MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 8

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

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Choose one:

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OR

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

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

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OR

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

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

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MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 8

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

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MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Broome-Tioga Stormwater Coalition		N	Y	R	2	0	С	0	0	2
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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:

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

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

If Jo	oint	Rep	ort	, ent	er c	oali	tion	nai	ne:																		
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MCC form for period ending March 9, 2 0 1 8

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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 R a y	MI L	Last Name Standish
Title (Clearly print title of individual signing report) C i t y E n g i n e e r		
Signature RE		Date 04/27/2018

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

MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

Important Instructions - Please Read

Name of MS4 City of Binghamton

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

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

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

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

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

First Name	MI Last Name	
R i c h a r d	C David	
Title		
M a y o r		
Address		
3 8 Hawley Stree		
City	State Zip	
City B i n g h a m t o n	State Zip N Y 1 3 9 0 1 -	
B i n g h a m t o n eMail		
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MCC form for period ending March 9, 2 0 1 8

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Name of MS4	Town of Binghamton	N	Y	R	2	0	A	0	0	9

Section 4 - Certification Statement

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

MCC form for period ending March 9, 2 0 1 8

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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.

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

First Name	MI Last Name
T i m o t h y	P W h i t e s e l l
Title	
Supervisor	
Address	
2 7 9 P a r k A v e n u e	
City	State Zip
City B i n g h a m t o n	State Zip N Y 1 3 9 0 3 -
Binghamton	
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MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

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

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MCC form for period ending March 9, 2 0 1 8

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

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MCC form for period ending March 9, 2 0 1 8

	SPDES ID
Name of MS4 Town of Chenango	N Y R 2 0 A 1 2 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."

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

MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

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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.

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

First Name James	MI Last Name D i M a s c i o
Title	
Deputy Town Sup	ervisor
Address	
1 5 2 9 N Y S R o u t e	1 2
City	State Zip
B i n g h a m t o n	N Y 1 3 9 0 1 -
eMail	
Jim.DiMascio@to	v n o f c h e n a n g o . c o m
Phone	County
(607)648-4809	Broome

MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

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

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MCC form for period ending March 9, 2 0 1 8

Name of MS4 Town of Chenengo	R	2	0	A	1	2	7

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

First Name	MI Last Name
Alexander	N Urda, P.E.
Title	
Engineerforthe	T o w n
Address	
1 0 6 Main Street,	Suite 4
City	State Zip
City Windsor	State Zip N Y 1 3 8 6 5 -
Windsor	
Windsor eMail	N Y 1 3 8 6 5 -

MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Town of Conklin	N	Y	R	2	0	Α	2	5	5

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."

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First Name W i 1 1 i a m	MI	Last Name D u m i a n
Title (Clearly print title of individual signing report) S u p e r v i s o r		
Signature		Date 0 5 / 0 1 / 2 0 1 8

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

MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Town of Conklin	N	Y	R	2	0	Α	2	5	5

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

First Name W 1 1 1 a m	MI	Last Name D u m i a n
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MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Town of Conklin	N	Y	R	2	0	Α	2	5	5

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

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

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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.

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

First Name N i c k	MI Last Name Vascello
Title	
Codemen	t Officer
Address	
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MCC form for period ending March 9									
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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 M I C H A E L	MI	Last Name M A R I N A C C I O
Title (Clearly print title of individual signing report) S U P E R V I S O R		
Michael Marina as		Date 0 5 / 0 2 / 2 0 1 8

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

MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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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.

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Title (Clearly print title of individual signing report)							_						T		
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Signature															
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Send completed form and any attachments to the DEC Central Office at:

MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

Important Instructions - Please Read

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- 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.

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

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MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

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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.

- O Principal Executive Officer/Chief Elected Official
- O 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, 2 0 1 8

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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 G a r y	MI J	Last Name H o 1 c o m b
Title (Clearly print title of individual signing report) Deputy Supervises Constitution	o r	
Signature		
Sary Holomb		Date 0 5 / 1 0 / 2 0 1 8

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

MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Town of Fenton		N	Y	R	2	0	А	0	7	8
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Section 2 - Contact Information

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

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- 4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 5. Report Preparer (Consultants may provide company name in the space provided).

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

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

First Name R i c h a r d	MI Last Name R A r m s t r o n g
Title	
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MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Village of Johnson City	N	Y	R	2	0	Α	1	0	1

Section 4 - Certification Statement

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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 G r e g o r y	MI W	Last Name D e e m i e
Title (Clearly print title of individual signing report) M a y o r		
Signature (Man)		Date 0 4 / 2 4 / 2 0 1 8

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

MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

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

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Section 2 - Contact Information

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- O 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, 2 0 1 8

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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."

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First Name	MI	Last Name
Gordon	E	K n i f f e n
Title (Clearly print title of individual signing report)		
Supervisor		
Signature Sasan Truffy		Date 0 4 / 2 7 / 2 0 1 8

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

MCC form for period ending March 9, 2 0 1 8

Name of MS4 Town of Kirkwood N Y R 2	0 A	A 0	7	2

Section 2 - Contact Information

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

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MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Town of Kirkwwood	N	Y	R	2	0	А	0	7	2

Section 2 - Contact Information

Important Instructions - Please Read

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

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MCC form for period ending March 9, 2018

Name of MS4 Town of Owego							R20		9			
Section 4 - Certification Statement												
"I certify under penalty of law that this docume direction or supervision in accordance with a syproperly gathered and evaluated the information persons who manage the system, or those persons the information submitted is, the best of my know aware that there are significant penalties for sulfine and imprisonment for knowing violations. This form must be signed by either a principal authorized representative of that person as descripted with the supervision of the person as descripted with the supervision of the supervis	ystem on submons directly owledge braitting.	designed itted. It is called the	ed to Base spon belie info	assur d on r asible of, true ormati or rank 002 P	e the my if for e, acon, king	at q inqu gath ccur incl	ualifairy of the control of the cont	fied pof the g the and of the and	person e per e inf comp e po	onne son orma plete ssibi	or atio e. I a ility	am of
Donald			-	Lucc	1							
Title (Clearly print title of individual signing report) Town of Owego Supervisor					1						I	
Signature					Da 0	te 5	1	0 1]/[2 () 1	8

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

MS4 Municipal Compliance Certification(MCC) Form MCC form for period ending March 9, 2018

MCC form for period ending	March 9, 2018
Town of Owego	SPDES ID
Name of MS4	N Y R 2 0 A 0 7 9
Section 2 - Contact Information	
Important Instructions - Please Read	
Contact information must be provided for each of the fol	lowing positions as indicated below:
 Principal Executive Officer, Chief Elected Official or GP-0-08-002 Part VI.J). 	other qualified individual (per
2. Duly Authorized Representative (Information for this Authorized Representative is signing this form)	·
3. The Local Stormwater Public Contact (required per G	P-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
 The Stormwater Management Program (SWMP) Coor coordination/implementation of SWMP). 	rdinator (Individual responsible for
5. Report Preparer (Consultants may provide company n	ame in the space provided).
A separate sheet must be submitted for each position filled by the same individual. If one individual fills monce and check all positions that apply to that individual	ultiple roles, provide the contact information
If a new Duly Authorized Representative is signing th	
provided and a signature authorization form, signed by	
Elected Official must be attached.	
For each contact, select all that apply:	
● Principal Executive Officer/Chief Elected Official	
O Duly Authorized Representative	
O Local Stormwater Public Contact	
O Stormwater Management Program (SWMP) Coordinator	
O Report Preparer	
First Name MI L:	ast Name
	astellucci
Title	
Townofowegosuper	visor
Address	
2 3 5 4 S t a t e R o u t e 4 3	
City Apalachin	State Zip NY 1 3 7 3 2
	1 1 3 7 3 2 3
eMail dcastelllucci@townof	owego.com
	unty
(607)687-0123	ioga

• Report Preparer

MS4 Municipal Compliance Certification(MCC) Form MCC form for period ending March 9, 2018

	SPDES ID
Name of MS4 Town of Owego	NYR20A079
Section 2 - Contact Information	
Important Instructions - Please Read	
Contact information must be provided for each of the following po	sitions as indicated below:
1. Principal Executive Officer, Chief Elected Official or other qual GP-0-08-002 Part VI,J).	lified individual (per
2. Duly Authorized Representative (Information for this contact m Authorized Representative is signing this form)	ust only be submitted if a Duly
3. The Local Stormwater Public Contact (required per GP-0-08-00	2 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (In coordination/implementation of SWMP).	ndividual responsible for
5. Report Preparer (Consultants may provide company name in the	space provided).
A separate sheet must be submitted for each position listed above filled by the same individual. If one individual fills multiple role once and check all positions that apply to that individual.	
If a new Duly Authorized Representative is signing this report, t provided and a signature authorization form, signed by the Prine Elected Official must be attached.	
For each contact, select all that apply:	
O Principal Executive Officer/Chief Elected Official	
O Duly Authorized Representative	
● Local Stormwater Public Contact	
Stormwater Management Program (SWMP) Coordinator	

First Name Delora	MI T	Last Name Standinger
Title		
Planning Zoning Administrator		
Address		
2354 State Route 434		
City		State Zip
City Apalachih		State Zip
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MCC form for period ending March 9,									
	SPI	DES I	ID						
Name of MS4 VILLAGE OF PORT DICKINSON	N	Y	R	2	0	Α	0	8	0

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 E V I N	MI	Last Name B U R K E
Title (Clearly print title of individual signing report) M A Y O R		
Kewn M. Burle		Date 0 5 / 0 2 / 2 0 1 8

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

MCC form for period ending March 9, 2 0 1 8

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Name of MS4 VILLAGE OF PORT DICKINSON	N	Y	R	2	0	A	0	8	0

Section 2 - Contact Information

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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.

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

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MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Town	of Union	N	Y	R	2	0	A	0	5	0

Section 4 - Certification Statement

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

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

First Name	MI	Last N	lame									
ROSE		S	T	A K								
Title (Clearly print title of individual signing report)												
SUPERVISOR												
Signature			7									
Lose A. Souk.					Dat	e 6	1	2	1	2	ō	18

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

MCC form for period ending March 9, 2 0 1 8

	SPI	DES	ID						
Name of MS4 Town of Union	N	Y	R	2	0	Α	0	5	Q

Section 2 - Contact Information

Important Instructions - Please Read

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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.

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

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MCC form for period ending March 9, 2 0 1 8

		SPDES ID
Name of MS4	Town of Vestal	N Y R 2 0 A 0 6 4

Section 4 - Certification Statement

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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

MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Town of Vestal	N	Y	R	2	0	А	0	6	4

Section 2 - Contact Information

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

First Name	MI	Last Name
John		Schaffer
Title		
Town Superviso	o r	
Address		
6 0 5 V e s t a 1 P a r k	k w a y	West
		
City		State Zip
City V e s t a 1		State Zip N Y 1 3 8 5 0 -
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MCC form for period ending March 9, 2 0 1 8

	SPI	DES	ID						
Name of MS4 BROOME COUNTY	N	Y	R	2	0	A	3	3	2

Section 4 - Certification Statement

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First Name J A S O N	MI T	Last Name G A R N A R
Title (Clearly print title of individual signing report) C O U N T Y E X E C U T I V I	E	
Signature		Date 0 5 / 0 7 / 2 0 1 8

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

MCC form for period ending March 9, 2 0 1 8

	 SPL	ES	ID						
Name of MS4 BROOME COUNTY	N	Y	R	2	0	Α	3	3	2

Section 2 - Contact Information

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

First Name J A S O N	MI Last Name T G A R N A R
Title	
C O U N T Y E X E C U T I V E	
Address	
60 HAWLEY STREET	r - PO BOX 1766
City	State Zip
BINGHAMTON	N Y 1 3 9 0 2 - 1 7 6 6
eMail	
JGarnar@co.broom	n e . n y . u s
Phone	County
(6 0 7) 7 7 8 - 2 1 0 9	BROOME

MCC form for period ending March 9, 2 0 1 8

		SPI	DES	ID				,		
Name of MS4 BROOME COUNTY		N	Y	R	2	0	Α	3	3	2

Section 2 - Contact Information

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

First Name													MI		Las	t Na	ame												
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MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Broome-Tioga Stormwater Coalition	N	Y	R	2	0	С	0	0	2
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Section 2 - Contact Information

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

First Name Beth	MI Last Name A L u c a s
Title	
S e n i o r P l a n n e r /	BTSCChair
Address	
Broome County P	l a n n i n g , P O B 1 7 6 6
City	State Zip
City B i n g h a m t o n	State Zip N Y 1 3 9 0 2 - 1 7 6 6
Binghamton	
B i n g h a m t o n eMail	N Y 1 3 9 0 2 - 1 7 6 6

MCC form for period ending March 9, 2 0 1 8

	,	SPI	DES	ID						
Name of MS4	TIOGA COUNTY	N	Y	R	2	0	A	0	4	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.

