRAINED. SPILL PREVENTION TRAINING PROVIDED TO DGS, DPW FOR EMEN

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

SPILL PREVENTION TRAINING RECEIVED GOOD FEEDBACK FROM FOREMEN. SELF AUDITS RECIEVED GOOD FEEDBACK FROM FACILITY ADMINISTRATION ON GOOD HOUSEKEEPING BMPS. DPW SWEPT 57 MILES AND 12 ACRES OF PARKING LOTS WITHIN THE TOWNS OF COLONIE AND GUILDERLAND.

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).

ROAD SWEEPING GOAL WILL CONTINUE (50 ROAD MILES, 10 AC OF PARKING LOTS) SPILL PREVENTION, GOOD HOUSEKEEPING TRAINING SCHEDULE WILL RESUME WHEN FULL OPERATIONS COMMENCES. CONTINUE SELF AUDIT PROGRAM (EACH FACILITY TO BE AUDITED EVERY 3 YEARS)

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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Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

1	2
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1. Targeted Public Education and Outreach Best Management Practices

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

- | | |
|--|---|
| <input checked="" type="radio"/> Construction Sites | <input checked="" type="radio"/> Pesticide and Fertilizer Application |
| <input checked="" type="radio"/> General Stormwater Management Information | <input checked="" type="radio"/> Pet Waste Management |
| <input checked="" type="radio"/> Household Hazardous Waste Disposal | <input checked="" type="radio"/> Recycling |
| <input checked="" type="radio"/> Illicit Discharge Detection and Elimination | <input type="radio"/> Riparian Corridor Protection/Restoration |
| <input checked="" type="radio"/> Infrastructure Maintenance | <input checked="" type="radio"/> Trash Management |
| <input type="radio"/> Smart Growth | <input checked="" type="radio"/> Vehicle Washing |
| <input type="radio"/> Storm Drain Marking | <input type="radio"/> Water Conservation |
| <input type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development | <input type="radio"/> Wetland Protection |
| <input checked="" type="radio"/> Other: | <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 type="radio"/> Contractors |
| <input type="radio"/> Residential | <input type="radio"/> Developers |
| <input type="radio"/> Businesses | <input checked="" type="radio"/> General Public |
| <input type="radio"/> Restaurants | <input type="radio"/> Industries |
| <input checked="" type="radio"/> Other: | <input type="radio"/> Agricultural |

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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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

			3	1
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☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
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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

		1	6	0
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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	6	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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C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
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C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z
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☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
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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.

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

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

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

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

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	2
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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 type="radio"/> Community Hotlines | 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="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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| | | | | | |
| <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="5"/> |
| <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 | | | | 2 | 6 |
| <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

URL

URL

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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

Stormwater Coalition of Albany County

SPDES ID

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

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

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

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?

		/			/				
--	--	---	--	--	---	--	--	--	--

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

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 (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

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

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.

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

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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 SWMP?

☒ Yes ☐ No

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

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

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N	Y	R	2	0				
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	1	2
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					#				%
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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?

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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.

2020/2021 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.

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

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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.

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.

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

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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.

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

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

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

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

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

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

--	--	--	--	--
- ☐ 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?

			2	5
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4. What was the date of the last training?

0	3
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 /

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

2	4	7
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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																			
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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

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

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

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

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Name of MS4

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2 0 2 0

Name of MS4 University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for **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

H a v i d a n

MI

Last Name

R o d r i g u e z

Title

P r e s i d e n t

Address

1 4 0 0 W a s h i n g t o n A v e .

City

A l b a n y

State

N Y

Zip

1 2 2 2 2 -

eMail

p r e s m a i l @ a l b a n y . e d u

Phone

(5 1 8) 9 5 6 - 8 0 1 0

County

A l b a n y

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

2 0 2 0

Name of MS4 University at Albany (SUNY Uptown Campus)

SPDES ID

N Y R 2 0 A 2 3 4

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for ***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)
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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

K a r l

MI

Last Name

K i l t s

Title

D i r e c t o r C o d e A d m i n i s t r a t i o n

Address

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City

A l b a n y

State

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Zip

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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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Name of MS4

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For each contac

- ☐ Principal Executive Officer
- ☐ Duly Authorized Representative
- ☒ Local Stormwater Manager
- ☒ Stormwater Management Committee
- ☒ Report Preparer

First Name

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MI

Last Name

[illegible]

Title

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State

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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, 2020

Name of MS4 University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

Section 3 - Partner Information

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

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 7 5 G r e e n S t .

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

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

Phone

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

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

☒ Yes ☐ No

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

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

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

● MM3 O R I K i t - S v y 1 2 3 O R I F o r m w / O F x y d a t a

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

● MM5 S W P P P R e v i e w L y r s o n S w I M M a p p e r

● MM6 C o a l T r a i n g B l i t z - S v y 1 2 3 M u n i A s m t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

Section 4 - Certification Statement

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

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

First Name

K a r l

MI

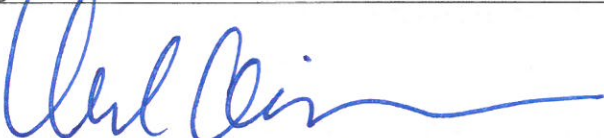
Last Name

K i l t s

Title (Clearly print title of individual signing report)

D i r e c t o r C o d e A d m i n i s t r a t i o n

Signature



Date

05 / 18 / 2020

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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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

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
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Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

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1. Targeted Public Education and Outreach Best Management Practices

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

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

2. Specific audiences targeted during this reporting period:

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

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

☐ Construction Site Operators Trained

Trained

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☐ Direct Mailings

Mailings

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☒ Kiosks or Other Displays

Locations

				1
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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

				1
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☒ Public Events/Presentations

Attendees

			1	4
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☒ School Program

Attendees

			4	5
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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

University at Albany (SUNY) Uptown Campus

N	Y	R	2	0	A	2	3	4
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URL

[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

University at Albany (SUNY) Uptown Campus

SPDES ID

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

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

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

- 1) Install stormwater signage for treatment practices and green infrastructure
- 2) Monitor website and update when required.
- 3) Continue using and monitor "No Dumping" on CB's frame castings as standard.
- 4) Provide stormwater information for students and others, and conduct GI tours when requested and document activity.

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

- 1) Signs are being ordered and installed this year.
- 2) Website updated
- 3) "No Dumping" label on castings installed for new catch basin installations.
- 4.) Three (3) educational sessions performed: Green infrastructure tour for grammar school, County officials, presentation before NYS sustainability committee.

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

			6
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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) Install Green Infrastructure interpretive signs at four 4) locations.
- 2) Update website when required.
- 3) Continue using and monitor "No Dumping" on CB's frame castings as standard.
- 4) Provide stormwater information for students and others, and conduct GI tours or presentations when requested and document activity.

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

University at Albany (SUNY) Uptown Campus

SPDES ID

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

URL

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MS4 Annual Report Form

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

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

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

SPDES ID

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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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City

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Phone

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○ Library

☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

[illegible]

City

[illegible]

Phone

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☐ Other

☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

[illegible]

City

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Phone

$$\left(\begin{array}{|c|} \hline \\ \hline \end{array} \right) \begin{array}{|c|} \hline \\ \hline \end{array} - \begin{array}{|c|} \hline \\ \hline \end{array}$$

● 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

University at Albany (SUNY) Uptown Campus

SPDES ID

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

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

0	5
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2	0	2	0
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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,

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Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

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.

1) Inform benefits of campus cleanup on stormwater facilities and water quality in promotion notification of campus cleanup day activity.

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

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

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

			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).

1) Inform benefits of campus cleanup on stormwater facilities and water quality in promotion notification of campus cleanup day activity.

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

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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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			%
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☒ Yes ☐ No
☐ Yes ☒ No

[illegible][illegible]

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

University at Albany (SUNY) Uptown Campus

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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

University at Albany (SUNY) Uptown Campus

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) Review and update as necessary requirements of MS4 Permit
- 2) Continue to monitor and address illicit discharges.

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

- 1) Reviewed requirements of MS4 Permit Review and no updates required.
- 2) There were no illicit discharges to address..

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).

- 1) Review and update as necessary requirements of MS4 Permit
- 2) Continue to monitor for and address illicit discharges.
- 3) Perform ORI on 11 outfalls

MS4 Annual Report Form

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

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Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

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

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

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

How many MS4s contributed to this report?

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

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

☐ 09/2004 ☐ 03/2006 ☒ NT

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

		0
--	--	---
- 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 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

University at Albany (SUNY) Uptown Campus

SPDES ID

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

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

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

How many MS4s contributed to this report?

--	--	--

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

		2
--	--	---

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

		2
--	--	---

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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Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

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

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

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

- 1) Stormwater Management program Coordinator to continue to oversee Construction Activity Permit requirements
- 2) Perform site visits at construction sites as needed.

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

- 1) Stormwater Management program Coordinator oversaw Construction Activity Permit requirements
- 2) Site visits at construction sites were performed when needed.

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).

- 1) Stormwater Management program Coordinator to continue to oversee Construction Activity Permit requirements
- 2) Perform site visits at construction sites as needed.

MS4 Annual Report Form

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

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Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

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

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

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

How many MS4s contributed to this report?

--	--	--

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

	# Inventoried	# Inspections	# Times Maintained									
<input type="radio"/> Alternative Practices	<table><tr><td></td><td>1</td><td>5</td></tr></table>		1	5	<table><tr><td></td><td>1</td><td>5</td></tr></table>		1	5	<table><tr><td></td><td></td><td></td></tr></table>			
	1	5										
	1	5										
<input type="radio"/> Filter Systems	<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"/> Infiltration Basins	<table><tr><td></td><td></td><td>7</td></tr></table>			7	<table><tr><td></td><td></td><td>7</td></tr></table>			7	<table><tr><td></td><td></td><td>7</td></tr></table>			7
		7										
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<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 type="radio"/> Ponds	<table><tr><td></td><td></td><td>7</td></tr></table>			7	<table><tr><td></td><td></td><td>6</td></tr></table>			6	<table><tr><td></td><td></td><td></td></tr></table>			
		7										
		6										
<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>4</td></tr></table>			4	<table><tr><td></td><td></td><td>4</td></tr></table>			4	<table><tr><td></td><td></td><td>1</td></tr></table>			1
		4										
		4										
		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:

U	n	i	v	e	r	s	i	t	y		S	t	o	r	m	w	a	t	e	r		P	o	l	i	c	y			
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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

University at Albany (SUNY) Uptown Campus

SPDES ID

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

		1
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

		0
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 %

MS4 Annual Report Form

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SPDES ID

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

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

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

- 1) Inspect post-construction practices, and prepare report with any recommendations.
- 2) Review and update Post construction Practice inventory and mapping.

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

- 1) Post -construction practices inspected, report prepared and reviewed for requirements.
- 2) Post construction Practice inventory and mapping updated.
- 3.) One post-construction practice maintained.

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

			3
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

- 1) Inspect post-construction practices, and prepare report with any recommendations.
- 2) Review and update Post construction Practice inventory and mapping.
- 3.) Perform maintenance required on post-construction practices.

MS4 Annual Report Form

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Name of MS4/Coalition

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SPDES ID

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

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

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

How many MS4s contributed to this report?

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

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 type="radio"/> Yes	<input checked="" type="radio"/> No
Bridge Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" 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 type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Right of Way Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Parks and Open Space.....	<input type="radio"/> Yes	<input type="radio"/> No	<input 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,

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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

University at Albany (SUNY) Uptown Campus

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

			6	8
--	--	--	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles

		1	9	5
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary #

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

			3	2
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs.

				0
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- Nitrogen Applied In Chemical Fertilizer # Lbs.

	3	3	2	6
--	---	---	---	---
- Pesticide/Herbicide Applied # Acres

		4	6	.	8
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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?

				3
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4. What was the date of the last training?

0	3	/	0	5	/	2	0	2	0
---	---	---	---	---	---	---	---	---	---

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

	3	4
--	---	---

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

	1	7	%
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SPDES ID

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

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

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

1) Perform staff training.

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

1) Three (3) staff training sessions were presented.

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) Perform staff trainings
- 2) Develop a more consolidated reporting method for application of fertilizers and, pesticides and herbicides.
- 3) Be more diligent on catch basin inspections
- 4) Update mapping for facility assessments and maintenance.

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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Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

1	2
---	---

1. Targeted Public Education and Outreach Best Management Practices

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

- | | |
|---|---|
| <input checked="" type="radio"/> Construction Sites
<input checked="" type="radio"/> General Stormwater Management Information
<input checked="" type="radio"/> Household Hazardous Waste Disposal
<input checked="" type="radio"/> Illicit Discharge Detection and Elimination
<input checked="" type="radio"/> Infrastructure Maintenance
<input 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 checked="" type="radio"/> Recycling
<input type="radio"/> Riparian Corridor Protection/Restoration
<input checked="" 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 type="radio"/> Residential
<input type="radio"/> Businesses
<input type="radio"/> Restaurants
<input checked="" type="radio"/> Other: | <input type="radio"/> Contractors
<input type="radio"/> Developers
<input checked="" type="radio"/> General Public
<input type="radio"/> Industries
<input type="radio"/> Agricultural |
|--|--|

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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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

			3	1
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☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		1	6	0
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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	6	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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C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
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C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z
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☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
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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.

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

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

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

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

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	2
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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 type="radio"/> Community Hotlines | 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="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="text"/> | Phone # |
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| | | | | | |
| <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="5"/> |
| <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 | | | | 2 | 6 |
| <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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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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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	1
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2	0	2	0
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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	2	0
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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 (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

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

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.

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

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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 SWMP?

☒ Yes ☐ No

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

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

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

SPDES ID

N	Y	R	2	0				
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- On behalf of a coalition

How many MS4s contributed to this report?	1	2
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1. Enter the number and approx. percent of outfalls mapped:

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 #

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 %

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

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

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

[illegible]

- Sewersheds:

[illegible]

MS4 Annual Report Form

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

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

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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.

2020/2021 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.

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

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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.

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.

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

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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.

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

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

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

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?

			2	5
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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	4	7
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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																			
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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

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

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y
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MCC form for period ending March 9,

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City of Albany

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

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Name of MS4

City of Albany									
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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

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Title

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City

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State

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Zip

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eMail

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County

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MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 City of Albany

SPDES ID

N Y R 2 0 A 4 6 4

Section 3 - Partner Information

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

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

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

SPDES Partner ID - If applicable

N Y R 2 0

Address

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

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

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

Phone

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

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

☒ Yes ☐ No

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

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

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

● MM3 O R I K i t - S v y 1 2 3 O R I F o r m w / O F X Y d a t a

● 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 S W P P P R e v i e w L y r s o n S w I M M a p p e r

● MM6 C o a l T r a i n g B l i t z - S v y 1 2 3 M u n i A s m t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2 0 2 0

Name of MS4 City of Albany

SPDES ID

N Y R 2 0 A 4 6 4

Section 4 - Certification Statement

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

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

First Name

J o s e p h

MI

E

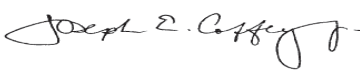
Last Name

C o f f e y , P . E .