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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

MCC form for period ending March 9, 2 0 1 8

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

First Name	MI Last Name
ELAINE	D JARDINE
Title	
C O U N T Y P L A N N I N G	DIRECTOR
Address	
5 6 M A I N S T R E E T	
City	State Zip
City O W E G O	State Zip N Y 1 3 8 2 7 -
OWEGO	N Y 1 3 8 2 7 -
O W E G O	N Y 1 3 8 2 7 -

MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$

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Name of MS4 TIOGA COUNTY		N	Y	R	2	0	Α	0	4	7

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- O Report Preparer

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

First Name	MI Last Name
ELLEN	P R A T T
Title	
SUSTAINABILITY M	A N A G E R
Address	
4 7 7 R O U T E 9 6	
City	State Zip
City O W E G O	State Zip N Y 1 3 8 2 7 -
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O W E G O eMail	N Y 1 3 8 2 7 -

MCC form for period ending March 9, $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix}$

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

First Name G A R Y	MI Last Name H A M M O N D
Title	
C O M M I S S I O N E R O F	PUBLIC WORKS
Address	
4 7 7 R O U T E 9 6	
City	State Zip
O W E G O	N Y 1 3 8 2 7 -
eMail	
hammondg@co.tiog	ga.ny.us
Phone	County
(6 0 7) 6 8 7 - 0 3 0 2	TIOGA

Name of MS4 TIOGA COUNTY	SPDES ID N Y R 2 0 A 0 4 7
Name of MS4	
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all pern period?	nit requirements during this reporting Yes O No
If Yes, complete information below.	_
Submit a separate sheet for each partner. Information provided	
accepted. If your MS4 cooperated with a coalition, submit one coalition. It is not necessary to include a separate sheet for each	
If No, proceed to Section 4 - Certification Statement.	
Partner/CoalitionName	
TIOGACOUNTYSOLIDWAS	STE
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
	N Y R 2 0 A 0 4 7
Address 4 7 7 S T A T E R O U T E 9 6	
4 7 7 S T A T E R O U T E 9 6 City	te Zip
OWEGO N	Y 1 3 8 2 7 -
eMail	
pratte@co.tioga.ny.us	
Phone Legally	Binding Agreement in accordance
(6 0 7) 6 8 7 - 8 2 7 4 with GF	?-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 Earth Day presenta	tions
	HW clean ups
• MM2 Tire E-Waste and HI	
O MM3	
O MM4	
O MM5	
O MM6	
Additional tasks/responsibilities	
O Watershed Improvement Strategy Best Management Practices	required for MS4s in impaired
watersheds included in GP-0-08-002 Part IX.	

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Section 3 - Partner Information						
Did your MS4 work with partners/coalition to complete some or all peperiod?	ermit requir	ements	during	this i		ting () No
If Yes, complete information below.						
Submit a separate sheet for each partner. Information provide						
accepted. If your MS4 cooperated with a coalition, submit on coalition. It is not necessary to include a separate sheet for ea						
If No, proceed to Section 4 - Certification Statement.		i the co	unnoi	••		
Partner/Coalition Name						
TOWN OF OWEGO HIGHWAY	DE	РТ				
Partner/Coalition Name (con't.)		SPDES	Partner	· ID - I	f app	licable
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What tasks/responsibilities are shared with this partner (e.g. MM	[] School	Progran	ns or	Multi	ple 7	Γasks)
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O MM2						
• MM3 catch basin maint.	&	i n	s p	ес	t	
O MM4						
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O MM5						
O MM6						
Additional tasks/responsibilities						
O Watershed Improvement Strategy Best Management Practice	es required	d for M	S4s ir	imp	aired	l
watersheds included in GP-0-08-002 Part IX.						

Name of MS4 Broome-Tioga Stormwater Coalition

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 8

SPDES ID

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Name of MS4 Broome-Tioga Stormwater Coaition N Y R 2 0 C 0 0	2
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? • Yes • C	g 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/CoalitionName BroomeCounty Soil and Water	
Partner/Coalition Name (con't.) SPDES Partner ID - If application is applied to the partner in	ble
Conservation District NYR20	
Address	
1 1 6 3 Upper Front Street	
City State Zip	
B i n g h a m t o n N Y 1 3 9 0 5 - N	
eMail	
c m c e 1 w e e @ b r o o m e s w c d . o r g	
Phone Legally Binding Agreement in accordance	2.1
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What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Ta	sks)?
• MMI Multiple Ed & Outreach Tasks	
● MM2 Public Events and Training	
O MM3	
O MM4	
O MM5	
O MM6	Ш
Additional tasks/responsibilities	
O Watershed Improvement Strategy Best Management Practices required for MS4s in impaired	
watersheds included in GP-0-08-002 Part IX.	

MCC form for period ending March 9, 2 0 1 8

SPDES ID

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Name of MS4 Broome-Tioga Stormwater Coalition

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 8

SPDES ID

N Y R 2 0 C 0 0 2

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MCC form for period ending March 9, 2 0 1 8

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Name of MS4 Broome-Tioga Stormwater Coalition	N	Y	R	2	0	С	0	0	2

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

First Name	Ml Last Name
Aaron	F McNamara
Title	
Regional Develop	m e n t A n a l y s t I
Address	
49 Court Street,	S u i t e 2 2 2 2
City	State Zip
Binghamton	N Y 1 3 9 0 1 -
B i n g h a m t o n eMail	NY 13901-
eMail	

Other

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 8 \end{vmatrix}$

	<i>y y</i> 1	
Name of MS4/Coalition	Broome-Tioga Stormwater Coalition	SPDES ID N Y R 2 0 C 0 0 2
<u>Mini</u>	mum Control Measure 1. Public Ed	ucation and Outreach
The information in thi	s section is being reported (check one):	
On behalf of an ind On behalf of a coal: How m		. 5
1. Targeted Public	Education and Outreach Best Managemo	ent Practices
Check all topics that	t were included in Education and Outreach d	uring this reporting period:
Construction Sites		• Pesticide and Fertilizer Application
• General Stormwater	Management Information	● Pet Waste Management
Household Hazardo	us Waste Disposal	Recycling
• Illicit Discharge De	tection and Elimination	O Riparian Corridor Protection/Restoration
● Infrastructure Main	tenance	Trash Management
Smart Growth		 Vehicle Washing
Storm Drain Markin	ng	O Water Conservation
• Green Infrastructure	e/Better Site Design/Low Impact Development	 Wetland Protection
• Other:		○ None
Town C1	eanupDays, F1	0 0 d i n g
Other 2. Specific audience	ces targeted during this reporting period:	
Public Employees	• Contractors	
Residential	• Developers	
Businesses	• General Public	
• Restaurants	• Industries	
O Other:	Aoricultural	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	ne of MS4/Coalition Broome-Tioga Stormwater Coalition														_			SPL	DES	ID											
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 B	roome-Tioga Stormwater Coalition	N Y R	2 0 C 0 0 2
4. Evaluating Progr	ess Toward Measurable Goals MCM	1	
	t on your progress and project plans tow mwater Management Program Plan (SW onal pages as needed.		
A. Briefly summariz	e the Measurable Goal identified in th	ne SWMPP in this rep	oorting period.
public through BTSC information, best man hazardous waste mana	roome EMC to promote stormwater awar events and mailings. Topics include gre nagement practices, kids activities, solid agement. Promote websites, www.Broom org at these events. Incorporate hands on	en infrastructure, gene waste, composting, gr neTiogaStormwater.co	eral stormwater asseyeling, om and
B. Briefly summariz Goal.	e the observations that indicated the o	overall effectiveness o	f this Measurable
participants, info distreached a total of 600	arth Day Southern Tier Earth Fest, 2000 ributed to 236 people. Owego Farm to F people, USC Forum: reached 65 people e, Discovery Center: reached 46 people.	ork: 60 people reached , Baseball Games: 104	l, Luma Festival
C. How many times	was this observation measured or eva	-	3 1 4 1
D. Has your MS4 ma	ade progress toward this Measurable		<pre>.: samples/participants/ever orting period?</pre>
v	• •		● Yes ○ No
E. Is your MS4 on so	chedule to meet the deadline set forth	in the SWMPP?	● Yes ○ No
•	e the stormwater activities planned to cycle (including an implementation s	_	s MCM during

Expand the variety of materials distributed and the audiences reached. Incorporate events that reach a broader demographic (i.e. downtown festivals, sporting events) Continue to distribute materials developed through the Water From Rain public education and outreach marketing campaign.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

II Subimuiii	ig this form as part of a joint report	on ochan or a coantion is	cave of DES ID Glank.
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Name of MS4/Coalition	Broome-Tioga Stormwater Coalition		N Y R 2 0 C 0 0 2
4. Evaluating Prog	gress Toward Measurable Goa	is MCM 1	
identified in your Ste	ort on your progress and project pormwater Management Program tional pages as needed.	plans toward achieving Plan (SWMPP), includ	measurable goals ling requirements in Part
A. Briefly summar	ize the Measurable Goal identi	fied in the SWMPP in	this reporting period.
website, TV ads, rad information about s	entation of the Water From Rain paid ads, and print material. Post to tormwater management and deta shirts, magnets, umbrellas and to	to Facebook page for sl ils about events. Distri	naring educational
B. Briefly summar Goal.	rize the observations that indica	ated the overall effecti	veness of this Measurable
Brochures were prir Facebook page utili	nin Commercials Aired Inted and distributed at various ever ized regularly for educational postor Water from Rain were distrib	stings. (834 likes on the	e web page and posts)
C. How many time	es was this observation measure	ed or evaluated in this	reporting period? 1 0 0 0 (ex.: samples/participants/ev.
D. Has vour MS4 n	made progress toward this Mea	surable Goal during	
D. Has your Mist	nade progress toward this vice		● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline	set forth in the SWMI	PP? • Yes O No
	rize the stormwater activities pl ng cycle (including an impleme		als of this MCM during
Will continue to provia Facebook page.	omote program and air commerci Continue use of intern to focus	ials in the coming year. on social media aspect	Will continue promotion as part of their duties.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 8 \end{vmatrix}$

if submitting this form as part of a John report on some	
Name of MS4/Coalition Broome-Tioga Stormwater Coalition	SPDES ID N Y R 2 0 C 0 0 2
4. Evaluating Progress Toward Measurable Goals MC	M 1
Use this page to report on your progress and project plans to identified in your Stormwater Management Program Plan (SIII.C.1. Submit additional pages as needed.	oward achieving measurable goals SWMPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in	the SWMPP in this reporting period.
Broome County Division of Solid Waste continued promot and Tioga Counties. Topics include HHW, electronics recydumping, and disposal of agricultural plastic, freon units, or prescription drugs.	cling, grasscycling, composting, illegal
B. Briefly summarize the observations that indicated the Goal.	e overall effectiveness of this Measurable
- 3 Newspaper ads with HHW collection schedule, and 15, - 372 TV and Radio ads promoting HHW, electronics recycle 2200 recycling guides - 5 landfill tours were held -124 Grasscycling commercials	000 mobile and desktopimpressions cling and curbside recycling
C. How many times was this observation measured or e	evaluated in this reporting period? 2 7 0 4 (ex.: samples/participants/event
D. Has your MS4 made progress toward this Measurab	• • •
E. Is your MS4 on schedule to meet the deadline set for	th in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned the next reporting cycle (including an implementation	to meet the goals of this MCM during on schedule).
Continue Solid Waste Outreach are established and when repromotional materials for use in local media and education brochures.	new opportunities arise. Further develop all campaigns. Develop additional topical

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part of a joint report on behalf of a coantiol	1 leave SPDES ID blank.	
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Name of MS4/Coalition	Broome County	N Y R 2 0 C 0 0 2
4. Evaluating Pro	gress Toward Measurable Goals MCM 1	
identified in your St	oort on your progress and project plans toward tormwater Management Program Plan (SWMF itional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summan	rize the Measurable Goal identified in the S	WMPP in this reporting period.
Inform local busine and stormwater ma	esses and developers about best management p nagement.	practices for pollution prevention
B. Briefly summan	rize the observations that indicated the over	all effectiveness of this Measurable
Development propo Advice is given reg 204 reviews this re	osals submitted for review under GML 239 are garding BMP's for uses that may have stormwa porting year.	e reviewed for stormwater impacts. Inter impacts. There were a total of
C. How many time	es was this observation measured or evaluat	ted in this reporting period?
		2 0 4 (ex.: samples/participants/even
D. Has your MS4	made progress toward this Measurable Goa	
E. Is your MS4 on	schedule to meet the deadline set forth in t	he SWMPP? • Yes • No
F. Briefly summar	rize the stormwater activities planned to me ing cycle (including an implementation sche	eet the goals of this MCM during edule).
Continue to provide	e guidance for businesses and developers throu	ugh the 239 review process.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8 \mid$

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

SPDES ID

BROOME-TIOGA STORMWATER COALITION

N Y R 2 0 C 0 0 2

Name of MS4/Coalition	BROOME-TIOGA STORMWATER COALITION	N Y R 2 0 C 0 0 2
4. Evaluating Pro	gress Toward Measurable Goals MCM 1	
identified in your St	ort on your progress and project plans toward a cormwater Management Program Plan (SWMPI tional pages as needed.	
A. Briefly summa	rize the Measurable Goal identified in the SV	VMPP in this reporting period.
-Two community e -Stormwater princi ordinances, and per	or exceeded all MCM 1 goals: vents (Lockheed Martin Earth Day & Leadersh ples have been integtrated into municipal and co tinent land use trainings a sessions were conducted to a total of 151 atter	ounty comprehensive plans and
B. Briefly summar Goal.	rize the observations that indicated the overa	ll effectiveness of this Measurable
No illicit discharge	s detected.	
C. How many time	es was this observation measured or evaluate	d in this reporting period?
		(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	
	rize the stormwater activities planned to mee ing cycle (including an implementation sched	

O Volunteer Monitoring

 $E \mid 1$

O Other: H H W

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

NYR 2 olc 0 0 2 Broome-Tioga Stormwater Coalition Name of MS4/Coalition 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: 2 Cleanup Events # Events Comments on SWMP Received #Comments 8 7 Community Hotlines Phone # 6 8 6 Phone # Phone # Phone # Phone # Phone # Phone # Phone # Phone # Phone # Phone # Community Meetings 0 4 # Attendees Plantings Sq. Ft. 5 Storm Drain Markings # Drains 1 8 O Stakeholder Meetings # Attendees

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

• Yes

o n

Program (SWMP) Plan provided?

● List-Serve # In List 4 0

● Newspaper Advertising # Days Run Days Run

○ TV/Radio Notices # Days Run

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Events

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Other: Website

Webpage URL: Enter URL(s) on the following two pages.

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

me	of MS4/Coalition Broome-Tioga Stormwater Coalition RL(s) con't.:																	N	Y	R	2	0	С	0	0	2						
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Name of MS4/Coalition Broome-Tioga Stormwater Coalition

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

3. Where can the public access copies of this annual report, Stormwater Management

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

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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Name of MS4/Coalition Broome-Tioga Stormwater Coalition	1	1 Y	R	2	0	c c	0	2
4.a. If this report was made available on the internet, what da	te was it	oste	ed?		_			
Leave blank if this report was not posted on the internet.	0 !	5]/	2	3	1	2 0	1	8
4.b. For how many days was/will this report be posted?						3	6	5
If submitting a report for single MS4, answer 5.a If submitti	ing a joint	repo	ort,	ans	wer	5.b.		
5.a. Was an Annual Report public meeting held in this report		┑.				Yes		No
If Yes, what was the date of the meeting?	0 !	5] /	2	3	/	2 0) 1	8
If No, is one planned?					Ο	Yes	С	No
5.b. Was an Annual Report public meeting held for all MS4s	contribut	ing t	to th	nis I	repo	ort d	luri	ng
this reporting period?					•	Yes	С) No
If No, is one planned for each?					Ο	Yes	6	No
6. Were comments received during this reporting period?					0	Yes	•	No
If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.								

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 1 \end{vmatrix}$

D Ti Ctemenratur Conlition	PDES ID I Y R 2 0 C 0 0 2
Name of MS4/Coalition Broome-110ga Stoffitwater Coantion	
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.	
Expand public involvement in development of stormwater programs and repissues or concerns.	porting of stormwater
B. Briefly summarize the observations that indicated the overall effectiv	veness of this Measurable
Fact sheet - "Detecting and Reporting Illicit Discharges". Educates the publicillicit discharge and who to call to report it. Distributed to riverbank cleanup also asked to report anything they noticed during the cleanup (236 people).	ic on how to recognize an participants who were
C. How many times was this observation measured or evaluated in this	reporting period?
	(ex.: samples/participants/ev
D. Has your MS4 made progress toward this measurable goal during th	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMP	P? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goathe next reporting cycle (including an implementation schedule).	Is of this MCM during
Continue distribution of fact sheet.	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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		SPDES ID
Name of MS4/Coalition	BROOME-TIOGA STORMWATER COALITION	N Y R 2 0 A 0 4 7
7. Evaluating Pro	ogress Toward Measurable Goals MCM 2	
identified in your St	port on your progress and project plans toward tormwater Management Program Plan (SWM itional pages as needed.	l achieving measurable goals PP), including requirements in Part
A. Briefly summar	rize the Measurable Goal identified in the S	SWMPP in this reporting period.
	or exceeded most MCM 2 Goals:	
	8 participants and cleaned up over a ton of wa	
14 out of 15 munic	ipalities collected and disposed of 120 tons of	f tires
	llected and properly disposed of 13.3 tons of	
-E-Waste Program	collected and properly disposed of 73.4 tons	of electronic waste
B. Briefly summar Goal.	rize the observations that indicated the ove	rall effectiveness of this Measurable
NO ILLICIT DISC	CHARGES DETECTED	
C. How many time	es was this observation measured or evalua	ated in this reporting period?
		(ex.: samples/participants/e
D. Has your MS4	made progress toward this measurable goa	al 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 summarthe next report	rize the stormwater activities planned to m ing cycle (including an implementation sch	eet the goals of this MCM during
-Continue annual ti	on of volunteer watershed groups and recruiting ire clean up by municipalities with goal of 50 n up volunteer organizations; Continue annual ions; Focus more on website/Facebook adverti	tons of tires collected;Continue Household Hazardous Waste and

to recruit volunteers for participation activities, even on an individual basis

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 1 \end{vmatrix}$

Naı	ne of MS4/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3	3 2
	Minimum Control Measure 3.	Illicit Discharge Detection and Elimination	<u>on</u>
Th	e information in this section is being reported	d (check one):	
• (On behalf of an individual MS4		
0 (On behalf of a coalition How many MS4s contributed to t	this report?	
	110w many wishs contributed to t	, this report:	
1.	Enter the number and approx. percent	t of outfalls mapped: 5 2 2 # 1 0	0 %
2.	How many of these outfalls have been s	screened for dry weather discharges during this	
	reporting period (outfall reconnaissance	ce inventory)?	8 1
3.2	What types of generating sites/sewersho	heds were targeted for inspection during this	
	reporting period?		
	O Auto Recyclers	Landscaping (Irrigation)	
	O Building Maintenance	○ Marinas	
	○ Churches	O Metal Plateing Operations	
	O Commercial Carwashes	 Outdoor Fluid Storage 	
	O Commercial Laundry/Dry Cleaners	 Parking Lot Maintenance 	
	O Construction Vehicle Washouts	O Printing	
	 Cross-Connections 	O Residential Carwashing	
	O Distribution Centers	○ Restaurants	
	O Food Processing Facilities	O Schools and Universities	
	○ Garbage Truck Washouts	Septic Maintenance	
	○ Hospitals	O Swimming Pools	
	O Improper RV Waste Disposal	Vehicle Fueling	
	O Industrial Process Water	Vehicle Maint./Repair Shops	
	Other:	○ None	
	2 0 % C O U N T Y M S	S 4 R D S & FACILITI	E S
	O Sewersheds:		
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

| SPDES ID | Name of MS4/Coalition | BROOME COUNTY | N Y R 2 0 A 3 3 2

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

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.

MEASURABLE GOAL #3A -- To verify that 100% of County-owned outfalls have been mapped and identified within the MS4 boundaries, including those located at all County-owned facilities. SWMP includes schedule to confirm mapping and check outfalls at all facilities.

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

All of the outfalls within the County roadways (and within the designated MS4 boundaries) were verified and relocated using GPS equipment during the summer of 2013. Seventeen (17) facilities within the MS4 boundaries have been mapped/surveyed and two (2) remain to be completed in 2018. During the 2016 self-assessment surveys at the 19 MS4 County facilities, additional outfalls were located and mapped.

C.	How many	times v	vas 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 O No

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

During the summer of 2018 DPW staff will screen approximately 20% of the identified roadway and facility outfalls and confirm/map any new ones. Detail mapping / survey at the remaining 2 (two) MS4 facilities will be completed in 2018.

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

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

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

MEASURABLE GOAL #3B -- To complete reconnaissance inventory and dry weather inspections of 20% of County-owned outfalls within the MS4 boundary annually.

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

Goal objectives have been met during this reporting year. During the 2017 summer season, DPW staff conducted dry weather inspections within Area #5 (area #4 was skipped), which is comprised of 81 outfalls.

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

8 1 (ex.: samples/participants/events)

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

Yes O No

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

Yes O No

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

Continue with inspection program as developed - by inspecting those outfalls in Area #4 (approximately 20%), including outfalls along County roads and at County facilities.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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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 mean identified in your Stormwater Management Program Plan (SWMPP), including a III.C.1. Submit additional pages as needed.	surable goals requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
MEASURABLE GOAL #3C To develop and implement local IDDE regulation County in accordance with the State's model IDDE law.	ons in Broome
B. Briefly summarize the observations that indicated the overall effectivene Goal.	ss of this Measurable
Goal objectives have not been met in the 2017-2018 reporting period.	1
C. How many times was this observation measured or evaluated in this repe	orting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this re	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	○ 162 ● 140
	O Yes ● No
F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).	this MCM during
The SWMPP identifies that this local law/regulation will be established and ena County. A draft of the IDDE local law/regulation has been developed and is un goal will be to pass this law/regulation during the 2018-2019 reporting period.	cted by Broome der review, and the
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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12. Evaluating Progr	ess Toward Measurable Goals M	СМ 3		
identified in your Stor	this page to report on your progress and project plans toward achieving measurable goals attified in your Stormwater Management Program Plan (SWMPP), including requirements in Part C.1. Submit additional pages as needed. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. EASURABLE GOAL #3D To install markers on 100% of the County-owned storm drain CB's DI's within the MS4 area; to be completed each year within areas of dry weather inspections (at			
A. Briefly summariz	e the Measurable Goal identified	in the SWMPP i	n this reporting per	iod.
B. Briefly summariz	e the observations that indicated	the overall effect	tiveness of this Meas	surable
During 2017, markers #5.	s were installed in Area #5. 185 alu	minum markers w	ere applied within A	rea
C. How many times	was this observation measured or	r evaluated in thi	is reporting period?	
			(ex.: samples/pa	
D. Has your MS4 ma	ade progress toward this measura	able goal during (d? ○ No
E. Is your MS4 on so	chedule to meet the deadline set fo	orth in the SWM	(PP? ● Yes	O No
	e the stormwater activities plann g cycle (including an implementat			ring
	tinue to install drain markers within 018, drain markers will be installed		ther inspections each	year

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID 2 Y R **BROOME COUNTY** Name of MS4/Coalition 12. Evaluating Progress Toward Measurable Goals MCM 3 Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. MEASURABLE GOAL #3E -- To establish a dedicated IDDE hotline and to advertise this hotline and list it on the storm water website. This goal also includes creating centralized tracking and reporting of IDDE complaints with information related to follow-up. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. Broome County has a stormwater page on the County website which includes a fillable form for reporting IDDE. This form was not used during this reporting period, so we need to determine a more effective method to publicize this feature. No additional progress was made on this goal during the 2017-2018 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? O Yes No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). During this next reporting period we want to further this goal by pulling the Health Department -Division of Environmental Health tracking and reporting system into this loop as well as teh

Highway Department, and to publicize the IDDE tracking and reporting form (see MCM-3F goal).