Title (Clearly print title of individual signing report)

C o m m i s s i o n e r

Signature

 Digitally signed by Joseph E. Coffey, Jr, P.E.
 DN: cn=Joseph E. Coffey, Jr, P.E., o=City of
 Albany, NY, ou=Department of Water & Water
 Supply, email=jcoffey@albanyny.gov, c=US
 Date: 2020.05.14 10:59:55 -04'00'

Date

0 5 / 1 6 / 2 0 2 0

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 _____

City of Albany

N	Y	R	2	0	A	4	6	4
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Water Quality Trends

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

- On behalf of a coalition

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☐ 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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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 Albany

SPDES ID

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Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

--	--	--

1. Targeted Public Education and Outreach Best Management Practices

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

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

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Other

2. Specific audiences targeted during this reporting period:

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

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Other

MS4 Annual Report Form

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

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
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3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☐ Construction Site Operators Trained

Trained

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☐ Direct Mailings

Mailings

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☒ Kiosks or Other Displays

Locations

				1
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☒ List-Serves

In List

			3	6
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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

	1	6	3	5
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☒ School Program

Attendees

		1	8	9
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☐ TV Spot/Program

Days Run

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☒ Printed Materials:

Total # Distributed

		1	1	9
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Locations (e.g. libraries, town offices, kiosks)

A	l	b	a	n	y		W	a	t	e	r		D	e	p	t	.			
C	i	t	y		H	a	l	l		O	n		T	h	e		R	o	a	d
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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 Albany

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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 Albany

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. Stormwater coordinator (SWC)/staff will continue the stenciling of catch basins within the local watersheds. 2. SWC/staff will maintain 2 brochure racks at AWD. 3. SWC will continue to participate in school programs and tabling events. 4. SWC/staff will update the city stormwater website, Facebook page & Twitter account with additional stormwater material.

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

1. SWC stenciled 36 catch basins within the Hudson River watershed. 2. SWC/staff maintained 2 brochure racks at AWD. 3. SWC/staff participated in The Normanskill Farm Conservation Field Day, NYSDEC WAVE, Future Cities and performed tabling events during Down To Earth & City Hall on the Road. 4. Instead of updating the cities stormwater website, numerous stormwater related posts were made on the AWD Facebook & Twitter page.

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 coordinator (SWC)/staff will continue the stenciling of catch basins within the local watersheds. 2. SWC/staff will maintain 2 brochure racks at AWD. 3. SWC will continue to participate in school programs and tabling events. 4. SWC/staff will update the city stormwater website, Facebook page & Twitter account with additional stormwater material.

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 Albany																			
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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.

City of Albany

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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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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

D	e	p	a	r	t	m	e	n	t	o	f	W	a	t	e	r	&	W	a	t	e	r	S	u	p
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☐ Library

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

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

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

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

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

☐ Yes ☒ No

If Yes, what was the date of the meeting?

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If No, is one planned?

☐ Yes ☒ No

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

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

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

MS4 Annual Report Form

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

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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 Albany

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.

1. City of Albany (COA) will update the public contact annually. 2. COA will post a 2019/2020 Final Joint Report on website (stormwater page). 3. AWD will continue to lend support in the way of education and operational guidance information to community groups. 4. COA will coordinate with community and activist groups to plan and initiate public events.

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

1. SWC has updated the public contact. 2. The 2019/2020 Final Joint Report was posted on the Albany County Stormwater Coalition & city stormwater websites. 3. AWD has led support through education and operational guidance to the Vacant Land Group. 4. SWC coordinated catch basin marking with the Buckingham Pond Conservancy Group. The SWC & staff also helped coordinate and participated in the DEC WAVE Program.

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).

1. City of Albany (COA) will update the public contact annually. 2. COA will post a 2020/2021 Final Joint Report on website (stormwater page). 3. AWD will continue to lend support in the way of education and operational guidance information to community groups. 4. COA will coordinate with community and activist groups to plan and initiate public events.

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 Albany

SPDES ID

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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?

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

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 %

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

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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

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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 2 0

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

Name of MS4/Coalition

City of Albany

SPDES ID

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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

[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

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Name of MS4/Coalition

City of Albany

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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 Albany

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

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

1. Stormwater staff has reviewed completed construction projects for potential outfalls. 2. Stormwater staff followed the ORI Inspection Schedule Map and completed ORI on 52 outfalls. 3. Stormwater staff reviewed existing procedures for the IDDE program, no updates were performed. 4. Stormwater staff has collected data for 2 illicit discharges.

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).

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

MS4 Annual Report Form

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

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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 Albany

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?

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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?**

	1	0
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- 4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?** ☒ Yes ☐ No ☐ NT
- If Yes, how many public comments were received during this reporting period?

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

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

<input checked="" type="radio"/> Notices of Violation	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	<input type="radio"/> No Authority
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<input checked="" type="radio"/> Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	<input type="radio"/> No Authority
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

City of Albany

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?

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

		6
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2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

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

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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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Submit additional pages as needed.

● MS4/Coalition Office

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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 Albany

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.

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

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

1. The Stormwater Program Coordinator (SWC) e-mailed 36 contractors about the availability of 4-hr E-SC Training Courses on June 05, 2019. 2. The SWC reviewed the forms created by the Albany County Stormwater Coalition and has implemented them into the SWPPP Inspections. 3. The SWC has provided erosion and sediment training material at some of the pre-construction meetings.

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

MS4 Annual Report Form

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

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Name of MS4/Coalition

City of Albany

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. COA will review all SWPPP's on proposed projects and provide monthly inspections on active construction sites.

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

4. City of Albany staff and/or the SWC has reviewed 24 SWPPP's on proposed projects and has provided monthly inspections on all active construction sites.

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

2	0	2	0
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Name of MS4/Coalition

City of Albany

N	Y	R	2	0	A	4	6	4
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How many MS4s contributed to this report?		
---	--	--

	# Inventoried	# Inspections	# Times Maintained
○ Alternative Practices			
● Filter Systems	1 3	1	0
● Infiltration Basins	9	3	0
○ Open Channels			
● Ponds	1 3	8	1
○ Wetlands			
● Other	2 1	6	8

☒ Yes ☐ No

☒ 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:

[illegible]

MS4 Annual Report Form

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

2	0	2	0
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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 Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

		8
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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

 %

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 Albany

SPDES ID

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

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

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

1. SWC/staff will continue to update the inventory of built stormwater practices since 2003 and record them in the annual report.

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

1. SWC/staff GPS 100 % all newly discovered/built practices.

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. SWC/staff will continue to update the inventory of built stormwater practices since 2003 and record them in the annual report.

MS4 Annual Report Form

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

2	0	2	0
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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 Albany																			
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SPDES ID

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

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

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

How many MS4s contributed to this report?

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

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>	<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>
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 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	2	0
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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 Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
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2. Provide the following information about municipal operations good housekeeping programs:

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

				4
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles

1	7	5	1	2
---	---	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary #

		3	5	4
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

			2	7
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs.

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

	3	7	4	5
--	---	---	---	---
- Pesticide/Herbicide Applied # Acres

	3	7	4	.	4
--	---	---	---	---	---

(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	8
--	--	--	---	---

4. What was the date of the last training?

0	2	/	2	5	/	2	0	2	0
---	---	---	---	---	---	---	---	---	---

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

1	7	9
---	---	---

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

1	0	0	%
---	---	---	---

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 Albany

SPDES ID

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

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

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

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

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

1. SWC reassessed 12 facilities identified in Year 2/2 based on the three-year plan map, approximately one third of the revised facility audit inventory. 2. Staff reviewed catch basin inspection and cleaning schedule and records : 354 inspections, 177 repairs, 278 cleaned in the CSS and 76 cleaned in the MS4 areas with 292.6 tons debris removed.

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

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 Albany

SPDES ID

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

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

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

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

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

3. SWC has collected and maintained data on miles and acres swept, fertilizer, pesticide, herbicide, and other chemicals used, road salt applied, and household hazardous waste collected.

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

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

☐ On behalf of an individual MS4

☒ On behalf of a coalition

How many MS4s contributed to this report?

1	2
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1. Targeted Public Education and Outreach Best Management Practices

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

☒ Construction Sites

☒ General Stormwater Management Information

☒ Household Hazardous Waste Disposal

☒ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☐ Smart Growth

☐ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☒ Recycling

☐ Riparian Corridor Protection/Restoration

☒ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

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

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☐ Contractors

☐ Residential ☐ Developers

☐ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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Other

MS4 Annual Report Form

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

2	0	2	0
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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

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

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

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

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		2	6	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
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

C	W	P		W	e	b	c	a	s	t		R	o	a	d	S	a	l	t
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C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
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C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z
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☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
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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.

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

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

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

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

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	2
---	---	---

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

- | | | | | | |
|--|--|--|--|---|---|
| <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 type="radio"/> Community Hotlines | 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="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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| | | | | | |
| <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="5"/> |
| <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 | | | | 2 | 6 |
| <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

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2. URL(s) con't.:

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

URL

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MS4 Annual Report Form

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

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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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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	1
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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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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 (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

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

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.

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

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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 SWMP?

☒ Yes ☐ No

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

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

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Name of MS4/Coalition

Stormwater Coalition of Albany County

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How many MS4s contributed to this report?	1	2
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1. Enter the number and approx. percent of outfalls mapped:						#				%
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2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?

☐ None

[illegible]

○ Sewersheds:

[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?

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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

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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.

2020/2021 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.

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

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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.

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.

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

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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.

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

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

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

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

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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?

			2	5
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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	4	7
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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																			
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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

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

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

TOWN OF BETHLEHEM

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) FormMCC form for period ending March 9,

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Name of MS4

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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

M	a	r	c												
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MI

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Last Name

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Title

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City

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State

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Phone

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County

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

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Name of MS4

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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

J	o	e															
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MI

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Last Name

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Title

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Address

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City

D	e	l	m	a	r																
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State

N	Y
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Zip

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eMail

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Phone

(5	1	8)	4	3	9	-	4	9	5	5
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County

A	l	b	a	n	y												
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MS4 Municipal Compliance Certification (MCC) Form

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

Name of MS4

Town of Bethlehem

SPDES ID

N Y R 2 0 A 2 0 8

Section 3 - Partner Information

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

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

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

SPDES Partner ID - If applicable

N Y R 2 0

Address

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

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

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

Phone

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

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

☒ Yes ☐ No

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

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

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

● MM3 O R I K i t - S v y 1 2 3 O R I F o r m w / O F X Y d a t a

● 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 S W P P P R e v i e w L y r s o n S w I M M a p p e r

● MM6 C o a l T r a i n g B l i t z - S v y 1 2 3 M u n i A s m t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 TOWN OF BETHLEHEM

SPDES ID

N Y R 2 0 A 2 0 8

Section 4 - Certification Statement

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

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

First Name

M a r c

MI


Last Name

D o r s e y

Title (Clearly print title of individual signing report)

S u p e r i n t e n d e n t o f H i g h w a y s

Signature



Date

0 5 / 2 0 / 2 0 2 0

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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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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☐ 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

TOWN OF BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
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Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

--	--	--

1. Targeted Public Education and Outreach Best Management Practices

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

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

S	w	i	m	m	i	n	g		P	o	o	l		M	a	i	n	t	e	n	a	n	c	e								
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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 type="radio"/> Other: | <input checked="" type="radio"/> Contractors
<input checked="" type="radio"/> Developers
<input checked="" type="radio"/> General Public
<input type="radio"/> Industries
<input type="radio"/> Agricultural |
|---|--|

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Other

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

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

Name of MS4/Coalition

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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

				5
--	--	--	--	---

☒ Direct Mailings# Mailings

			3	6
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☒ Kiosks or Other Displays# Locations

				3
--	--	--	--	---

☒ List-Serves# In List

		4	3	5
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☐ Mailing List# In List

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☐ Newspaper Ads or Articles# Days Run

--	--	--	--	--

☒ Public Events/Presentations# Attendees

	1	0	0	0
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☐ School Program# Attendees

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☐ TV Spot/Program# Days Run

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☒ Printed Materials:Total # Distributed

		1	6	9
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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

TOWN OF BETHLEHEM

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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 BETHLEHEM

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. Meet with relevant Town Staff to decide future of Elm Ave. Park Rain Garden (relocation, time frame, tasks, and feasibility) 2. Distribute stormwater literature at two Household Hazardous Waste Collection days 3. Continue to distribute Moving Dirt and Pool Brochure to individuals seeking building permits and monitor amounts distributed

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

1. Dropped - Demonstration Rain Garden was not an MS4 permit requirement, dropped due to scheduling issues, prioritization of other tasks 2. Goal met - Distributed over 1,000 SW brochures (Over 500 per event) 3. Goal met - Distributed 128 Moving Dirt and 41 Pool brochures

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. Continue to distribute stormwater literature at two Household Hazardous Waste Collection Days, if organized (COVID19 dependent) 2. Continue to distribute Moving Dirt and Pool Brochure to individuals seeking a building permit 3. Insert stormwater message in at least one water & sewer bills specifically targeting illegal dumping into the MS4

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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2. URL(s) con't.:

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

URL

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S	t	o	r	m	w	a	t	e	r	-	M	a	n	a	g	e	m	e	n	t	-	P	r	o	g	r	a	m			

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

Name of MS4/Coalition

TOWN OF BETHLEHEM

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

1. Continue to support Annual Report public comment process and posting of FINAL Annual Report 2. Continue to support community cleanup days 3. Continue to support and track street tree plantings 4. Continue to support Coalition outreach to recruit volunteer stream monitors (WAVE)

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

1. Goal met - No public comments received, FINAL Annual Report posted on Town website 2. Goal met - Two community cleanup events were conducted in Town 3. Goal met - 3 street trees were planted 4. Goal met - Coalition conducted 4 WAVE stream monitoring events, 2 of which were held within Town of Bethlehem, Vlooman Kill and Onesquethaw/Coeymans Creek

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. Continue to support Community Clean Up Days 2. Continue to support Coalition outreach to recruit volunteer stream monitors (WAVE), contingent on COVID 19 restrictions 3. Continue to support and track street tree plantings 4. Continue to support the Annual Report public comment process and posting of FINAL Annual 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

TOWN OF BETHLEHEM

SPDES ID

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

		4	5	2
--	--	---	---	---

 #

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

 %

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

1	6	7
---	---	---

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

O	R	I		b	a	s	e	d		o	n		r	o	t	a	t	i	n	g		s	c	h	e	d	u	l	e	
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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,

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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 BETHLEHEM

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
- ☐ 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?