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 8 \end{vmatrix}$

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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.	
MEASURABLE GOAL #3F To educate and inform 100% of Broome County staff about IDDE's - what they are, how to report them, and how to address them. This goal is cross referenced with coalition activities related to public education, but will be directed specifically to county employees.	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.	
DPW staff have been working directly with facility managers to educate these staff regarding IDDE's and SPCC's. Staff also identified where additional training is needed. Several employee educational brochures have been developed relating to IDDE's and stormwater/MS4 in general; however distribution of this material has not been accomplished as anticipated.	
C. How many times was this observation measured or evaluated in this reporting period?	
(ex.: samples/participants	s/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?	
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	
During the 2018-2019 reporting year DPW staff will distribute the brochures and set up training for those staff specifically identified during the 2016 self-assessments, and our yearly reporting from each facility manager.	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 8 \end{vmatrix}$

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identified in your Stormwater Management Program Plan (SWM)	
III.C.1. Submit additional pages as needed.	i i), morading requirements in i are
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A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
MEASURABLE GOAL #3G To inform and educate businesse	es and industries about the negative
environmental impacts of illegal dumping, as well as chemical ar	
encourage the use of BMP's to prevent and control these. This is	to be done through the County 239
review process, which is an advisory capacity only.	
F. 22	
B. Briefly summarize the observations that indicated the over	rall effectiveness of this Measurable
Goal.	
Broome County Planning and Engineering staff continue to revie	
reviews where BMP's were incorporated or included as advisory	
appropriate. Additionally, Broome County Planning has been propriate.	
regarding stormwater issues and IDDE - 2 trainings were held du	
additional progress related to tracking was made during the 2016	-2017 reporting year.
C. How many times was this observation measured or evalua	tad in this reporting period?
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D. Has your MS4 made progress toward this measurable goal	
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	the SWMPP?
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to me	eet the goals of this MCM during
the next reporting cycle (including an implementation sche	-
For this next reporting period we need to create a better tracking	
count the number of times these educational issues are being add	
process. Besides this modification, the program goal is to continu	ue these reviews as established, and
to continue the outreach to municipal officials	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Name of MS4/Coalition TIOGA COUNTY	SPDES ID N Y R 2 0 A 0 4 7
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
-Tioga County Public Works continues to follow the best manage "Tioga County and Town of Owego Stormwater Management Prand is effective through 2020.	ogram Plan", which was updated
- No new catch basins or outfalls have been constructed or discov	vered since the last report.
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Minimal litter and sediment were observed on catchment basins of illicit discharges were observed during biannual inspections of our	
C. How many times was this observation measured or evaluate	ted in this reporting period?
	(ex.: samples/participants/even
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 t	he SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	et the goals of this MCM during
-Catchment basins (55) and outfalls (6) will continue to be inspec	eted 2 times per year, once in the

- spring and once in the fall. -Tioga County will schedule street sweeping of its MS4 area of jurisdiction on Pennsylvania Ave
- with Town of Owego Highway Department per the intermunicipal agreement.
- -2018 spring catchment basins inspection, cleaning and street sweeping is scheduled for May 14th.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition City of Binghamton	SPDES ID N Y R 2 0 A 3 4 1
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 to 	this report? 1
1. Enter the number and approx. percent	of outfalls mapped: 2 0 0 # 9 9 %
2. How many of these outfalls have been s reporting period (outfall reconnaissance	screened for dry weather discharges during this ce inventory)?
3.a. What types of generating sites/sewersh- reporting period?	neds were targeted for inspection during this
O Auto Recyclers	Landscaping (Irrigation)
O Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	O Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
Garbage Truck Washouts	O Septic Maintenance
O Hospitals	Swimming Pools
O Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
• Other:	○ None
C i t y s t r e e t s	
○ Sewersheds:	

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

Name of MS4/Coalition City of Binghasmton	SPDES ID N Y R 2 0 A 3 4 1
3.b. What types of illicit discharges have	e been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
O Failing Septic Systems	O Pump Station Failure
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows
○ Illegal Dumping	O Straight Pipe Sewer Discharges
● Other: D i e s e l s p i l l	O None
4. How many illicit discharges/potentia reporting period?	al illegal connections have been detected during this
5. How many illicit discharges have been	en confirmed during this reporting period?
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during this reporting
7. Has the storm sewershed mapping be If No, approximately what percent was	
8. Is the above information available in Is this information available on the valid Yes, provide URL(s): Please provide specific address of page	
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID
Name of MS4/Coalition City of Binghamton	N Y R 2 0 A 3 4 1
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward achie identified in your Stormwater Management Program Plan (SWMPP), in III.C.1. Submit additional pages as needed.	-
A. Briefly summarize the Measurable Goal identified in the SWM	PP in this reporting period.
Conducted outfall reconnaissance inventory. Updated outfall map and of SWPPP's, Review IDDE Ordinance. Update City of Binghamton II Investigated and climinated all reported illicit discharge. Cleanup and Updated list of non stormwater discharge. Implement educational meawater bills.	DDE program manual. inspected catchbasins.
B. Briefly summarize the observations that indicated the overall ef Goal.	ffectiveness of this Measurable
Outfall mapping is in progress to make the inventory 100%. Reviewin Replaced 38 catchbasins. Replaced 5 manholes. 665 drain structures of Installed 190 new castings. 12 "No Dumping Drains to River" markers Repaired 49 catchbasins. Repaired 27 manholes.	were cleaned and inspected.
C. How many times was this observation measured or evaluated in	this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal duri	
E. Is your MS4 on schedule to meet the deadline set forth in the SV	
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule)	_
Continue outfall reconnaissance inventory. Review of ordinance, catel discharge detention investigation, and installation of catchbasin marker in IDDE for all staff. Continued to implement BMP's.	. 0,

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Town of Binghamton	SPDES ID N Y R 2 0 A 0 0 9
Minimum Control Measure 3. 1	Illicit Discharge Detection and Elimination
The information in this section is being reported (On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the	
1. Enter the number and approx. percent of	of outfalls mapped: 25 # 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspection during this
O Auto Recyclers	Landscaping (Irrigation)
Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	Restaurants
O Food Processing Facilities	Schools and Universities
O Garbage Truck Washouts	Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	• Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
Other:	O None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 8 \end{bmatrix}$

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$

Name of MS4/Coalition Town of Binghamton SPDES ID N Y R 2 0 A 0	0 9
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in III.C.1. Submit additional pages as needed.	Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting peri	iod.
Measurable goal is to annually inspect the outfalls during dry weather conditions and identify as eliminate illicit discharges if found.	nd
B. Briefly summarize the observations that indicated the overall effectiveness of this Meas Goal.	urable
Since the local IDDE Law was passed the Town has not detected any illicit discharges.	
C. How many times was this observation measured or evaluated in this reporting period?	
	1
D. Has your MS4 made progress toward this measurable goal during this reporting period • Yes	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes	O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM dur the next reporting cycle (including an implementation schedule).	
Continue to do annual outfall inspections to identify illicit discharges especially during dry wea conditions. Continue public outreach through the use of flyers and pamphlets explaining illicit discharges and how they can and should be avoided.	ther

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 Chenengo	N Y R 2 0 A 1 2 7
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported ((check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to t 	this report?
1. Enter the number and approx. percent	of outfalls mapped: 16 # 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	O Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	O Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
O Other:	○ None
Sewersheds:	
General Storm	Sewer Networks

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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been found during t	his report	ing p	erio	od?					
O Industrial Connection	ons								
3.b.What types of illicit discharges have been found during this reporting period? Property Pr									
O Pump Station Failur	e								
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O Straight Pipe Sewer	Discharges	3							
None									
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 Chenengo	N Y R 2 0 A 1 2 7
12 Evaluating Proc	gress Toward Measurable Goals MCM 3	
Use this page to repidentified in your St III.C.1. Submit additional control of the control of t	ort on your progress and project plans toward ormwater Management Program Plan (SWMF tional pages as needed.	PP), including requirements in Part
A. Briefly summar	rize the Measurable Goal identified in the S	WMPP in this reporting period.
	scharges. The Town website now includes inf NYSDEC for complaint reporting and Town on plaint Form".	
B. Briefly summar Goal.	rize the observations that indicated the over	rall effectiveness of this Measurable
No discharges found	d.	
C. How many time	es was this observation measured or evaluat	ted in this reporting period?
		(ex.: samples/participants/even
D. Has your MS4 r	nade progress toward this measurable goal	during this reporting period? • Yes • No
E. Is your MS4 on	schedule to meet the deadline set forth in t	he SWMPP? ● Yes ○ No
<u> </u>	ize the stormwater activities planned to me ng cycle (including an implementation sche	
	reas investigated and a log. Possibly initiate vershed map of areas contributing to each outfa	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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 Conklin	N Y R 2 0 A 2 5 5
Minimum Control Measure 3. 1	Illicit Discharge Detection and Elimination
The information in this section is being reported (On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the	
1. Enter the number and approx. percent of	of outfalls mapped: 50# 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspection during this
O Auto Recyclers	Landscaping (Irrigation)
Building Maintenance	○ Marinas
O Churches	O Metal Plateing Operations
 Commercial Carwashes 	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
Distribution Centers	Restaurants
O Food Processing Facilities	 Schools and Universities
O Garbage Truck Washouts	Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
Other:	○ None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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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. If Yes, has every traditional MS4 contributing to this report cert equivalent to the NYS Model IDDE Law?	iiiea 1		t this Yes		ns No	0

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

	SPDES ID
Name of MS4/Coalition Town of Conklin	N Y R 2 0 A 2 5 5
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMPF III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	VMPP in this reporting period.
Measurable goal is to annually inspect 25% of the outfalls during didentify and eliminate illicit discharges if found.	lry weather conditions and
B. Briefly summarize the observations that indicated the overa Goal.	ll effectiveness of this Measurable
Since the local IDDE Law was passed the Town has not detected a	ny illicit discharges.
C. How many times was this observation measured or evaluate	d in this reporting period?
D. Has your MS4 made progress toward this measurable goal d	ex.: samples/participants/events,
D. Has your 19154 made progress toward this measurable goard	• Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation sched	t the goals of this MCM during
Continue to do annual outfall inspections on a four year cycle to id during dry weather conditions. Continue public outreach through texplaining illicit discharges and how they can and should be avoided	he use of flyers and pamphlets

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2 0 A 1 4 3
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 the 	his report?
1. Enter the number and approx. percent	of outfalls mapped: 60# 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
 Building Maintenance 	O Marinas
Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
Hospitals	O Swimming Pools
O Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	○ None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

SPDES ID NYR 2 0 A 1 TOWN OF DICKINSON Name of MS4/Coalition 3.b. What types of illicit discharges have been found during this reporting period? O Broken Lines From Sanitary Sewer O Industrial Connections O Inflow/Infiltration O Cross Connections O Failing Septic Systems O Pump Station Failure O Floor Drains Connected To Storm Sewers O Sanitary Sewer Overflows O Illegal Dumping O Straight Pipe Sewer Discharges None Other: 4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 3 3 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? 3 7. Has the storm sewershed mapping been completed in this reporting period? Yes \bigcirc No If No, approximately what percent was completed in this reporting period? 0 용 8. Is the above information available in GIS? Yes \bigcirc No Is this information available on the web? O Yes No If Yes, provide URL(s): Please provide specific address of page where map(s) can be accessed - not home page. URL URL

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 8 \end{vmatrix}$

| SPDES ID | | Name of MS4/Coalition | TOWN OF DICKINSON | N | Y | R | 2 | 0 | A | 1 | 4 | 3 |

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

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.

ILLICIT DISCHARGES FOUND. Measurable goal is to routinely inspect the outfalls during dry weather conditions and identify and eliminate illicit discharges if found.

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

FOUND ILLICIT DISCHARGES ARE TARGETD FOR ENFORCEMENT AND ELIMINATED AS SOON AS POSIBLE. None were found

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

186

(ex.: samples/participants/events)

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

Yes O No

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

• Yes O No

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

ALL PUBLIC WORKS EMPLOYEES WILL BE DIRECTED TO LOOK FOR AND REPORT ALL ILLLICIT DISCHARGES

Continue to do annual outfall inspections to identify illicit discharges especially during dry weather conditions. Continue public outreach through the use of flyers and pamphlets explaining illicit discharges and how they can and should be avoided.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition VILLAGE OF ENDICOTT										ES IC Y R		0	А	1	4 9
Minimum Control Measure 3.	Illi	<u>cit</u>	Dis	<u>eh</u>	ar	ge l	<u> Dete</u>	ecti	on	and	Eli	imi	ina	tio	<u>n</u>
The information in this section is being reported	(che	ck (one):												
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1. Enter the number and approx. percent	outf	alls	ma	apj	ped:				2	1 #		[1	0	0 %	
2. How many of these outfalls have been sereporting period (outfall reconnaissance)					ry	wea	ther	dis	scha	rges	duı	ring	g th	is	
3.a. What types of generating sites/sewersh reporting period?	ieds	we	re ta	ırg	ete	ed fo	r ins	spe	etior	ı du	ring	th	is		
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O Building Maintenance	0	Mε	arina	S											
O Churches	0	Мє	etal I	Plat	ein	g Op	erati	ons							
O Commercial Carwashes	○ Outdoor Fluid Storage○ Parking Lot Maintenance														
O Commercial Laundry/Dry Cleaners	0	Par	rking	, L	ot l	Main	tenar	ice							
O Construction Vehicle Washouts	O Printing														
○ Cross-Connections	0	Re	sider	itial	C	arwa	shin	3							
O Distribution Centers	0	Re	stauı	ant	S										
O Food Processing Facilities	0	Scl	nools	ar	nd	Unive	ersiti	es							
○ Garbage Truck Washouts	0	Sep	otic	Ma	int	enanc	e								
○ Hospitals	0	Sw	imm	ing	Po	ools									
O Improper RV Waste Disposal	0	Ve	hicle	Fι	ıeli	ing									
O Industrial Process Water	0	Ve	hicle	M	ain	t./Re	pair	Sho	ps						
Other:		No	ne		т										
O Sewersheds:			,			,					- ,	·	~~~~~	······································	-···