		3
--	--	---

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

		3
--	--	---

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?

		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

T	O	B		G	I	S		(i	n	t	e	r	n	a	l		u	s	e		o	n	l	y)						
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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 BETHLEHEM

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. Continue ongoing storm system mapping throughout the Town - prioritized area of interest = "Old Delmar"; locate and map storm system infrastructure and connectivity to outfalls 2. Create layer in Town GIS showing historically suspected, confirmed, and eliminated illicit discharges 3. Provide to the Coalition the Town's SSM GIS data for posting on SwIM (basins, main lines, outfalls) 4. Map new outfalls as needed 5. Conduct annual ORIs for 20% of Outfall inventory

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

1. Goal met - Conducted recon mapping and ORIs in Old Delmar and elsewhere in Town, collected mapping data to import to Stormwater GIS datasets, made updates to Storm System Mapping GIS data 2. Goal unmet - Unable to complete due to time constraints, other GIS priorities 3. Goal met - Cut of Storm System Mapping data provided to Coalition April, 2019 4. Goal met - Completed reconciliation of Outfall Inventory in Town GIS due to updated Storm System Mapping and Town's EPA MS4 Program Audit in 9/2020 5. Goal met - 167 ORIs completed

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. Continue ongoing Storm System Mapping (SSM) data collection and integration into SSM GIS datasets when possible 2. Map IDDEs by creating dataset in Town of Bethlehem Stormwater GIS 3. Continue to map new outfalls as they become active or are discovered 4. Continue to support the Track A Concern program and monitor/respond to public questions, complaints, other issues of concern 5. Conduct annual ORIs for 20% of MS4 Outfall inventory

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 BETHLEHEM

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?

--	--	--

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	0
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?

☒ Yes ☐ No ☐ NT

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

		0
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?

☐ Yes ☒ No

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

<input checked="" type="radio"/> Notices of Violation	#				1	6	<input type="radio"/> No Authority
<input type="radio"/> Stop Work Orders	#						<input type="radio"/> No Authority
<input type="radio"/> Criminal Actions	#						<input type="radio"/> No Authority
<input type="radio"/> Termination of Contracts	#						<input type="radio"/> No Authority
<input checked="" type="radio"/> Administrative Fines	#					1	<input type="radio"/> No Authority
<input type="radio"/> Civil Penalties	#						<input type="radio"/> No Authority
<input type="radio"/> Administrative Orders	#						<input type="radio"/> No Authority
<input type="radio"/> Enforcement Actions or Sanctions	#						
<input type="radio"/> Other	#						<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

TOWN OF BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
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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?

		4
--	--	---

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

	3	4
--	---	---

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,**

2 0 2 0

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

SPDES ID

Name of MS4/Coalition TOWN OF BETHLEHEM

N Y R 2 0 A 2 0 8

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

D P W - E n g i n e e r i n g D i v i s i o n

Address

4 4 5 D e l a w a r e A v e

City

D e l m a r

N Y

Zip

1 2 0 5 4 -

Phone

(5 1 8) 4 3 9 - 4 9 5 5

○ Library

Address

City

Zip

0 -

Phone

(0) 0 -

○ Other

Address

City

Zip

0 -

Phone

(0) 0 -

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

URL

URL

MS4 Annual Report Form

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

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Name of MS4/Coalition

TOWN OF BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
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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. Review and update SWPPP review procedures as needed 2. Continue to conduct formal, routine inspections of all active construction sites

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

1. Goal met - SWPPP review procedures and SWPPP review flowchart updated 8/2019 2. Goal met - all active construction sites were inspected multiple times

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).

1. Update Construction Site Inventory in Town GIS and track important permit elements 2. Conduct construction site SWPPP compliance inspections for all active construction sites multiple times throughout the reporting year 3. Ensure SWPPP reviewers have adequate stormwater training 4. Continue to conduct pre-construction meetings for all SPDES permitted Construction Activities

2	0	2	0
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Name of MS4/Coalition

SPDES ID

N	Y	R	2	0	A	2	0	8
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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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☒ Yes ☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

	1	3
--	---	---

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

1	0	0
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 %

MS4 Annual Report Form

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

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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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
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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. Continue to inspect all town-owned PCSMPs annually per permit requirements 2. Continue to contact owners of private PCSMPs to obtain inspection and maintenance documentation

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

1. Goal met - All Town-owned PCSMPs were inspected 2. Goal met - All owners of privately-owned PCSMPs were sent letter in 9/2019 requesting required operations & maintenance documentation

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. Update Post Construction SMP inventory to track status of operation and maintenance of SMPs as responsibilities change from approval to completion of project and then for ongoing maintenance 2. Inspect all Town-owned PCSMPs annually 3. Continue to request and retain required Operations & Maintenance inspection and maintenance documentation annually from Private PCSMP owners

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 BETHLEHEM									
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SPDES ID

N	Y	R	2	0	A	2	0	8
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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 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 type="radio"/> Yes <input checked="" 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 type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes <input 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,

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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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
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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

				6
--	--	--	--	---
- ☒ Streets Swept (Number of miles X Number of times swept) # Miles

		1	1	0
--	--	---	---	---
- ☐ Catch Basins Inspected and Cleaned Where Necessary #

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

			1	7
--	--	--	---	---
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

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

	1	0	8	8
--	---	---	---	---
- ☐ Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

0					.	
---	--	--	--	--	---	--

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

			1	2
--	--	--	---	---

4. What was the date of the last training?

0	2
---	---

 /

2	7
---	---

 /

2	0	2	0
---	---	---	---

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

	6	2
--	---	---

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

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

 %

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
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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. Communicate training opportunities, MS4 Construction Activity, or other relevant permitting updates to all relevant staff as needed 2. Train 100% of relevant Town staff by use of stormwater training DVDs, 4-hour erosion & sediment control training sessions, or other relevant trainings as available and applicable 3. Conduct MS4 facility self audits on a rotating schedule as needed based on last inspection date

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

1. Goal met - Provided notices of upcoming trainings to Building, Planning, Highway, and Engineering staff routinely throughout the year 2. Goal met - 100 percent of relevant Town staff received at least 1 stormwater training 3. Goal met - 14 facilities received MS4 facility self audits

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).

1. Conduct assessment of all municipal facilities within the MS4 regulated area which have not been assessed since March, 2017 2. Ensure all relevant staff receive at least one annual stormwater training 3. Communicate training opportunities to relevant Town staff (email/other) 4. Continue to update GIS inventory of municipal facilities with relevant data

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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Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

1	2
---	---

1. Targeted Public Education and Outreach Best Management Practices

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

- | | |
|--|---|
| <input checked="" type="radio"/> Construction Sites | <input checked="" type="radio"/> Pesticide and Fertilizer Application |
| <input checked="" type="radio"/> General Stormwater Management Information | <input checked="" type="radio"/> Pet Waste Management |
| <input checked="" type="radio"/> Household Hazardous Waste Disposal | <input checked="" type="radio"/> Recycling |
| <input checked="" type="radio"/> Illicit Discharge Detection and Elimination | <input type="radio"/> Riparian Corridor Protection/Restoration |
| <input checked="" type="radio"/> Infrastructure Maintenance | <input checked="" type="radio"/> Trash Management |
| <input type="radio"/> Smart Growth | <input checked="" type="radio"/> Vehicle Washing |
| <input type="radio"/> Storm Drain Marking | <input type="radio"/> Water Conservation |
| <input type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development | <input type="radio"/> Wetland Protection |
| <input checked="" type="radio"/> Other: | <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:

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

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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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

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

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

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

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		2	6	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
C	W	P		W	e	b	c	a	s	t		R	o	a	d	S	a	l	t
C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z

☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
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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.

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

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

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

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

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	2
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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 type="radio"/> Community Hotlines | 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="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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| <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="5"/> |
| <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

- | | | | | | | |
|-------------------------|------------|--|--|--|---|---|
| ● List-Serve | # In List | | | | 2 | 6 |
| ○ Newspaper Advertising | # Days Run | | | | | |
| ○ TV/Radio Notices | # Days Run | | | | | |
| ○ Other: | | | | | | |
- Web Page URL: Enter URL(s) on the following two pages.

MS4 Annual Report Form

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

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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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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.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	1	/	2	0	2	0
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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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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.

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.

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

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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).

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

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

SPDES ID

N	Y	R	2	0				
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- On behalf of a coalition

How many MS4s contributed to this report?	1	2
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[illegible]

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

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

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

[illegible]

- Sewersheds:

[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?

- | | |
|--|--|
| <input type="radio"/> Broken Lines From Sanitary Sewer | <input type="radio"/> Industrial Connections |
| <input type="radio"/> Cross Connections | <input type="radio"/> Inflow/Infiltration |
| <input type="radio"/> Failing Septic Systems | <input type="radio"/> Pump Station Failure |
| <input type="radio"/> Floor Drains Connected To Storm Sewers | <input type="radio"/> Sanitary Sewer Overflows |
| <input type="radio"/> Illegal Dumping | <input type="radio"/> Straight Pipe Sewer Discharges |
| <input type="radio"/> Other: | <input type="radio"/> 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?

--	--	--

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.

2020/2021 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.

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

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

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.

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.

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

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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.

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

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

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

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 #

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

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- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ 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?

			2	5
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4. What was the date of the last training?

0	3	/	0	5	/	2	0	2	0
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5. How many municipal employees have been trained in this reporting period?

2	4	7
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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

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

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 City of Cohoes

SPDES ID

N Y R 2 0 A 2 4 3

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

S	t	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	2	0
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Name of MS4 City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

[illegible]

MI

4

Last Name

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Title

[illegible]

Address

[illegible]

City

[illegible]

State

N	Y
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Zip

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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 2 0

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

W i l l i a m

MI

T

Last Name

K e e l e r

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

w t k e e l e r @ c i . c o h o e s . n y . u s

Phone

(5 1 8) 2 3 3 - 2 1 1 9

County

A l b a n y

MS4 Municipal Compliance Certification(MCC) Form

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

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

G a r r y

MI

Last Name

N a t h a n

Title

C i t y E n g i n e 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

1 2 0 4 7 -

eMail

g n a t h a n @ c i . c o h o e s . n y . u s

Phone

(5 1 8) 2 3 3 - 2 1 3 0

County

A l b a n y

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9,

2 0 2 0

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

1 2 2 0 2 -

eMail

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

Phone

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

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

☒ Yes ☐ No

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

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

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

● MM3 O R I K i t - S v y 1 2 3 O R I F o r m w / O F X Y d a t a

● 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 S W P P P R e v i e w L y r s o n S w I M M a p p e r

● MM6 C o a l T r a i n g B l i t z - S v y 1 2 3 M u n i A s m t

Additional tasks/responsibilities

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

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

2	0	2	0
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Name of MS4

City of Cohoes																			
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SPDES ID

N	Y	R	2	0	A	2	4	3
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Section 4 - Certification Statement

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

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

First Name

W	i	l	l	i	a	m													
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MI

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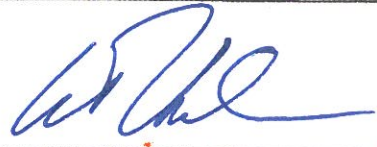
Last Name

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Title (Clearly print title of individual signing report)

M	a	y	o	r															
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Signature



Date

0	5	/	1	8	/	2	0	2	0
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Send completed form and any attachments to the DEC Central Office at:

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

MS4 Annual Report Form

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

2	0	2	0
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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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Water Quality Trends

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

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

How many MS4s are contributed to this report?

		1
--	--	---

1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. ☐ Yes

☐ Yes ☒ No

If Yes, choose one of the following

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

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

URL

[illegible]

URL:

[illegible]

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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 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. Targeted Public Education and Outreach Best Management Practices

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

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

[illegible]

2. Specific audiences targeted during this reporting period:

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

[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

City of Cohoes

SPDES ID

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

☒ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				1
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☐ List-Serves

In List

--	--	--	--	--

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		4	2	0
--	--	---	---	---

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		2	6	8
--	--	---	---	---

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

C	i	t	y		H	a	l	l											

☐ Other:

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

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

URL

URL

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

City of Cohoes

N	Y	R	2	0	A	2	4	3
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3. Web Page cont'l.: Provide specific web addresses - 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

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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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.

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 405

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).

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,

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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

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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.

City of Cohoes

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2. URL(s) con't.:

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

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MS4 Annual Report Form

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

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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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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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Address

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City

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Zip

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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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Zip

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Phone

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☐ Other

☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

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City

A	l	b	a	n	y
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N	Y
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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,

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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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 /

1	4
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 /

2	0	2	0
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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?

0	4
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 /

1	4
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 /

2	0	2	0
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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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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 395 "likes" on Stormwater Education Facebook page.

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).

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,

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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?

- | | |
|---|--|
| <input checked="" type="radio"/> Auto Recyclers | <input type="radio"/> Landscaping (Irrigation) |
| <input checked="" type="radio"/> Building Maintenance | <input type="radio"/> Marinas |
| <input type="radio"/> Churches | <input type="radio"/> Metal Plateing Operations |
| <input type="radio"/> Commercial Carwashes | <input type="radio"/> Outdoor Fluid Storage |
| <input type="radio"/> Commercial Laundry/Dry Cleaners | <input type="radio"/> Parking Lot Maintenance |
| <input type="radio"/> Construction Vehicle Washouts | <input type="radio"/> Printing |
| <input type="radio"/> Cross-Connections | <input type="radio"/> Residential Carwashing |
| <input type="radio"/> Distribution Centers | <input checked="" type="radio"/> Restaurants |
| <input type="radio"/> Food Processing Facilities | <input type="radio"/> Schools and Universities |
| <input type="radio"/> Garbage Truck Washouts | <input type="radio"/> Septic Maintenance |
| <input type="radio"/> Hospitals | <input checked="" type="radio"/> Swimming Pools |
| <input type="radio"/> Improper RV Waste Disposal | <input checked="" type="radio"/> Vehicle Fueling |
| <input type="radio"/> Industrial Process Water | <input checked="" type="radio"/> Vehicle Maint./Repair Shops |
| <input checked="" type="radio"/> Other: | <input type="radio"/> 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, 2020

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
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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?

	9	5	%
--	---	---	---

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, 2020

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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8. URL(s) con't.:

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

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

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?

	3	0	%
--	---	---	---

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

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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. Hard copies (aerial view) of all the catch basins were given to DPW along with the CSO NYSDEC approved catch basin check list.

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,

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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?