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

	SPDES ID
Name of MS4/Coalition VILLAGE OF ENDICOTT	N Y R 2 0 A 1 4 9
name of MS4/Coalition	
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward acidentified in your Stormwater Management Program Plan (SWMPPIII.C.1. Submit additional pages as needed.	chieving measurable goals P), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
The existing 24" Storm Sewer system that goes from Loder Avenu School and runs along the southern border of the school to Vestal A was replaced and increased to 48".	e by the Jennie F. Snapp Middle Avenue and into the K-Mart Plaza
B. Briefly summarize the observations that indicated the overa Goal.	ll effectiveness of this Measurable
Loder Avenue between E. Main Street and E. Union Street has excheavy rain events that flood the street. The increase in size of the S flow of storm water during heavy rain events. This will improve the Loder Avenue, the general public traveling by automobile and by f Events.	Storm Sewer pipe will improve the le safety of the residents living on
C. How many times was this observation measured or evaluate	d in this reporting period?
·	3
	(ex.: samples/participants/e
D. Has your MS4 made progress toward this measurable goal o	uring this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	
F. Briefly summarize the stormwater activities planned to mee	● Yes ○ No t the goals of this MCM during lule).
the next reporting cycle (including an implementation sched	

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 8 \end{bmatrix}$

Name of MS4/Coalition Town of Fenton	SPDES ID N Y R 2 0 A 0 7 8
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 the 	his report?
1. Enter the number and approx. percent	of outfalls mapped: 3 6 # 1 0 0 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix} 1 \begin{bmatrix} 8 \end{bmatrix}$

Name of MS4/Coalition Town of Fenton	SPDES ID N Y R 2 0 A 0 7 8
3.b. What types of illicit discharges have	been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
O Failing Septic Systems	O Pump Station Failure
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
Other:	● None
4. How many illicit discharges/potentia reporting period?	l illegal connections have been detected during this
reporting period.	
5. How many illicit discharges have been	en confirmed during this reporting period?
6. How many illicit discharges/illegal coperiod?7. Has the storm sewershed mapping but If No, approximately what percent was	<u> </u>
8. Is the above information available in Is this information available on the value of the second of	
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

	Town of Fen	ıton										S ID	2	0	A	0	7
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition	Town of Fenton		N Y R 2 0 A 0 7 8
, and the second	gress Toward Measurable Goals N		
identified in your St	oort on your progress and project plant tormwater Management Program Plantional pages as needed.		
A. Briefly summar	rize the Measurable Goal identifie	d in the SWMPP i	n this reporting period.
B. Briefly summar Goal.	rize the observations that indicate	d the overall effect	iveness of this Measurable
C. How many time	es was this observation measured	or evaluated in thi	s reporting period?
D. Has your MS4	made progress toward this measu	rable goal during ((ex.: samples/participants/event this reporting period? ● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set	forth in the SWM	
	rize the stormwater activities plan ing cycle (including an implement		als of this MCM during
surveying 1/2 of ou	atfalls per year		

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
Minimum Control Measure 3. I	llicit Discharge Detection and Elimination
The information in this section is being reported (c	check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	
1. Enter the number and approx. percent of	of outfalls mapped: 18# 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	reened for dry weather discharges during this inventory)?
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this
O Auto Recyclers	■ Landscaping (Irrigation)
● Building Maintenance	O Marinas
• Churches .	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	● Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
 Distribution Centers 	Restaurants
O Food Processing Facilities	O Schools and Universities
 Garbage Truck Washouts 	O Septic Maintenance
Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other: Residential	○ None e h i c 1 e M a i n t e n a n c e
○ Sewersheds:	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part of a joint report on behalf of a	coalition leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
With the training of the Village's Refuse, Street, Sanitary Sewer employees are on the streets daily and are aware to notify their so The Code Enforcement works closely with the DPW in identifying regarding illicit discharges.	upervisors of any Illicit Discharges.
B. Briefly summarize the observations that indicated the ove Goal.	rall effectiveness of this Measurable
During the reporting year two illicit discharges was documented catchbasin. DPW cleaned the catchbasin the day that they were letter was sent to the area residents, it was determined that a prividischarge. They were met in person at an area residence and infinto catchbasins. The second one was yardwaste in a drainage di	notified. A Notice of Violation rate landscape company did the illicit ormed to no longer place any thing
C. How many times was this observation measured or evalua	ited in this reporting period?
•	2
	(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goa	
	● 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 m the next reporting cycle (including an implementation sch	eet the goals of this MCM during
The Village will continue to train employees to be aware of illic activities and to notify their supervisors as necessary.	it discharges during their daily
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 1 \end{vmatrix}$

Name of MS4/Coalition Town of Kirkwood								SPD N			2 0	A	0	7 2
Minimum Control Measure 3	. III	<u>licit</u>	Dis	schai	rge	Det	ecti	<u>on</u>	an	d E	lim	ina	tio	<u>on</u>
The information in this section is being reported	ed (ch	neck o	one):	:										
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to 	to this	s rep	ort?											
1. Enter the number and approx. perce	nt of	outf	alls	map	ped	i:			9	1	#	1	0	0 %
2. How many of these outfalls have been reporting period (outfall reconnaissa					we	ather	r dis	scha	rge	es di	urir	ıg tl	nis	2 3
3.a. What types of generating sites/sewer reporting period?	sheds	s we	re ta	arget	ed f	or in	spe	etior	n di	urin	ıg tl	nis		
Auto Recyclers	(■ Laı	ndsc	aping	(Irı	igatio	n)							
■ Building Maintenance	(⊃ M a	irina	ıs										
• Churches	(• Me	tal 1	Plateir	ng C)perat	ions							
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O Commercial Laundry/Dry Cleaners	(• Pai	king	g Lot	Mai	ntenai	ice							
 Construction Vehicle Washouts 	(⊃ Pri	ntin	g										
O Cross-Connections	(⊃ Re	side	ntial (Carv	vashin	g							
Distribution Centers	(■ Res	stau	rants										
● Food Processing Facilities	(● Scl	100l:	s and	Uni	versit	ies							
O Garbage Truck Washouts	(■ Sep	otic	Maint	tena	nce								
O Hospitals	(⊃ Sw	imn	ning P	ools	3								
O Improper RV Waste Disposal	(● Vel	hicle	e Fuel	ing									
● Industrial Process Water	(● Vel	hicle	Mair	ıt./F	tepair	Sho	ps						
Other:	(O No	ne	<u>, </u>	·	4							<u></u>	,··· <u> </u>
O Sewersheds:											,			

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Town of Kirkwood	N Y R 2 0 A 0 7 2
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Measurable goal is to annually inspect all outfalls during dry wea eliminate illicit discharges if found.	ther conditions and identify and
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Since the local IDDE Law was passed the Town has not detected	any illicit discharges.
C. How many times was this observation measured or evaluat	(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal	l during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	eet the goals of this MCM during
Continue to do annual outfall inspections to identify illicit discharges and how they can and should be avoided.	rges especially during dry weather nd pamphlets explaining illicit

Industrial Process Water

Other:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, |20|18|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20A079 Town of Owego Name of MS4/Coalition 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? 100 22 % 1. Enter the number and approx. percent of outfalls mapped: 2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? 3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period? O Landscaping (Irrigation) O Auto Recyclers O Marinas O Building Maintenance O Metal Plateing Operations Churches O Commercial Carwashes Outdoor Fluid Storage O Parking Lot Maintenance Commercial Laundry/Dry Cleaners O Construction Vehicle Washouts Printing O Residential Carwashing Cross-Connections O Restaurants O Distribution Centers O Schools and Universities O Food Processing Facilities O Septic Maintenance Garbage Truck Washouts O Swimming Pools Hospitals O Vehicle Fueling O Improper RV Waste Disposal O Vehicle Maint./Repair Shops

None

This report is being submitted for the reporting period ending March 9, 2018

[-	SPDES ID	
Name of MS4/Coalition	NYR20A07	שון ש
3.b. What types of illicit discharges have	e been found during this reporting period?	ı
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	○ Inflow/Infiltration	
• Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows	
O Illegal Dumping	O Straight Pipe Sewer Discharges	
Other:	O None	
4. How many illicit discharges/potentia reporting period?	ai illegal connections have been detected d	uring this
reporting period:		
5. How many illicit discharges have be	en confirmed during this reporting period	1
period?	onnections have been eliminated during the	is reporting 1 Yes O No
If No, approximately what percent was	s completed in this reporting period?	8
8. Is the above information available in		• Yes O No
Is this information available on the value of the value o	wen:	○ Yes • No
Please provide specific address of page URL	where map(s) can be accessed - not home pa	ige.
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This report is being submitted for the reporting period ending March 9, 2018

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This report is being submitted for the reporting period ending March 9, 2018

		5	PDES ID	
Town of Owe	rego		YR20A079	
2. Evaluating Progress Tov Jse this page to report on you dentified in your Stormwater II.C.I. Submit additional page	ur progress and project plar r Management Program Pla	s toward achieving	measurable g ling requirem	oals ents in Part
A. Briefly summarize the M		in the SWMPP in	ı this reporti	ng period.
The Town of Owego will ins	spect and clean a minimum	280 catch basins pe	er year on a ro	tating basis
B. Briefly summarize the o	bservations that indicated	l the overall effect	iveness of thi	s Measurable
The Town has met this goal.				
C. How many times was thi	is observation measured o	or evaluated in this		eriod?
•			(ex.: sa his reporting	mples/participan
D. Has your MS4 made pro	ogress toward this measu	able goal during t	(ex.: sa his reporting	1 mples/participan g period?
C. How many times was the D. Has your MS4 made pro E. Is your MS4 on schedule F. Briefly summarize the st the next reporting cycle	ogress toward this measur e to meet the deadline set	rable goal during t forth in the SWM ned to meet the go	(ex.: sa his reporting PP?	period? Yes O No

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

SPDES ID

Name of MS4/Coalition VILLAGE OF PORT DICKINSC	N Y R 2 0 A 0 8 0
Minimum Control Measure 3	3. Illicit Discharge Detection and Elimination
The information in this section is being reported	ed (check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed t 	to this report?
1. Enter the number and approx. perce	nt of outfalls mapped: 3 0 # 1 0 0 %
2. How many of these outfalls have been reporting period (outfall reconnaissa	n screened for dry weather discharges during this nce inventory)?
3.a. What types of generating sites/sewers reporting period?	sheds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
Churches	O Metal Plateing Operations
O Commercial Carwashes	 Outdoor Fluid Storage
Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
Distribution Centers	Restaurants
O Food Processing Facilities	Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	Vehicle Fueling
Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	O None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, 2 0 1 8
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 PORT DICKINSO	N				Γ	PDES 1 Y		2	0	A	0	8	0	
3.b. What types of illicit discharges have	been fo	ound dur	ing thi	is rep	orti	ng pe	erio	d?						
O Broken Lines From Sanitary Sewer	O Indus	strial Con	nection	S										
O Cross Connections	O Inflo	w/Infiltrat	ion											
O Failing Septic Systems	O Pump	p Station I	Failure											
O Floor Drains Connected To Storm Sewers	O Sanit	tary Sewei	r Overf	lows										
O Illegal Dumping	O Strai	ght Pipe S	Sewer [Discha	rges									
Other:	● None	e												
4. How many illicit discharges/potentia reporting period?	l illegal	connecti	ions ha	ave b	een (detec	eted	l du	trin	ıg ti	his		0	
5. How many illicit discharges have been confirmed during this reporting period?														
5. How many illicit discharges have been confirmed during this reporting period?6. How many illicit discharges/illegal connections have been eliminated during this reporting period?														
7. Has the storm sewershed mapping be If No, approximately what percent was							od?	?	٠	Ye	s 	0	No &	
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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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 PORT DICKINSON	٧	N	Y R 2 0	A 0 8 0
12. Evaluating Pro	gress Toward Measura	ble Goals MCM 3			
identified in your St	ort on your progress and tormwater Management litional pages as needed.	project plans towa Program Plan (SWN	rd achieving r MPP), includi	neasurable go ng requireme	oals nts in Part
A. Briefly summar	rize the Measurable Go	al identified in the	SWMPP in	this reportin	g period.
ILLICIT DISCHAR weather conditions	RGES FOUND. Measur and identify and elimina	rable goal is to routi ate illicit discharges	nely inspect t if found.	he outfalls du	iring dry
B. Briefly summan	rize the observations th	at indicated the ov	erall effectiv	eness of this	Measurable
	DISCHARGES ARE TA SIBLE. None were found		ORCEMENT	Γ AND ELIM	INATED
C. How many time	es was this observation	measured or evalu	ated in this	reporting pe	riod?
C. How many time	es was this observation				96
D. Has your MS4	made progress toward	this measurable go	oal during th	is reporting	-
E. Is your MS4 on	schedule to meet the d	eadline set forth in	n the SWMP		Yes ○ No
F. Briefly summar the next reporti	rize the stormwater act ing cycle (including an	ivities planned to i implementation sc	meet the goal chedule).	is of this MC	M during
ALL ILLLICIT DIS	ORKS EMPLOYEES W SCHARGES. ual outfall inspections to ue public outreach throu	identify illicit disc	harges especi	ally during di	ry weather

discharges and how they can and should be avoided.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 Union	SPDES ID N Y R 2 0 A 0 5 0
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: 12# 100%
2. How many of these outfalls have been s reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershoreporting period?	eds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	Restaurants
● Food Processing Facilities	O Schools and Universities
 Garbage Truck Washouts 	• Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	O None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, 2 0 1 8 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 Union	N Y R 2 0 A 0 5 0														
	been found during this reporting period?														
Broken Lines From Sanitary Sewer	O Industrial Connections														
O Cross Connections	○ Inflow/Infiltration														
O Failing Septic Systems	O Pump Station Failure														
O Floor Drains Connected To Storm Sewers	Sanitary Sewer Overflows														
• Illegal Dumping	O Straight Pipe Sewer Discharges														
Other: P u m p P r i v a t e	O None S e p t i c s y s t e m s														
4. How many illicit discharges/potentia reporting period?															
5. How many illicit discharges have been confirmed during this reporting period?															
6. How many illicit discharges/illegal coperiod?	connections have been eliminated during this reporting														
7. Has the storm sewershed mapping b If No, approximately what percent was	peen completed in this reporting period? ○ Yes ● No s completed in this reporting period? ② Yes ● No ② Yes ● No ③ Yes ● No ③ Yes ● No ③ Yes ● No ⑤ Yes ● No ⑤ Yes ● No ⑥ Yes ● No Ø Yes ●														
8. Is the above information available in Is this information available on the UTL(s):	web? ○ Yes • No														
	where map(s) can be accessed - not home page.														
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This report is being submitted for the reporting period ending March 9, 2 0 1 8
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

SPDES ID Town of Union
Name of MS4/Coalition Town of Union Name of MS4/Coalition Town of Union
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.
Code enforcement responds to complaints about dumping into stream channels and illegal dumping into storm system. New outfalls are mapped with new development. Stormwater markers have been obtained.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Code enforcement have increased fire safety inspections for businesses and have looked for illegal discharges during inspections. Town participates in CRS program and checks certain choke points in streams periodically. Put in bid documents for lawn cutting that contractor cannot discharge cuttings into street. Previous offenders where not observed to be in violation this year.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/eve D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes • No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Need to install more storm drain markers to make public aware that illegal dumping not permitted.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Town of Vestal	SPDES ID N Y R 2 0 A 0 6 4												
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 to 	his report? 0 0 1												
1. Enter the number and approx. percent	of outfalls mapped: 190# 100%												
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/sewershe reporting period?	eds were targeted for inspection during this												
O Auto Recyclers	O Landscaping (Irrigation)												
 Building Maintenance 	O Marinas												
○ Churches	O Metal Plateing Operations												
O Commercial Carwashes	O Outdoor Fluid Storage												
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance												
O Construction Vehicle Washouts	O Printing												
O Cross-Connections	O Residential Carwashing												
O Distribution Centers	Restaurants												
O Food Processing Facilities	O Schools and Universities												
O Garbage Truck Washouts	O Septic Maintenance												
O Hospitals	O Swimming Pools												
O Improper RV Waste Disposal	Vehicle Fueling												
O Industrial Process Water	Vehicle Maint./Repair Shops												
O Other:	O None												
O Sewersheds:													

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 Vestal	N Y R 2 0 A 0 6 4													
3.b. What types of illicit discharges have	been found during this reporting period?													
Broken Lines From Sanitary Sewer	O Industrial Connections													
O Cross Connections	Inflow/Infiltration													
O Failing Septic Systems	O Pump Station Failure													
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows													
Illegal Dumping	O Straight Pipe Sewer Discharges													
Other: R e p a i r / r e p 1 a c														
4. How many illicit discharges/potentia reporting period?	l illegal connections have been detected during this													
reporting period:	0 1 2													
5. How many illicit discharges have been	en confirmed during this reporting period?													
period? 7. Has the storm sewershed mapping be	onnections have been eliminated during this reporting 0 1 2 een 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 Is this information available on the v If Yes, provide URL(s):														
Please provide specific address of page URL	where map(s) can be accessed - not home page.													
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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SPDES ID

Name of MS4/Coalition Town of Vestal

Name of MS4/Coalition Town of Vestal

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.

Advanced documentation/reporting and enforcement of Fats, Oil and Grease applications through Code Department. Initiated new sanitary manhole/sewer reporting form for sewer department.

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

Improved tracking of sewer issues including private lateral repair/replacement. More awareness of Fats, Oils and Grease for Code Department.

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

1 2

(ex.: samples/participants/events)

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

Yes O No

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

• Yes O No

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

Continue IDDE training program for other Town Departments. Coordinate and improve documentation between highway, water/sewer and engineering departments with respect to our SWMPP.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$ 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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Y|R 2 0 BROOME COUNTY Name of MS4/Coalition 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 1 during this reporting period? 2. How many construction projects disturbing at least one acre were active in your jurisdiction 1 during this reporting period? 3. What percent of active construction sites were inspected during this reporting period? \bigcirc NT

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

5. Do all inspectors working on behalf of the MS4s contributing to this report use the 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?

O Yes

No

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

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2												
6. con't.:													
Submit additional pages as needed.													
MS4/Coalition Office													
Department BROOMECOUNTYDEPT	PUBLIC WORKS												
B R O O M E C O U N T Y D E P T Address													
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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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

BROOME COUNTY

BROOME COUNTY

Name of MS4/Coalition

7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

MEASURABLE GOAL #4A -- To assure that 100% of County Contracts, both with consultants and with contractors include appropriate erosion control language - either requiring design considerations from consultants or construction considerations from contractors. This includes SWPPP's and other environmental permits included in the bid documents as part of the legal contract, and language which allows inspectors to stop work if projects are in non-compliance.

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

The County has adopted a policy of including erosion control language in all contracts bid that involve earth disturbance and the potential for erosion and sedimentation, irregardless of the area disturbed. There were 7 projects under construction during this reporting period. 1 had SWPPP's and 6 did not (based on the area of earth disturbance).

C. Ho	ow many times was this observation measured or evaluated in this reporting period	?	
			7
	(ex.: samples/p	artic	cipants/events)
п ня	as your MS4 made progress toward this measurable goal during this reporting peri	od?	
17. 11.	• Yes	; (⊃ No
E. Is	your MS4 on schedule to meet the deadline set forth in the SWMPP?) No
F. Br	riefly summarize the stormwater activities planned to meet the goals of this MCM denext reporting cycle (including an implementation schedule).	_	
Conti	inue as developed and implemented detailed reporting sheets for all construction work ed 100% this next reporting period.	will	be

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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Name of MS4/Coalition	BROOME COUNTY		N Y R	2 0 A 3 3 2
7. Evaluating Pro	gress Toward Measura	ble Goals MCM 4		
identified in your St	ort on your progress and ormwater Management lational pages as needed.	project plans toward Program Plan (SWM	l achieving measurat PP), including requi	ole goals rements in Part
A. Briefly summar	rize the Measurable Go	al identified in the	SWMPP in this rep	orting period.
contractor with ann	OAL #4B To assure the open and the comment of th	NYSDEC Erosion C	ontrol Certified), tha	it a copy of the
B. Briefly summa Goal.	rize the observations th	at indicated the ove	erall effectiveness of	f this Measurable
Appropriate contract these discussions was projects during this	ct language has been instith contractor's on all ap reporting period).	erted into contract de plicable contracts at	ocuments as necessal the preconstruction	ry. We have had meeting (7
C. How many time	es was this observation	measured or evalu	ated in this reportin	ng period?
				.: samples/participants,
D. Has your MS4	made progress toward	this measurable go	al during this repor	ting period? ● Yes ○ No
	schedule to meet the d			● Yes ○ No
F. Briefly summathe the next report	rize the stormwater act ing cycle (including an	tivities planned to n implementation sc	neet the goals of this hedule).	s MCM during
Continue as develo	ped and implemented - l tificates for all projects	however, assure that with SWPPP's (at a	we get copies of cor minimum).	ntractor's erosion

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition BROOME COUNTY		N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measu	rable Goals MCM 4	
Use this page to report on your progress as identified in your Stormwater Managemer III.C.1. Submit additional pages as needed	it Program Plan (SWMPP	chieving measurable goals P), including requirements in Part
A. Briefly summarize the Measurable (Soal identified in the SW	VMPP in this reporting period.
MEASURABLE GOAL #4C To assure either P.E.'s, CPESC's or trained and cert	that 100% of inspectors of fied in erosion and sedim	on 100% of County projects are nent control.
B. Briefly summarize the observations Goal.	that indicated the overa	ll effectiveness of this Measurable
Notices were sent to all consulting engine County that this would be a County requiengineering staff are NYDEC trained and All inspectors on 2017 construction projection	rement beginning in 2014 certified (or NYS license	4. Additionally, all County DPW ed PE's).
C. How many times was this observation	on measured or evaluate	ed in this reporting period? 7 (ex.: samples/participants/ever
D. Has your MS4 made progress towar	d this measurable goal o	during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the	deadline set forth in th	e SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater a the next reporting cycle (including a	ctivities planned to mee in implementation sched	et the goals of this MCM during dule).
Continue as developed and implemented	- improve reporting / reco	ord keeping for this goal.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 8 \end{vmatrix}$

If submittin	g this form as part of a	Joint report on bena	iii oi a coaiinc		D ID DIAMA.	
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Name of MS4/Coalition	BROOME COUNTY			NIK	2 0 A 3]] [
	gress Toward Measu					
dentified in your St	ort on your progress a ormwater Manageme tional pages as neede	nt Program Plan (S	sward achiev SWMPP), inc	ing measura cluding requ	ble goals irements in	Part
A. Briefly summar	ize the Measurable	Goal identified in	the SWMP	P in this rep	orting per	iod.
and construction ty training for contrac	OAL #4D To have pes of projects for the tors. This includes (are responsible for dire	e County complete at a minimum), Co	the 4-hour e unty Highwa	rosion and se	ediment cor	ntrol
B. Briefly summar Goal.	rize the observations	that indicated th	e overall eff	ectiveness o	f this Meas	surable
management, and b	V staff members are nouldings & grounds confied during this report is NYSDEC training.	onstruction crew). ting period. A tota	Four (4) sta	iff members	were either	e
C. How many time	es was this observati	on measured or e	valuated in		ng period?	4
D. Has your MS4	made progress towa	rd this measurab	le goal durir		rting perio	
E. Is your MS4 on	schedule to meet th	e deadline set for	th in the SW	/MPP?	• Yes	○ No
F. Briefly summar the next report	rize the stormwater ing cycle (including	activities planned an implementatio	to meet the on schedule).	goals of thi	s MCM du	ring
Continue as develo certified, and make	ped and implemented sure that all certified	I make sure that I staff members are	all new staff e renewed eve	members ar ery 3 years a	e trained an s needed.	nd

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition BROOME COUNTY N Y R 2 0 A 3 3 2
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.
MEASURABLE GOAL #4E To track and inspect 100% of County sponsored projects for erosion and sediment control compliance at least once, irregardless of whether the project requires a SWPPP.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
100% of County sponsored projects are/were inspected and tracked during the past reporting period whether they had a SWPPP or not.
C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/evel)
D. Has your MS4 made progress toward this measurable goal during this reporting period?
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • 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 as developed and implemented - improve inspection forms and record keeping.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

_			SPDES ID	
Name of MS4/Coalition BROOM	E COUNTY		N Y R 2	0 A 3 3 2
7. Evaluating Progress T	Toward Measurable G	oals MCM 4		
Use this page to report on yidentified in your Stormwall.C.1. Submit additional	iter Management Progra	ct plans toward achi am Plan (SWMPP),	ieving measurable processing including requirem	goals nents in Part
A. Briefly summarize the	e Measurable Goal ide	entified in the SWM	1PP in this report	ing period.
MEASURABLE GOAL # County related to erosion	4F To log and track and/or sedimentation is	100% of complaints sues, and tracking a	; / reports coming in actions taken and/or	nto the r follow-up.
B. Briefly summarize the	e observations that inc	dicated the overall	effectiveness of th	is Measurable
One call/complaint came notice was given to contra	into the County this yea actor and immediately a	ar relative to work o addressed.	n one DPW projec	t - violation
C. How many times was	this observation meas	sured or evaluated		
>504		maaayyahla gool du		samples/participants/ev
D. Has your MS4 made	progress toward this i	measurable goal du	iring tins reportin	• Yes O No
E. Is your MS4 on sched	lule to meet the deadli	ine set forth in the	SWMPP?	• Yes O No
F. Briefly summarize the the next reporting cy	e stormwater activitie cle (including an impl	s planned to meet (ementation schedu	the goals of this M le).	ICM during
Continue as developed ar include complaints as a c	nd implemented upda heck on inspection form	te program tracking ns from MCM-4E g	for better MS4 recoal.	ords, and

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

		SP)	DES	TD.					
1		N	3,	<u> </u>	_	7	3	2	2
N EMGA/C-alition	BROOME COUNTY	N N	Y	K	 U	A	را	٥	
Name of MS4/Coalition			J	_					

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.