		0
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? ☐ Yes ☒ No ☐ NT

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

--	--	--

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>7</td></tr></table>					7	<input type="radio"/> No Authority
				7				
<input checked="" type="radio"/> Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	<input type="radio"/> No Authority
				1				
<input type="radio"/> Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Administrative Fines	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Civil Penalties	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Administrative Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Enforcement Actions or Sanctions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						
<input type="radio"/> Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority

MS4 Annual Report Form

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

2	0	2	0
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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?

		2
--	--	---

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,

2	0	2	0
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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
---	---	---	---	---	---	---	---	---

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	2	0
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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
--	--	---

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>			
		6										
		1										
<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>3</td></tr></table>			3	<table><tr><td></td><td></td><td>3</td></tr></table>			3
	1	0										
		3										
		3										
<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			
---	---	---	---	---	---	---	--	---	---	---	---	--	---	---	---	--	---	---	---	---	---	--	---	---	---	---	---	--	--	--

MS4 Annual Report Form

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

2	0	2	0
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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
--	--	---

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
--	--	---

 %

MS4 Annual Report Form

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

2	0	2	0
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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
--	--	--	---

(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 comprehensive plan and Zoning provisions were 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	2	0
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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
--	--	---

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</u>	
			<u>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	2	0
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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 #

			5	7
--	--	--	---	---
- ☒ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

				3
--	--	--	--	---
- ☐ 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

0					.	
---	--	--	--	--	---	--

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

				3
--	--	--	--	---

4. What was the date of the last training?

0	2	/	2	5	/	2	0	2	0
---	---	---	---	---	---	---	---	---	---

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

		8
--	--	---

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

	2	5
--	---	---

 %

MS4 Annual Report Form

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

2	0	2	0
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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 manpower shortages. The City of Cohoes hopes to achieve goal this year as the City has hired new DPW workers.

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
--	--	--	---

(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	2	0
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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				
---	---	---	---	---	--	--	--	--

Minimum Control Measure 1. Public Education and Outreach

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

☐ On behalf of an individual MS4

☒ On behalf of a coalition

How many MS4s contributed to this report?

1	2
---	---

1. Targeted Public Education and Outreach Best Management Practices

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

☒ Construction Sites

☒ General Stormwater Management Information

☒ Household Hazardous Waste Disposal

☒ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☐ Smart Growth

☐ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☒ Recycling

☐ Riparian Corridor Protection/Restoration

☒ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

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

Other

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☐ Contractors

☐ Residential ☐ Developers

☐ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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Other

MS4 Annual Report Form

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

2	0	2	0
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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				
---	---	---	---	---	--	--	--	--

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

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

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

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

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		2	6	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
C	W	P		W	e	b	c	a	s	t		R	o	a	d	S	a	l	t
C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z

☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

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

URL

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

URL

MS4 Annual Report Form

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

2	0	2	0
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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.

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

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

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

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

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	2
---	---	---

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

- | | | | | | |
|--|--|--|--|---|---|
| <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 type="radio"/> Community Hotlines | 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="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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| | | | | | |
| <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="5"/> |
| <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 | | | | 2 | 6 |
| <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

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

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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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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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.

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.

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

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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).

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

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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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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.

2020/2021 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.

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

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

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.

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.

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

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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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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.

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

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

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

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 #

--	--	--	--	--
- ☐ 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?

			2	5
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4. What was the date of the last training?

0	3	/	0	5	/	2	0	2	0
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5. How many municipal employees have been trained in this reporting period?

2	4	7
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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

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

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

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

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Name of MS4

Village of Green Island

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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MI

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Last Name

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Title

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City

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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 2 0

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

S e a n

MI

E

Last Name

W a r d

Title

E x e c u t i v e A s s i s t a n t t o T h e 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

1 2 1 8 3 -

eMail

s e a n w @ v i l l a g e o f g r e e n i s l a n d . c o m

Phone

(5 1 8) 2 7 3 - 2 2 0 1

County

A l b a n y

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Village of Green Island

SPDES ID

N Y R 2 0 A 3 7 7

Section 3 - Partner Information

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

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 7 5 G r e e n S t r e e t

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

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

Phone

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

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

☒ Yes ☐ No

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

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

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

● MM3 O R I K i t - S v y 1 2 3 O R I F o r m w O F X Y d a t a

● 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 S W P P P R e v i e w L y r s o n S w I M M a p p e r

● MM6 C o a l T r a i n g B l i t z - S v y 1 2 3 M u n i A s m t

Additional tasks/responsibilities

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

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

M

Last Name

M	c	N	u	l	t	y	-	R	y	a	n								
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Title (Clearly print title of individual signing report)

M	a	y	o	r															
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Signature

<i>Ellen M. McNulty-Ryan</i>

Date

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

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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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Water Quality Trends

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

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

How many MS4s are contributed to this report?

- 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One.** ☐ Yes

☐ Yes ☒ No

If Yes, choose one of the following

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

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

URL

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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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Minimum Control Measure 1. Public Education and Outreach

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

--	--	--

1. Targeted Public Education and Outreach Best Management Practices

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

☒ Construction Sites

☒ General Stormwater Management Information

☐ Household Hazardous Waste Disposal

☒ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☐ Smart Growth

☒ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☐ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☒ Recycling

☐ Riparian Corridor Protection/Restoration

☒ Trash Management

☒ Vehicle Washing

☒ Water Conservation

☐ Wetland Protection

☐ None

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

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☒ Contractors

☒ Residential ☒ Developers

☐ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

C	o	a	l	T	r	a	i	n	'	g	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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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

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☐ 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
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☐ 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)

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

Village of Green Island

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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

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.

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
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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).

We will continue to evaluate our program and implement MCM 1 goals from SWMPP in 2020-21.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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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 2. Public Involvement/Participation

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

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

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

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

- | | | | | | | |
|-----------------------------|----------------|---|---|---|---|---|
| ● Cleanup Events | # Events | | | | | 1 |
| ● Comments on SWMP Received | # Comments | | | | | 0 |
| ○ Community Hotlines | Phone # () | | | | | - |
| Phone # () | | | | | | - |
| Phone # () | | | | | | - |
| Phone # () | | | | | | - |
| Phone # () | | | | | | - |
| Phone # () | | | | | | - |
| ● Community Meetings | # Attendees | 0 | 0 | 0 | 1 | 5 |
| ○ Plantings | Sq. Ft. | | | | | |
| ● Storm Drain Markings | # Drains | | | | | 1 |
| ○ Stakeholder Meetings | # Attendees | | | | | |
| ○ Volunteer Monitoring | # Events | | | | | |
| ○ Other: | | | | | | |

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

- | | | | | | |
|---|------------|--|--|--|--|
| <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

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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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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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.

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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.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	1
---	---

 /

2	0	2	0
---	---	---	---

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,

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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. This years annual public meeting will not be held due to COVID-19 declared emergency.

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 comments will be collected and added to Coalition wide comments.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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
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SPDES ID

N	Y	R	2	0	A	3	7	7
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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. Enter the number and approx. percent of outfalls mapped:				1	7	#				1	0	0	%
---	--	--	--	---	---	---	--	--	--	---	---	---	---

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

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

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

○ Other:

[illegible]

○ Sewersheds:

[illegible]

MS4 Annual Report Form

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Name of MS4/Coalition

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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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
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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?

1	0	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

h	t	t	p	s	:	/	/	a	c	v	a	r	c	g	i	s	.	a	l	b	a	n	y	c	o	u	n	t	y	.	
c	o	m	/	w	e	b	m	a	p	/																					
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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- | | | | |
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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

Villager of Green Island

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.

DPW will continue to document any illicit discharges

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

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).

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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Name of MS4/Coalition

Village of Green Island

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?

--	--	--

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

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

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

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

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

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 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,

2	0	2	0
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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 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
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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).

4-7 Village will continue to forward training opportunities to contractors 4-8 Village has a PT engineer with SW experience to help improve the review and inspection process we have now. We have also hired an additional 2 PT CEO's in 2018-19 and 2019-2020 to provide more inspection coverage of projects.

MS4 Annual Report Form

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

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 5. Post-Construction Stormwater Management

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

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

How many MS4s contributed to this report?

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

	# Inventoried	# Inspections	# Times Maintained
<input 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 checked="" type="radio"/> Filter Systems	<div><div></div><div></div><div>3</div></div>	<div><div></div><div></div><div>2</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>

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

☐ 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:

[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

Village of Green Island

SPDES ID

N	Y	R	2	0	A	3	7	7
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

		0
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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,

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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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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 is near complete & 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 and another in 2019-2020.

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>Self-Assessment</u> <u>Operation/Activity/Facility</u> <u>performed within the past 3</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 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
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- ☒ Catch Basins Inspected and Cleaned Where Necessary #

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

				2
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- ☐ 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?

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

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

	2	4
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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	2	0
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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 were unable to complete this BMP due to mechanical issues of required equipment 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 due soon 6-12 2020 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	2	0
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

☐ On behalf of an individual MS4

☒ On behalf of a coalition

How many MS4s contributed to this report?

1	2
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1. Targeted Public Education and Outreach Best Management Practices

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

☒ Construction Sites

☒ General Stormwater Management Information

☒ Household Hazardous Waste Disposal

☒ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☐ Smart Growth

☐ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☒ Recycling

☐ Riparian Corridor Protection/Restoration

☒ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

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

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☐ Contractors

☐ Residential ☐ Developers

☐ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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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

			3	1
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☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

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

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		2	6	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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C	W	P		W	e	b	c	a	s	t		R	o	a	d	S	a	l	t
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C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
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C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z
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☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
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☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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

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

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

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

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

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	2
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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 type="radio"/> Community Hotlines | 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="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="text"/> | Phone # |
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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="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| | | | | | |
| <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="5"/> |
| <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 | | | | 2 | 6 |
| <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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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	1
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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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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 (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

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

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.

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

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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 SWMP?

☒ Yes ☐ No

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

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

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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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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.

2020/2021 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.

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

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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.

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.

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

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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.

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

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

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

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

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- ☐ 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.

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- ☐ 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?

			2	5
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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	4	7
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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

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

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

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

2020

Name of MS4

Town of Guilderland

SPDES ID

N Y R 2 0 A 2 1 1

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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																								

MCC form for period ending March 9,

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Town of Guilderland

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Important Instructions - Please Read

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).

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.

- 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
P e t e r		B a r b e r

[illegible][illegible]

City	State	Zip
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Phone County

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 TOWN OF GUILDERLAND

SPDES ID

NYR20A211

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

KENNETH

MI

A

Last Name

DARPINO

Title

STORMWATER MANAGEMENT OFFICIAL

Address

5209 WESTERN TURNPIKE

City

GUILDERLAND

State

NY

Zip

eMail

darpinok@togny.org

Phone

() -

County

ALBANY

MCC form for period ending March 9,

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Town of Guilderland

SPDES ID

N	Y	R	2	0	A	2	1	1
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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

[illegible]

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

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

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City

State

Zip

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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

☒ Yes ☐ No

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

● MM1 Publications - Programs - Website

● 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 R I K i t - S v y 1 2 3 O R I F o r m w / O F X Y d a t a

● 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			
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● MM5 S W P P P R e v i e w L y r s o n S w I M M a p p e r

● MM6	C	o	a	l	T	r	a	i	n	g	B	l	i	t	z	-	S	v	y	1	2	3	M	u	n	i	A	s	m	t
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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, 2020

Name of MS4 TOWN OF GUILDERLAND

SPDES ID

NYR20A211

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

PETER

MI

G

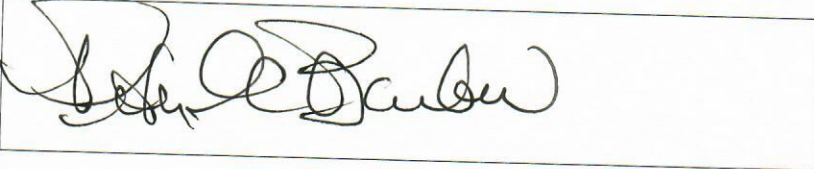
Last Name

BARBER

Title (Clearly print title of individual signing report)

SUPERVISOR - TOWN OF GUILDERLAND

Signature



Date

05/18/2020

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

SPDES ID

NYR20A211							
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[illegible]

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

SPDES ID

NYR20A211

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

- How many MS4s contributed to this report?

1		
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Check all topics that were included in Education and Outreach during this reporting period:

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

[illegible]

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

[illegible]

MS4 Annual Report Form**This report is being submitted for the reporting period ending March 9,** 2020

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

NYR20A211

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

Trained

--	--	--	--	--

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

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

☒ List-Serves

In List

110				
-----	--	--	--	--

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☐ Public Events/Presentations

Attendees

--	--	--	--	--

☐ School Program

Attendees

--	--	--	--	--

☒ TV Spot/Program

Days Run

150				
-----	--	--	--	--

☒ Printed Materials:

Total # Distributed

75				
----	--	--	--	--

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

HANDED	OUT	FLIERS	TO																
WESTERN	AVE	BUSINESS																	
KIOSK	VERY	BUSY																	

☐ Other:

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

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

URL

WWW.TOWNOFGUILDERLAND.ORG																			
STORMWATER																			

URL

WWW.STORMWATERALBANY																			
COUNTY.ORG																			

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

NYR20A211				
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URL

[illegible]

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[illegible]

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[illegible]

URL

[illegible]

MS4 Annual Report Form

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

2020			
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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

NYR20A211

4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Town posts stormwater tips and they appear on town website and town tv. We put down 80 stormwater markers in various town locations. Many were asked for by town residents who had issues with neighbors putting debris by catch basins.

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

1. TOWN WEBSITE WAS MAINTAINED
2. KIOSK ACTIVITY WAS MONITORED
3. DID MARKERS OF STORM DRAINS (80) THROUGH TOWN
4. HANDED OUT FLIERS TO BUSINESSES ON WESTERN AVE

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

1			
---	--	--	--

Text

(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 DID A VERY GOOD JOB GETTING OUT TO KEEP PUBLIC NOTIFIED OF STORMWATER. CONTINUE TO MAKE RESIDENTS AWARE OF STORMWATER PRACTICE OVERALL. CONTINUE TO UPDATE INFORMATION ON TOWN WEBSITE AND TOWN TV.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

NYR20A211

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 checked="" type="checkbox"/> Cleanup Events	# Events	3
<input checked="" type="checkbox"/> Comments on SWMP Received	# Comments	0
<input checked="" type="checkbox"/> Community Hotlines	Phone # () -	
Phone # () -	Phone # () -	
Phone # () -	Phone # () -	
Phone # () -	Phone # () -	
Phone # () -	Phone # () -	
Phone # () -	Phone # () -	
<input checked="" type="checkbox"/> Community Meetings	# Attendees	41
<input type="checkbox"/> Plantings	Sq. Ft.	
<input checked="" type="checkbox"/> Storm Drain Markings	# Drains	80
<input type="checkbox"/> Stakeholder Meetings	# Attendees	
<input type="checkbox"/> Volunteer Monitoring	# Events	
<input checked="" type="checkbox"/> Other: PUBLIC COMMENTS ON PERMIT		

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

☒ Yes ☐ No

<input checked="" type="checkbox"/> List-Serve	# In List	34
<input type="checkbox"/> Newspaper Advertising	# Days Run	
<input type="checkbox"/> TV/Radio Notices	# Days Run	
<input checked="" type="checkbox"/> Other: TOWN OF GUILDERLAND WEBSITE		
<input checked="" type="checkbox"/> 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,

20	20		
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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

NYRA	20	21	1				
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2. URL(s) con't.:

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

URL

HTTP://WWW.TOWNOFGUILDERLAND.																			
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ORG/PAGES/GUILDERLAND.STORMWATER																			
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INDEX																			
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URL

WWW.STORMWATERMATERIALBANY.COUNTY																			
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.ORG																			
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URL

URL

URL

URL

URL

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

NYR20A211

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, 2020

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

NYR20A211

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

TOWN OF GUILDERLAND STORMWATER

Address

5209 WESTERN TURNPIKE

City

GUILDERLAND

NY

Zip

Phone

() -

☐ Library

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

City

Zip

Phone

() -

☐ Other

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

City

Zip

Phone

() -

☒ Web Page URL:

☒ Annual Report

☒ SWMP Plan

☒ Comments

WWW.TOWNOFGUILDERLAND.ORG

STORMWATER

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

☒ eMail

☐ Comments

DARPINOK1@TOGNY.ORG

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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 SPDES ID

NYR	20A	211					
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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?

14		
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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	2	0
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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 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 MAINTAINED A LIST OF ACTIVITIES FROM MARCH 10, 2019-MARCH 09, 2020. TOWN HAS UPDATED ALL ITS INFORMATION ON WEBSITES. TOWN STORMWATER OFFICER HAS ATTENDED GREEN INFRASTRUCTURE MEETINGS.

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

CITIZENS ARE AWARE OF STORMWATER IN TOWN. STORMWATER PROGRAMS HAVE INCREASED IN TOWN. TOWN HAS A SWMP PLAN AND FOLLOWS THROUGH WITH IT EACH YEAR.

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 IS PUTTING TOGETHER A SWMP PLAN FOR NEXT YEAR. ALSO WORKING WITH COALITION THROUGHOUT THE YEAR. STORMWATER COORDINATOR WILL UPDATE TOWN WEBSITE. COORDINATOR WILL POST ANNUAL REPORT.

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

SPDES ID

NYR20A211							
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- On behalf of a coalition

How many MS4s contributed to this report?	1	
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1. Enter the number and approx. percent of outfalls mapped:	310				#	100		%
--	-----	--	--	--	---	-----	--	---

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

45		
----	--	--

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

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

[illegible]

■ **Sewersheds:**

[illegible]

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

NYR20A211

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

- | | |
|--|--|
| <input type="checkbox"/> Broken Lines From Sanitary Sewer | <input type="checkbox"/> Industrial Connections |
| <input type="checkbox"/> Cross Connections | <input type="checkbox"/> Inflow/Infiltration |
| <input checked="" type="checkbox"/> Failing Septic Systems | <input type="checkbox"/> Pump Station Failure |
| <input checked="" type="checkbox"/> Floor Drains Connected To Storm Sewers | <input checked="" type="checkbox"/> Sanitary Sewer Overflows |
| <input checked="" type="checkbox"/> Illegal Dumping | <input checked="" type="checkbox"/> Straight Pipe Sewer Discharges |
| <input type="checkbox"/> Other: | <input checked="" type="checkbox"/> None |

[illegible]

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

0		
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5. How many illicit discharges have been confirmed during this reporting period?

0		
---	--	--

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?

100		%
-----	--	---

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

PASSWORD PROTECTED

HTTP://ACVARCGIS.ALBANYCOUNTY.

COM.WEBMAP/					
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URL

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 TOWN OF GUILDERLAND

SPDES ID

NYR20A211

8. URL(s) con't.:

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

URL

HTTP:ACVARCGIS.ALBANYCOUNTY.COM

WEBMAP/

URL

URL

URL

URL

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

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

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

70 %

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

NYR20A211

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.

ALL MAPPING OF CATCH BASINS HAS BEEN DONE. WORKING ON USING THIS TO HELP SOLVE PROBLEMS.
TOWN WILL CONTINUE TO MONITOR OUR MAPPING INFORMATION.

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

UPDATING AND CHECKING THE NUMBER OF OUTFALLS. THE DEFINITION OF WHAT AN OUTFALL IS HAS CHANGED THE NUMBER WE HAVE. WORKING ON UPDATING THIS. INSPECTED 45 OUTFALLS THIS YEAR.

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).

THIS IS A VERY TIME-CONSUMING JOB. WE ARE WORKING ON ALL OF OUR OUTFALL PRACTICES.

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

NYR20A211

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?**

21		
----	--	--
- 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 checked="" type="checkbox"/> Notices of Violation	#	4						<input type="checkbox"/> No Authority
<input checked="" type="checkbox"/> Stop Work Orders	#	1						<input type="checkbox"/> No Authority
<input type="checkbox"/> Criminal Actions	#							<input type="checkbox"/> No Authority
<input type="checkbox"/> Termination of Contracts	#							<input type="checkbox"/> No Authority
<input type="checkbox"/> Administrative Fines	#							<input type="checkbox"/> No Authority
<input type="checkbox"/> Civil Penalties	#							<input type="checkbox"/> No Authority
<input type="checkbox"/> Administrative Orders	#							<input type="checkbox"/> No Authority
<input type="checkbox"/> Enforcement Actions or Sanctions	#							
<input type="checkbox"/> Other	#							<input type="checkbox"/> No Authority

MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF 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		
---	--	--

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

5		
---	--	--

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

21		
----	--	--

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

100		
-----	--	--

 %

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

100		
-----	--	--

 %

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, 2020

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Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

NYR20A211

6. con't.:

Submit additional pages as needed.

☒ MS4/Coalition Office

Department

TOWN OF GUILDERLAND TOWN HALL

Address

5209 WESTERN TURNPIKE

City

GUILDERLAND

NY

Zip

1

Phone

$$\left(\begin{array}{|c|} \hline \\ \hline \end{array} \right) \begin{array}{|c|} \hline \\ \hline \end{array} - \begin{array}{|c|} \hline \\ \hline \end{array}$$

Library

Address

City

Zip

Phone

$$\left(\begin{array}{|c|} \hline \\ \hline \end{array} \right) \begin{array}{|c|} \hline \\ \hline \end{array} - \begin{array}{|c|} \hline \\ \hline \end{array}$$
☒ Other

Address

175 GREEN STREET-COUNTY HEALTH

City

ALBANY

NY

Zip

1

Phone

$$\left(\begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} \right) \begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} - \begin{array}{|c|c|c|} \hline & & \\ \hline \end{array}$$

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

URL

URL

MS4 Annual Report Form

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

2020			
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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

NYR20A211				
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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.

CONSTRUCTION SITES ARE MONITORED THROUGHOUT THE TOWN. DEC ACTIVE CONSTRUCTION SITES ALSO MONITORED. STORMWATER OFFICER MAKES SURE ALL SITES ARE KEPT IN COMPLIANCE.

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

WE HAVE WRITTEN PROCEDURES IN PLACE TO MONITOR CONSTRUCTION SITES. WE ARE USING A NEW LAPTOP TO KEEP ALL INFORMATION ON. THIS HELPS KEEPING CONSTRUCTION SITES IN LINE.

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).

INSPECTION SITES ARE FOLLOWED UP ACCORDING TO DEC BLUE BOOK. STORMWATER OFFICER IS IN CONSTANT CONTACT WITH CONTRACTORS. TOWN DOES NOT GIVE N.O.T. WITHOUT FINAL INSPECTIONS.

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

NYR20A211

1		
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[illegible]

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

NYR20A211

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

0

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

70 %

MS4 Annual Report Form

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

2020			
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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

NYR2OA211

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 PLANNING BOARD IS CONSTANTLY PUSHING GREEN INFRASTRUCTURE. WE ARE HAVING CONCEPT MEETINGS WHICH HELP IN ORGANIZATION.

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

WE ARE DOING A GOOD JOB OVERALL BUT ALWAYS ROOM FOR IMPROVEMENT. STAFFING AND TIMING IS ALWAYS AN ON GOING ISSUE. TOWN CLEANS OUT RETENTION PONDS YEARLY. THIS IS A MAIN FACTOR IN OUR POST CONSTRUCTION PRACTICES.

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).

AT CONCEPT MEETINGS, STORMWATER IS ALWAYS PUSHING FOR GREEN INFRASTRUCTURE. WE ARE SETTING UP NEW PROCEDURES FOR TRACKING ALL CONSTRUCTION ACTIVITIES.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

NYR20A211

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

1

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

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>				<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
Street Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No		<input checked="" type="radio"/> Yes	<input type="radio"/> No
Bridge Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No		<input checked="" type="radio"/> Yes	<input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No		<input checked="" type="radio"/> Yes	<input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No		<input checked="" type="radio"/> Yes	<input type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No		<input checked="" type="radio"/> Yes	<input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes	<input type="radio"/> No		<input checked="" type="radio"/> Yes	<input type="radio"/> No
Right of Way Maintenance.....	<input 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 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	2	0
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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

NYR20A211

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

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

4				
---	--	--	--	--
- ☒ Streets Swept (Number of miles X Number of times swept) # Miles

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

9	5			
---	---	--	--	--
- ☒ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

2	0			
---	---	--	--	--
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

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

2	0	0	0	
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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?

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

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 /

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

3	0	
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

7	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 GUILDERLAND

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.

THE TOWN HAS SWEEPED ALL ROADS IN TOWN THROUGH THE YEAR AT LEAST ONCE. WE HAVE GONE INTO SEVERAL RETENTION PONDS AND CLEANED THEM OUT. THE TOWN HAS A SCHEDULE TO CLEAN OUT CATCH BASINS.

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

TOWN IS CONSTANTLY SWEEPING ROADS, CLEANING CATCH BASINS, CLEARING OUT RETENTION BASINS AND DOING DITCH WORK. THIS IS ALL HELPFUL FOR A BETTER STORMWATER PRACTICE. WE ARE TRYING TO SCHEDULE ALL THESE EVENTS FOR BETTER PRACTICE.

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).

WE HAVE A SCHEDULE IN PLACE TO KEEP STORMWATER PRACTICES DONE YEARLY. WE ALSO ARE MORE ORGANIZED WITH OUR LAPTOP IN PLACE. WE HAVE DONE ALL 15 TOWNSITE SELF AUDITS. WE HAVE CONTINUED TO TRAIN TOWN EMPLOYEES ON STORMWATER WITH THE COALITION.

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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Minimum Control Measure 1. Public Education and Outreach

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

☐ On behalf of an individual MS4

☒ On behalf of a coalition

How many MS4s contributed to this report?

1	2
---	---

1. Targeted Public Education and Outreach Best Management Practices

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

☒ Construction Sites

☒ General Stormwater Management Information

☒ Household Hazardous Waste Disposal

☒ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☐ Smart Growth

☐ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☒ Recycling

☐ Riparian Corridor Protection/Restoration

☒ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

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

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☐ Contractors

☐ Residential ☐ Developers

☐ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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Other

MS4 Annual Report Form

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

2	0	2	0
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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

			3	1
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☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

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

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		2	6	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
C	W	P		W	e	b	c	a	s	t		R	o	a	d	S	a	l	t
C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z

☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
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☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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

URL

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

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.

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

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

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

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

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	2
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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 type="radio"/> Community Hotlines | 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="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="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="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="5"/> |
| <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 | | | | 2 | 6 |
| <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

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

URL

URL

URL

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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	1
---	---

 /

2	0	2	0
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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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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.

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.

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

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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).

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

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2	0	2	0
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N	Y	R	2	0				
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	1	2
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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.

2020/2021 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.

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

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

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.

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.

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

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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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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.

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

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

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

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 #

--	--	--	--	--
- ☐ 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?

			2	5
--	--	--	---	---

4. What was the date of the last training?

0	3	/	0	5	/	2	0	2	0
---	---	---	---	---	---	---	---	---	---

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

2	4	7
---	---	---

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

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

 %

MS4 Annual Report Form

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

2	0	2	0
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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

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

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

2	0	2	0
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Name of MS4 Town of New Scotland

N	Y	R	2	0	A	4	6	3
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[illegible]

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 Town of New Scotland

SPDES ID

N Y R 2 0 A 4 6 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

D o u g l a s

MI

Last Name

L a G r a n g e

Title

T o w n S u p e r v i s o r

Address

2 0 2 9 N e w S c o t l a n d R o a d

City

S l i n g e r l a n d s

State

N Y

Zip

1 2 1 5 9 -

eMail

d l a g r a n g e @ t o w n o f n e w s c o t l a n d . c o m

Phone

(5 1 8) 4 3 9 - 4 8 8 9

County

A l b a n y

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 Town of New Scotland

SPDES ID

N Y R 2 0 A 4 6 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

J e r e m y

MI

E

Last Name

C r a m e r

Title

B u i l d i n g I n s p e c t o r

Address

2 0 2 9 N e w S c o t l a n d R o a d

City

S l i n g e r l a n d s

State

N Y

Zip

1 2 1 5 9 -

eMail

j c r a m e r @ t o w n o f n e w s c o t l a n d . c o m

Phone

(5 1 8) 4 3 9 - 9 1 5 3

County

A l b a n y

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Town of New Scotland

SPDES ID

N Y R 2 0 A 4 6 3

Section 3 - Partner Information

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

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (cont.)