MEASURABLE GOAL #4G -- To utilize the 239 review process for site plan and development review to incorporate consideration of potential water quality impacts and to ensure consistency with erosion and sediment control criteria in general, and potential impacts to County owned properties and infrastructure specifically.

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

188 total 239 reviews were completed by County Planning during this reporting period, and 23 of these were also reviewed by the Engineering Division for potential impacts to County properties and/or infrastructure. 8 (eight) projects with potential storm water related impacts were reviewed as such in this process.

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

_	_					
			1	8	8	
(ex.:	sa	mples/	'parı	tici,	pant	s/events)

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

Yes O No

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

● Yes ○ 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 process is ongoing and well established, and County staff will continue to perform these duties in accordance with the established SWMP goal and review criteria; however, we will look at better definition of how many 239 reviews deal with water quality issues with the development and implementation of a tracking spreadsheet in 2018.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of N		N Y R 2 C) A 0	4 7
<u>Mi</u>	nimum Control Measure 4. Construction Site Stormwa	ater Runoi	<u>ff Cont</u>	<u>rol</u>
The info	rmation in this section is being reported (check one):			
	nalf of an individual MS4 half of a coalition How many MS4s contributed to this report?			
1. How duri	with many construction projects have been authorized for disturbaning this reporting period?	ices of one a	cre or n	nore
2. How	v many construction projects disturbing at least one acre were a ing this reporting period?	ctive in you	r jurisdi	iction
3. Wh	at percent of active construction sites were inspected during this	s reporting p	period?	● NT
4. Wh	at percent of active construction sites were inspected more than	once?		● NT
5. Do Cor	all inspectors working on behalf of the MS4s contributing to thinstruction Stormwater Inspection Manual?	s report use O Yes	the NYS	S • NT
6. Doe (SV	es your MS4/Coalition provide public access to Stormwater Poll VPPPs) of construction projects that are subject to MS4 review a	ution Prevei and approva O Yes	ntion Pla 11? O No	ans NT
	our MS4 is Non-Traditional, are SWPPPs of construction proje plic review?	cts made av	ailable f ● Yes	for O No
If Y	es, use the following page to identify location(s) where SWPPPs ca	n be accesse	d.	

	SPDES ID	
Nan	of MS4/Coalition Tioga County N Y R 2 0 A 0 4 7	
6.	on't.:	
•	Submit additional pages as needed.	
• N	S4/Coalition Office	
	Department	
	Address 5 6 Main Street	
	City	
	O W E G O N Y 1 3 8 2 7 -	
	Phone (6 0 7) 6 8 7 _ 8 2 5 7	
0 1	brary	
	Address	
	City	
	Phone	
	(
0	ther Address	
	City	
	Phone	
0	by Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.	
	URL	
	URL	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

		_	SPDES		77
Name of MS4/Coaliti	Tioga County		N Y	R 2 0 A 0 4	
7. Evaluating P	rogress Toward Mea	asurable Goals MCN	1 4		
identified in your	eport on your progres Stormwater Manager Iditional pages as nee	ment Program Plan (S	ward achieving meast WMPP), including re	arable goals equirements in Pa	art
A. Briefly sumn	narize the Measurab	le Goal identified in	the SWMPP in this	reporting perio	d.
		- Allendaring and a second a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a second and a second and a second and a second and a second and			
B. Briefly sumn Goal.	narize the observatio	ons that indicated the	e overall effectivenes	s of this Measu	rable
C. How many ti	imes was this observ	ation measured or e	valuated in this repo		
				(ex.: samples/part	Oicipants/even
D. Has your MS	S4 made progress to	ward this measurabl	le goal during this re	eporting period? • Yes	O No
E. Is your MS4	on schedule to meet	the deadline set for	th in the SWMPP?		
F. Briefly sumr	narize the stormwat		to meet the goals of		O No ing

		SPI	DES	ID						
Name of MS4/Coalition	City of Binghamton	N	Y	R	2	0	A	3	4	1

	Minimum Control Measure 4. Construction Site Stormwater Runof	<u>f Cont</u>	<u>rol</u>
The	e information in this section is being reported (check one):		
• (() (On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one a during this reporting period?	cre or n	nore 3
2.	How many construction projects disturbing at least one acre were active in your during this reporting period?	r jurisdi	iction 3
3.	What percent of active construction sites were inspected during this reporting p	period?	O NT
4.	What percent of active construction sites were inspected more than once?	1 0	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? • Yes	the NY:	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preven (SWPPPs) of construction projects that are subject to MS4 review and approva • Yes	ntion Pla 1? O No	ans
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?	ailable f ● Yes	for O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	d.	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

SPDES ID

Name of MS4/Coalition City of Binghamton	N Y R 2 0 A 3 4 1
6. con't.:	
Submit additional pages as needed.	
MS4/Coalition Office	
Department Engineering Departm	e n t
Address 3 8 Hawley Street	
City	Zip
Binghamton NY	1 3 9 0 1 -
Phone	
(6 0 7) 7 7 2 - 7 0 0 7	
O Library Address	
Address	
City	Zip
Phone	
() -	
O Other	
Address	
	Zip
City	
Phone	
(
O Web Page URL(s): Please provide specific address where SWPF	PPs can be accessed - not home page.
URL	
URL	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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

	SPDES ID
Name of MS4/Coalition City of Binghamton	N Y R 2 0 A 3 4 1
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed.	l achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
Goals: The city of Binghamton continued reviewing and updating General Permit GP-0-15-003 changes. Continued to review all SWPPP's reviewed. The city stormwater web page includes the public to have access. All construction sites requiring a SWPPP	City of Binghamton SWMP for the
B. Briefly summarize the observations that indicated the ove	erall effectiveness of this Measurable
NYSDEC SWPPP review checklist is utilized for all SWPPP redeveloped SWPPP review practices. Development and associate to the public meetings. The SWPPP's approved are confirmed the assistance of outside companies and periodically inspected by the	by weekly inspection with the
C. How many times was this observation measured or evaluation	ated in this reporting period? [EX.: samples/participants/
D. Has your MS4 made progress toward this measurable go	
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 n the next reporting cycle (including an implementation sci	neet the goals of this MCM during hedule).

SWPPP review and database documentation will continue. Development projects will continue to be presented at public meetings. Inspections of all active projects for SWPPP compliance will continue. Pre-development meetings are held to meet with developers to discuss stormwater issues. Send more employees to SWPPP and illicit discharge classes/seminars.

	SPI	DES	lD						
Town of Binghamton	N	Y	R	2	0	Α	0	0	9
Name of MS4/Coalition	l	<u>. </u>		· · · · · ·			L		L

	Minimum Control Measure 4. Construction Site Stormwater Run	off Cont	<u>trol</u>
The	e information in this section is being reported (check one):		
• C	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 during this reporting period?	acre or 1	more 0
2.	How many construction projects disturbing at least one acre were active in yo during this reporting period?	ur jurisd	iction 0
3.	What percent of active construction sites were inspected during this reporting	period?	● NT
4.	What percent of active construction sites were inspected more than once?		● NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report us Construction Stormwater Inspection Manual?		S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevo (SWPPPs) of construction projects that are subject to MS4 review and approve • Yes	al?	ans
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made a public review?	vailable f O Yes	for O No
	If Vestuse the following page to identify location(s) where SWPPPs can be access	ed.	

Name of MS4/Coalition Town of Binghamton	N Y R 2 0 A 0 0 9
6. con ¹ t.:	
Submit additional pages as needed.	
MS4/Coalition Office	
Department TownofBinghamton	C o d e O f f i c e
Address 2 7 9 Park Avenue	
City Binghamton NY	Zip 1 3 9 0 3 -
Phone	
(6 0 7) 7 7 2 - 0 3 5 7	
O Library Address	
	7in
City	Zip
Phone	
(
O Other	
Address	
City	
N.	
Phone () -	
O Web Page URL(s): Please provide specific address where SWPP	Ps can be accessed - not home page.
URL	
URL	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 Binghamton	N Y R 2 0 A 0 0 9
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
Continue developing procedures for review of SWPPP plans. Utilize NYS Construction Stormwater Inspection Manual for Sit	e Inspections.
B. Briefly summarize the observations that indicated the ove	rall effectiveness of this Measurable
SWPPP procedures ensures thorough review. Manual ensures thorough inspection.	
C. How many times was this observation measured or evalua	
D. Has your MS4 made progress toward this measurable goa	(ex.: samples/participants/event Il 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 m the next reporting cycle (including an implementation sch	eet the goals of this MCM during
Review SWPPP plans in accordance with procedures and inspectmental.	et construction sites according to

This report is being submitted for the reporting period ending March 9, 2 0 1 8

		DES ID	T_ T_ 1	
Name	e of MS4/Coalition Town of Chenengo	Y R 2 C) A 1	2 7
	Minimum Control Measure 4. Construction Site Stormwa	ter Runo	ff Cont	trol
The	information in this section is being reported (check one):			
	n behalf of an individual MS4 n behalf of a coalition How many MS4s contributed to this report?			
	How many construction projects have been authorized for disturband during this reporting period?	ces of one a	cre or r	nore 2
	How many construction projects disturbing at least one acre were ac during this reporting period?	tive in you	r jurisd	iction 2
3.	What percent of active construction sites were inspected during this	reporting p	period?	O NT
4.	What percent of active construction sites were inspected more than o	once?	1 0	O NT
	Do all inspectors working on behalf of the MS4s contributing to this Construction Stormwater Inspection Manual?	report use • Yes	the NY	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollut (SWPPPs) of construction projects that are subject to MS4 review an	tion Prever nd approva • Yes	ition Pla I? O No	ans O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction project public review?	ts made av	ailable f O Yes	or O No
	If Yes, use the following page to identify location(s) where SWPPPs can	be accessed	i .	

SPDES ID	_
Name of MS4/Coalition Town of Chenengo N Y R 2 0 A 1 2 7	
6, con't.:	
Submit additional pages as needed.	
MS4/Coalition Office	
Department B u i l d i n g 0 r d i n c e a n d P l a n i n g	3
Address 1 5 2 9 N Y S R o u t e 1 2	
City B i n g h a m t o n N Y 1 3 9 0 1 -	
Phone	
(6 0 7) 6 4 8 - 4 8 0 9	
○ Library	
Address	
City Zip	
Phone	
O Other	
Address	
City	
Phone	
O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.	
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URL	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

SPDES ID N Y R 2 0 A 3	1 2 7
Name of MS4/Coalition Town of Chenengo N Y R Z U A .	
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 i III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting po	
Continue to to develop and implement spreadsheet checklist of projects reviewed, inspected, a enforcement actions.	and/or
B. Briefly summarize the observations that indicated the overall effectiveness of this Me Goal.	asurable
Inspections ongoing and reviews are conducted and logged . Staff are trained.	
C. How many times was this observation measured or evaluated in this reporting period	l?
	participants/even
D. Has your MS4 made progress toward this measurable goal during this reporting periods. • Yes	iod? es ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Ye	es O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM of the next reporting cycle (including an implementation schedule).	during
Continue training staff on permit updates: continue to review, inspect, and document.	

	SPDES ID	T T T T	$\neg \neg$
Nam	e of MS4/Coalition Town of Conklin N Y R 2	0 A 2	5 5
	Minimum Control Measure 4. Construction Site Stormwater Run	off Cont	<u>rol</u>
The	information in this section is being reported (check one):		
● 0 ○ 0	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 during this reporting period?	e acre or n	nore 3
2.	How many construction projects disturbing at least one acre were active in your during this reporting period?	our jurisdi	iction 3
3.	What percent of active construction sites were inspected during this reporting	g period?	0 NT
4.	What percent of active construction sites were inspected more than once?	1 0	0 NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report u Construction Stormwater Inspection Manual?	se the NY s O No	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prev (SWPPPs) of construction projects that are subject to MS4 review and appro	vair	ans O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made a public review?	available f O Yes	for O No
	If Yes, use the following page to identify location(s) where SWPPPs can be access	sed.	