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

SPDES Partner ID - If applicable

N Y R 2 0

Address

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

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

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

Phone

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

Legally Binding Agreement in accordance

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

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

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

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

● MM3 O R I K I T - S V Y 1 2 3 O R I F o r m w / O F X Y d a t a

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

● MM5 S W P P P R e v i e w L y r s o n S W I M M a p p e r

● MM6 C o a l T r a i n g B l i t z - S v y 1 2 3 M u n i A s m t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 Town of New Scotland

SPDES ID

N Y R 2 0 A 4 6 3

Section 4 - Certification Statement

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

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

First Name

D O U G L A S

MI


Last Name

L A G R A N G E

Title (Clearly print title of individual signing report)

T O W N S U P E R V I S O R

Signature



Date

05 / 21 / 2020

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

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition	Town of New Scotland
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SPDES ID

N	Y	R	2	0	4	6	3
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Water Quality Trends

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

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

How many MS4s are contributed to this report?	1
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1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. ☐ Yes

If Yes, choose one of the following

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

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

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	4	6	3
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Minimum Control Measure 1. Public Education and Outreach

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

		1
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1. Targeted Public Education and Outreach Best Management Practices

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

☒ Construction Sites

☒ General Stormwater Management Information

☒ Household Hazardous Waste Disposal

☒ Illicit Discharge Detection and Elimination

☐ Infrastructure Maintenance

☒ Smart Growth

☐ Storm Drain Marking

☒ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☒ Recycling

☐ Riparian Corridor Protection/Restoration

☒ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

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

Other

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☒ Contractors

☒ Residential ☒ Developers

☒ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

C	D	R	P	C			S	W		s	i	t	e		p	l	a	n		f	o	r		P	B	m	e	m	b	e	r	s
---	---	---	---	---	--	--	---	---	--	---	---	---	---	--	---	---	---	---	--	---	---	---	--	---	---	---	---	---	---	---	---	---

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

T	o	w	n	o	f	N	e	w	S	c	o	t	l	a	n	d
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SPDES ID

N	Y	R	2	0	4	6	3
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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
--	--	--	--	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

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

☐ List-Serves

In List

--	--	--	--	--

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☐ Public Events/Presentations

Attendees

--	--	--	--	--

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

			7	2
--	--	--	---	---

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

K	i	o	s	k		T	o	w	n		H	a	l	l				
B	u	l	l	i	t	e	n		B	o	a	r	d		T	o	w	n

☐ Other:

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

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

URL

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/	1	6	2	/	s	t	o	r	m	w	a	t	e	r	-	m	a	n	a	g	e	m	e	n	t						

URL

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	4	6	3
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3. Web Page cont.: Provide specific web addresses - not home page.

URL

h	t	t	p	:	/	/	w	w	.	f	a	c	e	b	o	o	k	.	c	o	m	/	t	o	w	n	-	o	f	-
N	e	w	-	S	c	o	t	l	a	n	d	-	n	y	-	4	1	7	7	5	9	9	3	5	0	6	5	4	2	6

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	4	6	3
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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) Staff will continue to maintain & update SW webpage. 2) Staff will continue to enforce PCP signage requirements before N.O.T. issuance. 3) Continue to utilize town website and Facebook Page to promote SW related info. 4) Continue to maintain brochure rack with SW literature and record # of brochures distributed. 5) Continue to Include WQ Message on HHWD flyers.

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

1) Town SW page is ongoing. Will be updated when AR is posted. 2) 2 new PCP signs have been installed. N.O.T.'s continue to be held until required signage is installed. 3) Staff posted HHWD flyer with WQ notice, Wave events, ER&SC trainings, and community cares volunteer clean up day on Town bulletin board, website and facebook page. 4) 72 SW literature packets distrib. at kiosk. SWMO and PB member prepared a SW & site plan training for CDRPC training. approximately 25 participants attended.

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) Continue to maintain & update SW web page as needed. 2) Continue to enforce PCP signage requirements before issuing N.O.T. 3) Continue to use Town website and FB page to promote SW related info. 4) Continue to maintain brochure rack with SW literature and record # distributed. 5) HHWD scheduled for May, 2020, is cancelled due to covid 19 restrictions.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition	Town of New Scotland
-----------------------	----------------------

SPDES ID

N	Y	R	2	0	A	4	6	3
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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:

● Cleanup Events

# Events				1
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○ Comments on SWMP Received

# Comments					
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● Community Hotlines

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

Phone # (

--	--	--

)

--	--	--

 -

--	--	--	--

Phone# (

--	--	--

)

--	--	--

 -

--	--	--	--

Phone # (

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○ Community Meetings

# Attendees					
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○ Plantings

Sq. Ft.					
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○ Storm Drain Markings

# Drains					
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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 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

☐ Yes ☒ No

● List-Serve

#. In List				2	2
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○ Newspaper Advertising

# Days Run					
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○ TV/Radio Notices

# Days Run					
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☐ 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, 2020

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

Name of MS4/Coalition	Town of New Scotland
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SPDES ID

N	Y	R	2	0	A	4	6	3
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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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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

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2. URL(s) con't.:

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

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MS4 Annual Report Form

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

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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

T	o	w	n	o	f	N	e	w	S	c	o	t	l	a	n	d	-	B	l	d	g	D	e	p	t
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City

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☐ Library

☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

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☐ Other

☐ Annual Report ☐ SWMP Plan ☐ Comments

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☒ 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 New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	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	5	/	0	1	/	2	0	2	0
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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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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland

SPDES ID

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

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

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

1)Town SWMO/public contact will update info as needed in 2020 AR.2)Post joint annual report on coalition website, provide Town Board with electronic copy of TONS SW draft annual report, solicit public comment, and post final joint annual report on Coalition and Town websites. 3) Continue to promote Coalition Wave monitoring by posting volunteer recruitment info/flyer on Town bulliten board, website, and facebook page.

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

1) Staff maintained public contact info for 2020 AR. 2)Draft joint annual report(including New Scotland) was posted for public comment on Coalition website. TONS SW draft annual report was sent electronically to Town Board members electronically. Final joint annual report was posted to Coalition and Town websites. 3) Wave recruitment info/flyer on town bulliten board, website, and facebook page.

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) Town SWMO/public contact will update info as needed in 2021 AR. 2)Post joint annual report on Coalition website, provide Town Board with electronic copy of TONS SW draft annual report, solicit public comment, and post final joint annual report on Coalition and Town websites.3) Continue to promote Coalition Wave Monitoring by posting volunteer recruitment info/flyer on Town bulliten board, website, and facebook page. Note: Goal may change due to Covid 19 restrictions.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	3
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Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report?	1
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1. Enter the number and approx. percent of outfalls mapped:

				9
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 #

1	0	0
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 %

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

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

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

[illegible]

○ Sewersheds:

[illegible]

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	3
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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?

		2
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5. How many illicit discharges have been confirmed during this reporting period?

		1
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6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

		1
--	--	---

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, 2020

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	3
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8. URL(s) con't.:

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

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

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?

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

Town of New Scotland

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) Continue to monitor for failing septic systems and cross connections during routine inspections. Utilize ACDOH as needed. 2) Evaluate track down and eliminations procedures previously completed. 3) Evaluate final counts of updated outfalls and complete ORI inspections according to 20% permit requirements of current MS4 permit using new tablet and ARCGIS online survey123 form developed by coalition.

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

1) Two failed septic complaints reported. One confirmed and fixed, One was determined to be in proper working order and was being over utilized. ACDOH sent a letter to homeowner reminding them of the occupant limits and house is up for sale. One abandoned system fixed and approved by ACDOH before new owners moved in. 2) Track down and eliminations procedures not evaluated. 3) Outfalls located on ARCGIS online evaluated. No changes. No ORI inspections completed.

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) Continue to monitor for failing septic systems and cross connections utilizing ACDOH as needed. 2) Evaluate track down and elimination process if MS4 permit is reissued within the upcoming year. 3) Evaluate outfall count and complete at least 40% or ORI inspection reports utilizing SW tablet and ARCGIS online survey123 form developed by coalition.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	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
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?

☒ Yes ☐ No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?

☒ Yes ☐ No ☐ NT

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

☐ 09/2004 ☒ 03/2006 ☐ NT

2. Does your MS4/Coalition have a SWPPP review procedure in place?

☒ Yes ☐ No

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

		5
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?

☒ Yes ☐ No ☐ NT

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

		0
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?

☒ Yes ☐ No

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

<input type="radio"/> Notices of Violation	#	<table border="1"><tr><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></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Administrative Fines	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
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<input type="radio"/> Administrative Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority
<input type="radio"/> Enforcement Actions or Sanctions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						
<input checked="" type="radio"/> Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>4</td></tr></table>					4	<input type="radio"/> No Authority
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	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
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

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

		9
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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, 2020

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	3
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6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

[illegible]

Address

[illegible]

City

[illegible]

Zip

1	2	1	5	9	-				
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Phone

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○ Library

Address

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City

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Zip

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Phone

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☐ Other

Address

[illegible]

City

[illegible]

Zip

[illegible]

Phone

$$\left(\begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} \right) \begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} - \begin{array}{|c|c|c|c|} \hline & & & \\ \hline \end{array}$$

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

URL

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URL

[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

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	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.

1)Continue to promote 4hr E&SC trainings. 2)Continue town oversight of construction related activity permit requirements including SWPPP review and construction site inspections. 3) Continue to monitor PCP signage, particularly as active construction sites move towards terminating construction activity permit.

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

1)Staff continued oversight of construction activity permit requirements. 2) SWPPP review procedures continue. Will evaluate if new permit is released.3)From last year's AR, Commercial solar field and firehouse were determined to be under an acre. Horse riding facility not started. 4) Three 4hr E&SC trainings promoted on either bulliten board, website, and/or facebook page. 3)

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) Continue to promote 4hr E&SC trainings utilizing bulliten board, website, and facebook page. 2) Continue town oversight of construction site inspections. 3)Continue to monitor PCP signage, particularly as active sites move towards termination of construction activity permit. 4) Document public complaints regarding construction sites. (Name,date,location, and follow up)

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition	Town of New Scotland
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SPDES ID

N	Y	R	2	0	A	4	6	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	<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 checked="" type="radio"/> Filter Systems	<div><div></div><div></div><div>1</div></div>	<div><div></div><div></div><div>1</div></div>	<div><div></div><div></div><div>1</div></div>
<input checked="" type="radio"/> Infiltration Basins	<div><div></div><div></div><div>9</div></div>	<div><div></div><div></div><div>9</div></div>	<div><div></div><div></div><div>9</div></div>
<input checked="" type="radio"/> Open Channels	<div><div></div><div></div><div>6</div></div>	<div><div></div><div></div><div>6</div></div>	<div><div></div><div></div><div>6</div></div>
<input checked="" type="radio"/> Ponds	<div><div></div><div></div><div>5</div></div>	<div><div></div><div></div><div>5</div></div>	<div><div></div><div></div><div>5</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>

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
☐ Other:

[illegible]

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	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?

		2
--	--	---

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?

	9	5
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 %

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	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.

1) Continue to update O&M process to make sure signage and deed restrictions are in place before N.O.T.'s are issued to make sure practices are kept, maintained, and inspected annually. 2) Finish working with engineering firm for grant project to evaluate possible stormwater district user fees with Coalition. 3) Update inventory of PCP on GIS system and post to coalition mapper.

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

1) O&M process to make sure signage and deed restrictions are in place before N.O.T.'s are issued. 2) Stormwater district user fee analysis was for the most part completed during this annual report cycle. Small details and clarification questions are currently being finished up. 3) Two new post construction practices were constructed during this cycle. Currently waiting for placement of signage and deed restriction filed before N.O.T will be issued.

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).

1) Update inventory of newly constructed PCP on GIS system and post to coalition mapper. 2) Review inventory of privately owned PCPMPS, update contact information, review status of O&M, secure and file inspection reports. follow up as needed. 3) Send finalized stormwater district user fee analysis to town board to educate board members on possible funding stream for stormwater related work within town.

MS4 Annual Report FormThis report is being submitted for the reporting period ending March 9,

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	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 coalitionHow many MS4s contributed to this report?

		1
--	--	---

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

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>	<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>
Street Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" 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 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	2	0
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	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

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

		1	4	0
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary #

			3	5
--	--	--	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

			1	4
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs.

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

				0
--	--	--	--	---
- Pesticide/Herbicide Applied # Acres

			0	.	0
--	--	--	---	---	---

(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?

				3
--	--	--	--	---

4. What was the date of the last training?

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

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

	2	5
--	---	---

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

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

 %

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	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.

1) Continue all annual report related documentation. 2) Finalize water source for highway garage oil/water separator and commence construction of required work. 3) Evaluate 3rd party certification forms for vendors. 4) Time permitting, Conduct Clean Water Act/MS4 permit requirement training for town and planning board members. 5) Conduct stormwater management training to relevant municipal employees and departments.

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

1) Data collected and filed for road sweeping, parking lot sweeping, HHWD data summary. 2) Town continues salt sweeping at highway garage after storms. 3) Currently working with NYSDEC for permit modification of oil/water SPDES permit. Schedule of compliance, dilution report with Town's weekly flow measurements will start when NYSDEC approves this approach. 4) Town held coalition supported training blitz for municipal staff, town board, planning board, and town council.

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).

1) Continue all annual report related documentation.(Sweeping, catch basin insp&cleaning,etc.) HHWD is canceled for this year due to Covid19 restrictions.2) Town will conduct weekly flow monitoring and submit quarterly reports if approach is accepted by NYDEC for oil/water spedes permit.3) Evaluate 3rd party vendor certification if MS4 permit is reissued.4) Explore use of tablet to complete town owned and private PCPMPS inspections.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

How many MS4s contributed to this report?

1	2
---	---

1. Targeted Public Education and Outreach Best Management Practices

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

- | | |
|--|---|
| <input checked="" type="radio"/> Construction Sites | <input checked="" type="radio"/> Pesticide and Fertilizer Application |
| <input checked="" type="radio"/> General Stormwater Management Information | <input checked="" type="radio"/> Pet Waste Management |
| <input checked="" type="radio"/> Household Hazardous Waste Disposal | <input checked="" type="radio"/> Recycling |
| <input checked="" type="radio"/> Illicit Discharge Detection and Elimination | <input type="radio"/> Riparian Corridor Protection/Restoration |
| <input checked="" type="radio"/> Infrastructure Maintenance | <input checked="" type="radio"/> Trash Management |
| <input type="radio"/> Smart Growth | <input checked="" type="radio"/> Vehicle Washing |
| <input type="radio"/> Storm Drain Marking | <input type="radio"/> Water Conservation |
| <input type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development | <input type="radio"/> Wetland Protection |
| <input checked="" type="radio"/> Other: | <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 type="radio"/> Contractors |
| <input type="radio"/> Residential | <input type="radio"/> Developers |
| <input type="radio"/> Businesses | <input checked="" type="radio"/> General Public |
| <input type="radio"/> Restaurants | <input type="radio"/> Industries |
| <input checked="" type="radio"/> Other: | <input type="radio"/> Agricultural |

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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Other

MS4 Annual Report Form

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

2	0	2	0
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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

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

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

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

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		2	6	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
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

C	W	P		W	e	b	c	a	s	t		R	o	a	d	S	a	l	t
---	---	---	--	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---

C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--

C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

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

URL

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

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

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

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

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

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	2
---	---	---

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

- | | | | | | |
|--|--|--|--|---|---|
| <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 type="radio"/> Community Hotlines | 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="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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| | | | | | |
| <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="5"/> |
| <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 | | | | 2 | 6 |
| <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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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	1
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2	0	2	0
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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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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.

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.

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

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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).

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

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

SPDES ID

N	Y	R	2	0				
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- On behalf of a coalition

How many MS4s contributed to this report?	1	2
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1. Enter the number and approx. percent of outfalls mapped:						#				%
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2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?

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

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

[illegible]

- Sewersheds:

[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?

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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.

2020/2021 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.

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

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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.

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.

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

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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.

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

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

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

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 #

--	--	--	--	--
- ☐ 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?

			2	5
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4. What was the date of the last training?

0	3	/	0	5	/	2	0	2	0
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5. How many municipal employees have been trained in this reporting period?

2	4	7
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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

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

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

MCC form for period ending March 9,

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Village of Voorheesville

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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:

[illegible]

MCC form for period ending March 9,

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Name of MS4	Village of Voorheesville
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N	Y	R	2	0	A	2	1	0
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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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Last Name												
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City									
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State	
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Zip

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County												
A	l	b	a	n	y							

MCC form for period ending March 9,

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Name of MS4

Village of Voorheesville

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Important Instructions - Please Read

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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).
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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	i	c	h	a	r	d				

MI

Last Name												
S	t	r	a	u	t							

[illegible][illegible]

City
V o o r h e e s v i l l e

State	
N	Y

Zip

1	2	1	8	6
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Phone () -

County												
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MCC form for period ending March 9,

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Name of MS4	Village of Voorheesville
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N	Y	R	2	0	A	2	1	0
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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										
F	r	a	n	k						

MI

Last Name												
F	a	z	i	o								

Title																			
S	t	o	r	m	w	a	t	e	r		O	f	f	i	c	e	r		

Address																													
2	9		V	O	O	R	H	E	E	S	V	I	L	L	E	A	V	E	N	U	E								

City
V o o r h e e s v i l l e

State	
N	Y

Zip

1	2	1	8	6
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eMail

s	t	o	r	m	w	a	t	e	r	@	v	i	l	l	a	g	e	o	f	v	o	o	r	h	e	e	s	v	i	l	l	e
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Phone (5 1 8) 7 6 5 - 2 6 9 2

County												
A	l	b	a	n	y							

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Village of Voorheesville

SPDES ID

N Y R 2 0 A 2 1 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 A l b a n y

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

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

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

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

Phone

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

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

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

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

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

● MM3 O R I K i t - S v y 1 2 3 O R I F o r m w / O F x y d a t a

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

● MM5 S W P P P R e v i e w L y r s o n S w I M M a p p e r

● MM6 C o a l T r a i n g B l i t z - S v y 1 2 3 M u n i A s m t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Village of Voorheesville

SPDES ID

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

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

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

First Name

[illegible]

MI

D

Last Name


[illegible]

Title (Clearly print title of individual signing report)

[illegible]

Signature

Signature

A handwritten signature in black ink, featuring a stylized 'L' or 'J' shape on the left, a circular emblem in the center, and a long, sweeping horizontal stroke extending to the right. The signature is written on a white background with a faint horizontal line above it.

Date _____

0511812020

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**

2	0	2	0
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Name of MS4/Coalition

SPDES ID

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MCM 1 Page 1 of 4

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 Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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

--	--	--	--	--

☒ Direct Mailings

Mailings

		9	4	8
--	--	---	---	---

☒ Kiosks or Other Displays

Locations

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

☒ List-Serves

In List

	1	7	3	4
--	---	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		1	8	0
--	--	---	---	---

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

--	--	--	--	--

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

V	i	l	l	a	g	e		H	a	l	l								
2	9		V	o	o	r	h	e	e	s	v	i	l	l	e		A	v	e
V	o	o	r	h	e	e	s	v	i	l	l	e	,		N	Y			
1	2	1	8	6															

☒ Other:

F	a	c	e	b	o	o	k		1	7	3	4		c	l	i	c	k	s
---	---	---	---	---	---	---	---	--	---	---	---	---	--	---	---	---	---	---	---

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

URL

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Name of MS4/Coalition

Village of Voorheesville

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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

Village of Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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.

- 1) The Village will continue with notifications of cleanup benefits
- 2) Continue to mail out and put on the web- site our newsletters.

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

- 1) The Village provides notification of the benefits of cleanup.
- 2) There were some mailings and a newsletter was posted on the website.

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).

- 1) The Village will continue with notifications of cleanup benefits
- 2) Continue to mail out and put on the web- site our newsletters.

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 Voorheesville																			
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SPDES ID

N	Y	R	2	0	A	2	1	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

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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.

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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

Village of Voorheesville																			
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SPDES ID

N	Y	R	2	0	A	2	1	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	1
---	---

 /

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

	1	4
--	---	---

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

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

☐ Yes ☒ No

If Yes, what was the date of the meeting?

--	--

 /

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 /

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If No, is one planned?

☐ Yes ☒ No

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

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

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

MS4 Annual Report Form

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

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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 Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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.

- 1) The Village will continue with its Village Green Clean Day and Hazardous Household Waste Day.
- 2) Continue to participate in the Clean the Stream Day.
- 3) Continue the adopt a highway day.

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

- 1) The Village held its Village Green Clean Day and Hazardous Household Waste Day.
- 2) The Village participated in Clean the Stream Day.
- 3) Participated in Adopt a highway day.

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

			3
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

- 1) The Village will continue with its Hazardous Household Waste Day.
- 2) Participate in the Clean the Stream Day if it can be held.
- 3) Continue the adopt a highway day if it can be held.
- 4) Notify community in newsletter of posting of Annual Report.

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

SPDES ID

N	Y	R	2	0	A	2	1	0
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● On behalf of an individual MS4

- On behalf of a coalition

How many MS4s contributed to this report?		
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1. Enter the number and approx. percent of outfalls mapped:	2	8	#	1	0	0	%
--	---	---	---	---	---	---	---

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

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

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

R	e	s	i	d	e	n	t	i	a	l		S	t	r	e	e	t	s	/	P	r	o	p	e	r	t	i	e	s
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- Sewersheds:

[illegible]

2	0	2	0
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Name of MS4/Coalition	Village of Voorheesville
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N	Y	R	2	0	A	2	1	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 Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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.

- 1) Establish a program and schedule for ORI screening for dry weather discharges.
- 2) Monitor for illicit discharges and take action when necessary.

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

- 1) ORI screening for dry weather discharges was performed for five (5) outfalls
- 2) No illicit discharges were reported.
- 3) Outfall inventory was updated. Five (5) outfall were removed as determined not to meet requirements for an outfall.
- 4) Outfall inspection spreadsheet was developed to keep tract of outfalls examined.

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

			5
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

- 1) Perform ORI for remainder of outfalls
- 2) Monitor for illicit discharges and take action when necessary.
- 3) Update GIS map.

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 Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	0
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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?**

		0
--	--	---
- 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 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 Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	0
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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?

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

		0
--	--	---

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

		0
--	--	---

 %

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

		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,

2	0	2	0
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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 Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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) Stormwater Management Officer to review stormwater related construction activity projects for conformance with General Permit requirements
- 2) Visit and review conditions for construction sites as needed.

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

- 1) There were no projects that required a SWPPP
- 2) Visit and review conditions for construction sites was not required.

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).

- 1) Stormwater Management Officer to review stormwater related construction activity projects for conformance with General Permit requirements
- 2) Visit and review conditions for construction sites as needed.

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Name of MS4/Coalition

SPDES ID

N	Y	R	2	0	A	2	1	0
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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></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
<input checked="" type="radio"/> Infiltration Basins	<div><div></div><div></div><div>1</div></div>	<div><div></div><div></div><div>1</div></div>	<div><div></div><div></div><div>0</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 checked="" type="radio"/> Ponds	<div><div></div><div></div><div>1</div></div>	<div><div></div><div></div><div>1</div></div>	<div><div></div><div></div><div>0</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 Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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?

		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?

	7	1
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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 Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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) Update post construction practice inventory map.
- 2) Perform inspection of post construction practices.
- 3) Perform staff training for post-construction practices.
- 4) Evaluate and provide necessary maintenance for Post-construction practices.

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

- 1) Post construction practice inventory map is being updated in GIS.
- 2) Post construction practices were inspected
- 3) Staff training for post-construction practices started and to be completed this year.
- 4) Recommendations and requirements for maintenance of post construction practices were provided as part of the inspection

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).

- 1) Completion of post construction practices on GIS.
- 2) Inspect post construction practices after maintenance performed.
- 3) Complete staff training on maintenance of post construction 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

Village of Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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?

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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 type="radio"/> Yes	<input checked="" 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 type="radio"/> Yes	<input checked="" 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 type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes	<input 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 type="radio"/> Yes	<input checked="" 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 checked="" 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 Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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

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

			1	1
--	--	--	---	---
- ☐ Catch Basins Inspected and Cleaned Where Necessary #

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

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

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

				0
--	--	--	--	---
- ☐ Pesticide/Herbicide Applied # Acres

			0	.	
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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?

				2
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4. What was the date of the last training?

0	2	/	1	3	/	2	0	2	0
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5. How many municipal employees have been trained in this reporting period?

	2	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

Village of Voorheesville

SPDES ID

N	Y	R	2	0	A	2	1	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) Perform self assessment at municipal facilities.
- 2) Review BMP's with Public Works Department.

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

- 1) Self assessment at 10 municipal facilities completed
- 2) Review BMP's with Public Works Department.

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) Perform self assessment at municipal facilities.
- 2) Review BMP's with Public Works Department.
- 3) Establish procedure and program for CB inspection, maintenance and record keeping.

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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Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

1	2
---	---

1. Targeted Public Education and Outreach Best Management Practices

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

- | | |
|--|---|
| <input checked="" type="radio"/> Construction Sites | <input checked="" type="radio"/> Pesticide and Fertilizer Application |
| <input checked="" type="radio"/> General Stormwater Management Information | <input checked="" type="radio"/> Pet Waste Management |
| <input checked="" type="radio"/> Household Hazardous Waste Disposal | <input checked="" type="radio"/> Recycling |
| <input checked="" type="radio"/> Illicit Discharge Detection and Elimination | <input type="radio"/> Riparian Corridor Protection/Restoration |
| <input checked="" type="radio"/> Infrastructure Maintenance | <input checked="" type="radio"/> Trash Management |
| <input type="radio"/> Smart Growth | <input checked="" type="radio"/> Vehicle Washing |
| <input type="radio"/> Storm Drain Marking | <input type="radio"/> Water Conservation |
| <input type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development | <input type="radio"/> Wetland Protection |
| <input checked="" type="radio"/> Other: | <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 type="radio"/> Contractors |
| <input type="radio"/> Residential | <input type="radio"/> Developers |
| <input type="radio"/> Businesses | <input checked="" type="radio"/> General Public |
| <input type="radio"/> Restaurants | <input type="radio"/> Industries |
| <input checked="" type="radio"/> Other: | <input type="radio"/> Agricultural |

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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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

			3	1
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☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
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☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		1	6	0
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☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

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☒ Printed Materials:

Total # Distributed

		2	6	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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C	W	P		W	e	b	c	a	s	t		R	o	a	d	S	a	l	t
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C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
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C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z
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☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
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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.

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

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

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

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

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	2
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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 type="radio"/> Community Hotlines | 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="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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| 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="text"/> | Phone # |
| <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="5"/> |
| <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 | | | | 2 | 6 |
| <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

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	1
---	---

 /

2	0	2	0
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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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 /

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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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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.

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.

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

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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).

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

2	0	2	0
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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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How many MS4s contributed to this report?	1	2
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	1	2
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					#
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				%
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☐ None

[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?

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

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

--	--	--

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

☐ Yes ☐ No

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

			%
--	--	--	---

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

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

URL

[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.

2020/2021 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.

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

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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.

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.

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

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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.

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

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

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

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 #

--	--	--	--	--
- ☐ 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?

			2	5
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4. What was the date of the last training?

0	3
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/

0	5
---	---

/

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

2	4	7
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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

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

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2	0	2	0
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Name of MS4

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2 0 2 0

Name of MS4 City of Watervliet

SPDES ID

N Y R 2 0 A 0 8 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

C h a r l e s

MI

V

Last Name

P a t r i c e l l i

Title

M a y o r

Address

2 1 5 t h S t

City

W a t e r v l i e t

State

N Y

Zip

1 2 1 8 9 -

eMail

C P a t r i c e l l i @ w a t e r v l i e t . c o m

Phone

(5 1 8) 2 7 0 - 3 8 0 0

County

A l b a n y

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2 0 2 0

Name of MS4 City of Watervliet

SPDES ID

N Y R 2 0 A 0 8 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

D a v i d

MI

Last Name

D r e s s e l

Title

W a t e r S y s t e m s S u p e r v i s o r

Address

3 3 4 W a t e r v l i e t - S h a k e r R d

City

W a t e r v l i e t

State

N Y

Zip

1 2 1 8 9 -

eMail

w a t e r d e p t @ w a t e r v l i e t . c o m

Phone

(5 1 8) 7 8 5 - 7 0 8 2

County

A l b a n y

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 City of Watervliet

SPDES ID

N Y R 2 0 A 0 8 7

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

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

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

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

Phone

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

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

☒ Yes ☐ No

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

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

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

● MM3 O R I K i t - S v y 1 2 3 O R I F o r m w / O F X Y D a t a

● 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 S W P P P R e v i e w L y r s o n S w i m M a p p e r

● MM6 C o a l T r a i n g B l i t z - S v y 1 2 3 M u n i A s m t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 City of Watervliet

SPDES ID

N Y R 2 0 A 0 8 7

Section 4 - Certification Statement

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

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

First Name

C h a r l e s

MI

V

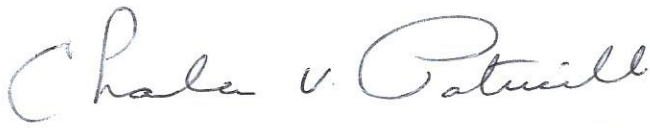
Last Name

P a t r i c e l l i

Title (Clearly print title of individual signing report)

M a y o r

Signature



Date

0 5 / 1 8 / 2 0 2 0

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 Watervliet

N	Y	R	2	0	A	0	8	7
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Water Quality Trends

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

- On behalf of a coalition

		1
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One.

☐ 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.

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

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Name of MS4/Coalition

SPDES ID

N	Y	R	2	0	A	0	8	7
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MCM 1 Page 1 of 4

MS4 Annual Report Form

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

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

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☐ Construction Site Operators Trained

Trained

--	--	--	--	--

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

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

☐ List-Serves

In List

--	--	--	--	--

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

			5	7
--	--	--	---	---

☐ School Program

Attendees

--	--	--	--	--

☒ TV Spot/Program

Days Run

		3	6	5
--	--	---	---	---

☒ Printed Materials:

Total # Distributed

			7	3
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Locations (e.g. libraries, town offices, kiosks)

C	i	t	y		H	a	l	l		B	r	o	c	h	u	r	e		
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K	e	e	p		V	l	i	e	t		N	e	a	t		D	a	y	
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☒ Other:

E	P	A		T	V		S	p	o	r	t		C	h	.	1	3	0	3
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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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Name of MS4/Coalition

City of Watervliet

N	Y	R	2	0	A	0	8	7
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URL

[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

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

The City continues to educate the public through a variety of methods. These methods consist of a brochure rack dedicated to stormwater at city hall, handing out stormwater packets at the city wide cleanup event and run daily messages on the local ch. 1303 which is just for city residents.

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

The City continued to broadcast stormwater messages everyday through its local Ch. 1303. City had 57 volunteers at "Keep Vliet Neat Day", where packets of stormwater info was handed out. There were 16 printed materials taken from the stormwater brochure rack at city hall.

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

			4
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

The City plans on continuing to distribute stormwater packets at the "Keep Vliet Neat Day" and it's electronic recycling days. City will continue to maintain its brochure rack at city hall. The coalition will provide the city with public education analysis tool. City will distribute via mailing and by hand a flyer that talks about what not to flush down the toilet and how it can affect the water systems and water quality in the environment.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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Minimum Control Measure 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 | | | | | 1 | | | | | | | | | | | |
| ○ Comments on SWMP Received | # Comments | | | | | | | | | | | | | | | | |
| ○ Community Hotlines | Phone # | (| | |) | | - | | | | | | | | | | |
| Phone # | (| | |) | | - | Phone # | (| | |) | | - | | | | |
| Phone # | (| | |) | | - | Phone # | (| | |) | | - | | | | |
| Phone # | (| | |) | | - | Phone # | (| | |) | | - | | | | |
| Phone # | (| | |) | | - | Phone # | (| | |) | | - | | | | |
| Phone # | (| | |) | | - | Phone # | (| | |) | | - | | | | |
| ○ Community Meetings | # Attendees | | | | | | | | | | | | | | | | |
| ○ Plantings | Sq. Ft. | | | | | | | | | | | | | | | | |
| ○ Storm Drain Markings | # Drains | | | | | | | | | | | | | | | | |
| ○ Stakeholder Meetings | # Attendees | | | | | | | | | | | | | | | | |
| ○ Volunteer Monitoring | # Events | | | | | | | | | | | | | | | | |
| ○ Other: | | | | | | | | | | | | | | | | | |

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

- | | | | | | | |
|---|---|--|--|--|--|--|
| <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 i t y C o u n c i l M e e t i n g s | | | | | |

○ 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

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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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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Name of MS4/Coalition

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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

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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4.a. If this report was made available on the internet, what date was it posted?

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

		/			/				
--	--	---	--	--	---	--	--	--	--

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

--	--	--

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

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

☐ Yes ☐ No

If Yes, what was the date of the meeting?

		/			/				
--	--	---	--	--	---	--	--	--	--

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

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The City had 57 volunteers for its annual "Keep Vliet Neat Day". City also planted 58 trees throughout the community.

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

The 57 volunteers helped with picking up trash and yard waste debris throughout the city's parks. The 25 volunteers helped in planting of the 58 trees.

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).

City will continue its annual "Keep Vliet Neat Day" going. Solicit comments using coalition website or through city hall. City will post the Draft and Final versions of the Annual Report on the website. City is planning on plant more trees throughout the community using volunteers to help with the plantings. City will support Coalition with WAVE recruitment.

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

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Name of MS4/Coalition

City of Watervliet

N	Y	R	2	0	A	0	8	7
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Please provide specific address of page where map(s) can be accessed - not home page

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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

City of Watervliet

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 city did 49 ORI's with the help of the Coalition. New format using the tablet was used in doing these ORI's. City Trained 19 Employees through the Coalition "Training Blitz"

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

Over 50% of the ORI's were completed in this reporting period. Using the tablet with Survey123 forms really made ORIs much easier to complete. Had much more effective training sessions with employees by collaborating with the Coalition who hosted 2 programs one geared toward Field workers and another geared toward Admin workers.

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

			3
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

The city plans on completing the rest of the ORIs this year using the same methods as last year. Continue to keep employees up to date with there trainings.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

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

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

How many MS4s contributed to this report?

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

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

☐ 09/2004 ☒ 03/2006 ☐ NT

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

		0
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- 4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?** ☒ Yes ☐ No ☐ NT
- If Yes, how many public comments were received during this reporting period?

		0
--	--	---
- 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

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

		1
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

		0
--	--	---

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

		0
--	--	---

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

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Currently there is no new construction going on in the city.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The City had no new construction therefore nothing can be measured from this reporting year.

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).

If the City has any new projects requiring SWPPPs then it will continue to use its resources to maintain the SWPPP. The city will look to keep the SWPPP review procedures up to date.

2	0	2	0
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

City of Watervliet

N	Y	R	2	0	A	0	8	7
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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
---	---

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	<input type="text"/>	<input type="text"/>	<input type="text"/>
○ Filter Systems	<input type="text"/>	<input type="text"/>	<input type="text"/>
● Infiltration Basins	<input type="text"/>	<input type="text" value="3"/> <input type="text" value="9"/>	<input type="text" value="3"/> <input type="text" value="9"/>
○ Open Channels	<input type="text"/>	<input type="text"/>	<input type="text"/>
○ Ponds	<input type="text"/>	<input type="text"/>	<input type="text"/>
○ Wetlands	<input type="text"/>	<input type="text"/>	<input type="text"/>
● Other	<input type="text"/>	<input type="text" value="3"/>	<input type="text" value="3"/>

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

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☒ Yes ☐ No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

☐ Yes ☒ No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

☐ Yes ☒ No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		0
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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?

	7	5
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 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The city inspected 42 of the post construction practices.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

City cleaned 42 of its own post construction practices.

C. How many times was this observation measured or evaluated in this reporting period?

			1
--	--	--	---

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☒ Yes ☐ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The City will continue to update its inventory list when new projects arise. It will also continue to clean any practices it owns and operates. City will look to inspect private practices along with ones that it owns.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet									
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SPDES ID

N	Y	R	2	0	A	0	8	7
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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 type="radio"/> Yes <input checked="" 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 type="radio"/> Yes <input checked="" type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" 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 type="radio"/> Yes <input checked="" type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" 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,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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2. Provide the following information about municipal operations good housekeeping programs:

- ☒ Parking Lots Swept (Number of acres X Number of times swept) # Acres

			1	7
--	--	--	---	---
- ☒ Streets Swept (Number of miles X Number of times swept) # Miles

		9	1	8
--	--	---	---	---
- ☒ Catch Basins Inspected and Cleaned Where Necessary #

			2	9
--	--	--	---	---
- ☒ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

				3
--	--	--	--	---
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

				0
--	--	--	--	---
- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

				0
--	--	--	--	---
- ☐ Pesticide/Herbicide Applied # Acres

			0	.	
--	--	--	---	---	--

 (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?

				7
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4. What was the date of the last training?

0	2	/	2	4	/	2	0	2	0
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	1	9
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

	9	5
--	---	---

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The City had 1 electronic recycling days and continues to do the organic waste program. The City continues to street and parking lot sweep throughout the city. City with the help from the coalition had 7 trainings that trained 19 employees. City was able to clean some catch basins this year.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

In 2019 the city was unable to complete the facility audits. The City did clean out its 29 catch basin this year. City did sweep 918 miles of road and 17.44 total acres of parking lots. City Trained 19 employees.

C. How many times was this observation measured or evaluated in this reporting period?

			4
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

☒ Yes ☐ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

☒ Yes ☐ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The City plans on updating the facility self audits with the help of the coalition. The City will continue the catch basin cleaning program were it does 1/3 of the catch basins a year. City will continue to track all sweeping info throughout the year and the pesticide/herbicide/fertilizer info from the park and recreation dept. City will provide training to all the relevant employees

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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Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

☐ On behalf of an individual MS4

☒ On behalf of a coalition

How many MS4s contributed to this report?

1	2
---	---

1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

☒ Construction Sites

☒ General Stormwater Management Information

☒ Household Hazardous Waste Disposal

☒ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☐ Smart Growth

☐ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☒ Recycling

☐ Riparian Corridor Protection/Restoration

☒ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
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Other

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☐ Contractors

☐ Residential ☐ Developers

☐ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

C	o	a	l	T	r	a	i	n	'	g	-	P	u	b	l	i	c	E	m	p	l	-	C	W	A	-	R	a	i	n	C	k
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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

			3	1
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☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				6
--	--	--	--	---

☒ List-Serves

In List

		4	3	5
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☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		1	6	0
--	--	---	---	---

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		2	6	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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C	W	P		W	e	b	c	a	s	t		R	o	a	d	S	a	l	t
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C	o	a	l	i	t	i	o	n	T	r	a	i	n	B	l	i	t	z	
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C	W	A	B	a	s	i	c	s	-	R	a	i	n	C	k	Q	u	i	z
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☒ Other:

1	C	W	P	W	e	b	c	a	s	t	-	R	o	a	d	S	a	l	t
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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.

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

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

1. Coalition website maintained, minor updates
2. Coalition Sponsored 1 CWP Webcast -11/2019 Salt & Stormwater - Salinization of Our W'sheds
3. Stormwater publications printed/distributed when requested
4. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit reissued.
5. Status of print inventory not discussed. Limited Coalition staff (1 person as of July, 2019)

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).

2020/2021 Coalition Goals: 1. Support/update Coalition website; 2. For interested Coalition MS4s provide access to the Center for Watershed Protection member portal (archived webcasts, educational material); 3. Hire Coalition Outreach Specialist; 4. Outreach Specialist updates and/or creates educational material for targeted audience - message and effectiveness analyzed 4. If requested, print/distribute existing stormwater publications (brochure racks, clean up events, etc.)

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 0

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	2
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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 type="radio"/> Community Hotlines | 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="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="text"/> | Phone # |
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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="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | Phone # |
| | | | | | |
| <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="5"/> |
| <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 | | | | 2 | 6 |
| <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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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	1
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2	0	2	0
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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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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.

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.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

1. Completed 5 Coalition-wide WAVE stream monitoring events: Onequethaw Creek (T/Beth); Sand Creek (T/Col); Vlomanskill (T/Beth) and KrumKill (City of Albany- 2 classes Holy Names students, same site); 2. 2020 budget adopted and staffing plan approved to hire a part time Coalition Stormwater Outreach Specialist responsible for public participation activities. As of 3/9/2020, no staff hired. Various public participation activities considered, but not formally discussed.

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).

2020/2021 Coalition Goals: 1. Organize one or more Coalition-wide WAVE Volunteer Stream Monitoring events (July 1 to Sept 30); 2. Hire and train Coalition Outreach Specialist; 3. Outreach Specialist organizes one public participation activity; 4. Coalition prepares with members Joint SWMP Plan update (Annual Evaluation). NOTE: Covid19 pandemic may force change in plans (hiring and public participation activities).

2	0	2	0
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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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How many MS4s contributed to this report?	1	2
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	1	2
--	---	---

1. Enter the number and approx. percent of outfalls mapped:

					#
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			%
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2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?

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☐ None

[illegible]

○ Sewersheds:

[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?

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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

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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.

2020/2021 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.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

1. ORI Kits not restocked. Existing supply of test strips adequate. 2. Dropped. Planning related to DRAFT MS4 Permit on hold until MS4 Permit is reissued. 3. Need/value of ORI field training discussed, no action.

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).

2020/2021 Coalition Goals: 1. Review with Working Group contents of ORI kit-match kit to Svy123 ORI form-remove/add kit items; 2. Review ORI Kit resupply and water testing role of Albany County Water Purification District, revise services as needed; 3. Hire GIS Coordinator; 4 GIS Coordinator and/or Coalition Director train MS4s in use of tablets/ORI Svy123 forms, data access and management. NOTE: Covid19 pandemic may force change in plans (hiring and training).

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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.

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.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

1. Coalition co-sponsored with ACSWCD 1 4hr E/SC training for Construction Site Operators (11/18/2019)
2. Need/value of MS4 Construction Site Inspection field training using tablets w/Svy123 form not discussed (other priorities and limited Coalition staff)

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).

2020/2021 Coalition goal: 1. Co-sponsor with ACSWCD, one (1) 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members; post training info on Coalition website.

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.

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

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

1. Before leaving July, 2019 the Coalition Stormwater Program Technician developed multiple Survey123 forms based on PDF forms from the NYSDEC Maintenance Guidance Stormwater Management Practices (March 31, 2017). The forms were not pilot tested in the field.

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).

2020/2021 Coalition goals: 1. Locate the Survey123 PCSMP forms created by the Coalition Stormwater Program Technician Assistant in 2019. Share forms with Coalition MS4s now using ArcGIS Online Survey123/Collector technology.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

2	0	2	0
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Name of MS4/Coalition

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SPDES ID

N	Y	R	2	0				
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2. Provide the following information about municipal operations good housekeeping programs:

- ☐ Parking Lots Swept (Number of acres X Number of times swept) # Acres

--	--	--	--	--
- ☐ Streets Swept (Number of miles X Number of times swept) # Miles

--	--	--	--	--
- ☐ Catch Basins Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Pesticide/Herbicide Applied # Acres

					.	
--	--	--	--	--	---	--

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

			2	5
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4. What was the date of the last training?

0	3	/	0	5	/	2	0	2	0
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

2	4	7
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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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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.

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 and support materials; match needs to likely DRAFT MS4 Permit requirements.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

1. DVDs circulated, but train'g venues not set up. Coalition instead developed two train'g modules: Track 1 The SW Regs & Pollution Prevention Practices (Rain Check DVD) for Field Workers & Track 2 The SW Regs and Future MS4 Permit for Officials/Management. Municipal staff/officials attended Track 1 and Track 2 presentations hosted at multiple locations (20 training events, 240 total participants); 2 & 3. Dropped because status of DRAFT MS4 Permit too uncertain.

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).

2020/2021 Coalition goals: 1. Hire/train Coalition Stormwater Program Technician (PT- dedicated staff person for 4 MS4s); 2. Hire GIS Coordinator (FT); 3. Train GIS Coordinator in storm system and program mapping completed to date; 3. GIS Coordinator trains Coalition members in all aspects of ArcGIS Online Survey 123-Collector tablet use (ORI, Construction Sites, Municipal Facilities inspections). NOTE: Covid19 pandemic may force change in plans (hiring and training).

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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	2
--	---	---

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.

--	--	--

 %

MS4 Annual Report Form

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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?

--	--	--

 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? ☐ Yes ☐ No ☒ N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? ☐ Yes ☐ No ☒ N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? ☐ Yes ☐ No ☒ N/A

7b. How many projects have been sited in this reporting period?

--	--	--

7c. What percent of the projects included in 7b have been completed in this reporting period?

--	--	--

 %

7d. What percent of projects planned in previous years have been completed?

--	--	--

 %

☐ No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? ☐ Yes ☐ No ☒ 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

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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