Name of MS4/Coalition Town of Conklin
6. con't.:
Submit additional pages as needed.
MS4/Coalition Office
Department
T o w n H a 1 1
Address 1 2 7 1 C o n k 1 i n R o a d
City
C o n k l i n N Y 1 3 7 4 8 -
Phone
(6 0 7) 7 7 5 - 3 4 5 6
○ Library
Address
City
Phone
Other
Address
City
City Zip -
Phone
O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.
URL
URL

This report is being submitted for the reporting period ending March 9, 2 0 1 8

SPDES ID	
Name of MS4/Coalition Town of Conklin N Y R 2	0 A 2 5 5
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward achieving measurable identified in your Stormwater Management Program Plan (SWMPP), including require III.C.1. Submit additional pages as needed.	e goals ements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this repo	
Measurable goal is to inventory the number of SWPPP's received and reviewed. Also the number of sites and amount of times they are inspected.	to document
B. Briefly summarize the observations that indicated the overall effectiveness of Goal.	this Measurable
All construction projects with disturbances of one or more acres had an approved SW All active construction projects were inspected multiple times during this reporting pe	PPP in place. eriod.
C. How many times was this observation measured or evaluated in this reporting	g period?
	samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this report	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	• Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this the next reporting cycle (including an implementation schedule).	
Continue to verify that all construction projects disturbing 1 or more acres have an ap in place, have stormwater permit coverage through DEC, and inspect every active coproject at least once a month during construction.	oproved SWPPP onstruction

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part of a joint report on behalf of a coalition leave SFL	
Name of MS4/Coalition TOWN OF DICKINSON N Y R	
Minimum Control Measure 4. Construction Site Stormwater R	unoff 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 during this reporting period?	one acre or more
2. How many construction projects disturbing at least one acre were active in during this reporting period?	your jurisdiction
3. What percent of active construction sites were inspected during this repor	ting period? • NT
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 Construction Stormwater Inspection Manual?	rt use the NYS Yes O No O NT
6. Does your MS4/Coalition provide public access to Stormwater Pollution F (SWPPPs) of construction projects that are subject to MS4 review and ap	Prevention Plans proval? Yes ONo ONT
If your MS4 is Non-Traditional, are SWPPPs of construction projects many	de available for O Yes O No

This report is being submitted for the reporting period ending March 9, 2 0 1 8
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 DICKINSON	N Y R 2 0 A 1 4 3
6. con't.: Submit additional pages as needed.	
O MS4/Coalition Office	
Department	
TOWNHALLL	
5 3 1 O L D F R O N T S T R E E T	
City	Zip
D I C K I N S O N N Y	1 3 9 0 5 -
Phone (6 0 7) 7 2 3 - 5 9 5 4	
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City	Zip
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 DICKINSON

N Y R 2 0 A 1 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.

THERE HAVE BEEN NO SWPPPs RECEIVED. Measurable goal is to inventory the number of SWPPP'S received and reviewed. Also to document the number and amount of times construction projects are inspected.

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

WE ARE PREPARED TO TAKE ACTION WHEN WE RECEIVE A PROJECT.

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

(ex.: samples/participants/events)

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

● Yes ○ No

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

• Yes O No

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

REVIEW ANY SWPPP'S AND MAKE AVAILABLE FOR PUBLIC COMMENT Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place, have stormwater permit coverage through DEC, and inspect every active construction project at least once a month during construction.

	SPDES ID	TaTa		4 0
Name of	MS4/Coalition VILLAGE OF ENDICOTT NY R	2 0	A 1	4 9
<u>M</u>	linimum Control Measure 4. Construction Site Stormwater R	<u>unof</u> i	f Cont	<u>rol</u>
The info	ormation in this section is being reported (check one):			
On be	ehalf of an individual MS4 ehalf of a coalition How many MS4s contributed to this report?			
1. Ho	w many construction projects have been authorized for disturbances of ring this reporting period?	one ac	ere or m	iore
2. Ho	w many construction projects disturbing at least one acre were active in ring this reporting period?	ı your	jurisdi	ction 1
3. WI	hat percent of active construction sites were inspected during this repor	ting p	eriod?	ONT
			1 0	0 %
4. W	hat percent of active construction sites were inspected more than once?		1 0	0 NT
5. Do	o all inspectors working on behalf of the MS4s contributing to this repor onstruction Stormwater Inspection Manual?	t use t Yes	the NYS	S ONT
6. Do	oes your MS4/Coalition provide public access to Stormwater Pollution P WPPPs) of construction projects that are subject to MS4 review and app	provai	1.	
If	your MS4 is Non-Traditional, are SWPPPs of construction projects madablic review?	de ava	O NO	O NT or O No

It adomitting one form of horses and	SPDES ID
Name of MS4/Coalition VILLAGE OF ENDICOTT	N Y R 2 0 A 1 4 9
6. con't.:	
Submit additional pages as needed.	
MS4/Coalition Office	
Department	
E N G I N E E R I N G D E P	A R T M E N T
Address	STREET
	S T R E E T Zip
City ENDICOTT	NY 13760-
Phone	
(6 0 7) 7 5 7 - 2 4 2 5	
○ Library	
Address	
City	Zip
Phone	
(
O Other	
Address	
City	Zip
Phone	
(
O Web Page URL(s): Please provide specific address w	where SWPPPs can be accessed - not home page.
URL	
URL	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

If submittir	ng this form as part of	a joint report on bel	half of a coalition	SPDES ID	D blank.	
Name of MS4/Coalition	VILLAGE OF ENDICOTT		And the second s		0 A 1 4	1 9
	gress Toward Meas					
identified in your S	oort on your progress tormwater Managem itional pages as need	ient Program Plan	toward achievir (SWMPP), incl	ng measurable uding requirer	goals nents in Pa	art
A. Briefly summa	rize the Measurable	e Goal identified	in the SWMPP	in this repor	ting perio	d.
Woidt Engineering	g has worked very clo	osely with the Cor	itractor in contro	olling stormwa	ater runoff	
Goal.	rize the observation					
Woidt Engineering Inspection reports	g and the Contractor to us via e-mail on a	are working toget a monthly basis.	her. Woidt Engi	ineering sends	the SWPF	P
C. How many tin	nes was this observa	ation measured o	r evaluated in t			2 4
D. Has your MS4	4 made progress tov	vard this measur	able goal durin			?
E. Is your MS4 o	on schedule to meet	the deadline set t	forth in the SW	MPP?	Yes	O No
F. Briefly summ the next repor	arize the stormwate rting cycle (includin	er activities planr ng an implementa	ned to meet the tion schedule).	goals of this	MCM dur	ring
The East Franklin	a Street phase of Sky with the Contractor. ' cently working on the	re View Heights ha	as been secured. phase of the pro	Woidt Engine	completes	been . The

If submitting this form as part of a joint report on behan of a court	SPDES ID
Name of MS4/Coalition Town of Fenton	N Y R 2 0 A 0 7 8
Minimum Control Measure 4. Construction Site Sto	rmwater 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 dis during this reporting period?	turbances of one acre or more
2. How many construction projects disturbing at least one acreve during this reporting period?	were active in your jurisdiction
3. What percent of active construction sites were inspected during	ng this reporting period? ONT
4. What percent of active construction sites were inspected more	e than once? ONT
5. Do all inspectors working on behalf of the MS4s contributing Construction Stormwater Inspection Manual?	to this report use the NYS ● Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Stormwate (SWPPPs) of construction projects that are subject to MS4 re	er Pollution Prevention Plans eview and approval? • Yes O No O NT
If your MS4 is Non-Traditional, are SWPPPs of construction public review?	projects made available for • Yes • No
If Yes, use the following page to identify location(s) where SWP	PPs can be accessed.

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part of a joint report on be	chalf of a coalition leave SPDES ID blank.
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lame of MS4/Coalition Tox	wn of Fenton		N Y R 2 0 A 0 7 8
. Evaluating Progre	ess Toward Measurable G	oals MCM 4	
Jse this page to report dentified in your Storn II.C.1. Submit additio	on your progress and proje mwater Management Progra mal pages as needed.	ct plans toward achieving am Plan (SWMPP), inclu	g measurable goals ding requirements in Part
A. Briefly summarize	e the Measurable Goal ide	entified in the SWMPP i	in this reporting period.
Conduct SWPPP Revi Via Planning Bd. info Educate owners and c	iews orm public of ongoing active contractors on the construction	ities on construction proje ion review process	ects
B. Briefly summariz Goal.	e the observations that in	dicated the overall effec	tiveness of this Measurable
Maintenance of ES&C Record Maintenance	C		
	was this observation mea		(ex.: samples/participants/e
D. Has your MS4 m	ade progress toward this	measurable goal during	This reporting period: ● Yes ○ No
	chedule to meet the deadl	ine set forth in the SWN	ΛΡΡ? ● Yes ○ No
F Briefly summariz	ze the stormwater activition	es planned to meet the g	

public review?

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

	SPDES ID
Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
Minimum Control Measure 4. Construction Site Storm	water 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 disturbuling this reporting period?	pances of one acre or more
2. How many construction projects disturbing at least one acre wer during this reporting period?	e active in your jurisdiction
3. What percent of active construction sites were inspected during t	his reporting period? \bigcirc NT $\boxed{1 \ 0 \ 0}$ %
4. What percent of active construction sites were inspected more th	an once? ONT 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 P (SWPPPs) of construction projects that are subject to MS4 revie	ollution Prevention Plans w and approval? • Yes • No • NT
	■ 162 ○ 140 ○ 141

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

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

O Yes O No

This report is being submitted for the reporting period ending March 9, 2 0 1 8If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

Name of MS4/Coalition Village of Johnson City N Y R 2 0 A 1 0 1
6. con't.: Submit additional pages as needed.
MS4/Coalition Office
Department To h n s o n C i t v P u b l i c W o r k s
Address 2 4 3 Main Street
City
Johnson City NY 13790-
Phone (6 0 7) 7 9 7 - 3 0 3 1
O Library Address
City
Phone (
O Other
Address
City Zip
Phone
O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.
URL
URI.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part of a joint report on behalf of a countries SPDES ID
Name of MS4/Coalition Village of Johnson City N Y R 2 0 A 1 0 1
7. Evaluating Progress Toward Measurable Goals MCM 4
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
During this period two projects continued under the previous year's SWPPP, these are the Binghamton University School of Pharmacy project, new building demolition and Redevelopment of 135-139 Baldwin Street.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
The project had weekly SWPPP inspections by a NYS licensed Engineer and was periodically inspected by JCDPW personnel. There were minor corrective actions that were required, all of which were corrected within a short time of the notification.
C. How many times was this observation measured or evaluated in this reporting period? [2] 5 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).
The Village will continue to review projects to determine if SWPPPs are required and continue to require Best Management Practices be implemented on projects not requiring a SWPPP.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MSA/Coolitics Town of Kirkwood	SPDES ID N Y R 2 0 A 0 7 2
Name of MS4/Coalition Town of Kirkwood	
Minimum Control Measure 4. Construction Site Storm	water 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 disturb during this reporting period?	pances of one acre or more
2. How many construction projects disturbing at least one acre were during this reporting period?	e active in your jurisdiction
3. What percent of active construction sites were inspected during the	his reporting period? • NT
4. What percent of active construction sites were inspected more that	n once? • NT
5. Do all inspectors working on behalf of the MS4s contributing to t Construction Stormwater Inspection Manual?	his report use the NYS ● Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Stormwater Po (SWPPPs) of construction projects that are subject to MS4 review	ollution Prevention Plans or and approval? • Yes • No • NT
If your MS4 is Non-Traditional, are SWPPPs of construction propublic review?	jects made available for O Yes O No
If Yes, use the following page to identify location(s) where SWPPPs	can be accessed.

Name of MS4/Coalition Town of Kirkwood N Y R 2 0 A 0 7 6. con¹t.: Submit additional pages as needed. ■ MS4/Coalition Office Department B u i 1 d i n g & C o d e E n f o r c e m e n t Address 4 1 F r a n c i s S t r e e t City Xi r k w o o d N Y 1 3 7 9 5 - Phone (6 0 7) 7 7 5 - 4 3 1 3 City Zip City Zip City Zip City Zip City Zip City Zip City Zip City Zip Phone (
Submit additional pages as needed. ● MS4/Coalition Office Department B u i l d i n g & C o d e E n f o r c e m e n t Address 4 l F r a n c i s S t r e e t City K i r k w o o d Phone (6 0 7) 7 7 5 - 4 3 l 3 O Library Address City Phone (
Department B u i l d i n g & C o d e E n f o r c e m e n t Address 4 l F r a n c i s S t r e e t City K i r k w o o d N Y 1 3 7 9 5 - Phone (6 0 7) 7 7 5 - 4 3 1 3 O Library Address City City Address O Library Address O Cother
B u i l d i n g & C o d e E n f o r c e m e n t Address 4 1 F r a n c i s S t r e e t City K i r k w o o d Phone (6 0 7) 7 7 5 - 4 3 1 3 O Library Address City City Address O Library Address O Other
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This report is being submitted for the reporting period ending March 9, 2 0 1 8

SPDES ID N Y R 2 0 A 0 7 2
Name of MS4/Coalition Town of Kirkwood
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.
Measurable goal is to inventory the number of SWPPP's received and reviewed. Also to document the number of project sites and amount of times they are inspected.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
All construction projects with disturbances of one or more acres had an approved SWPPP in place. All active construction projects were inspected multiple times during this reporting period.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/event) D. Has your MS4 made progress toward this measurable goal during this reporting period?
D. Has your MS4 made progress toward this incasurable goal daring one of the Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place, have stormwater permit coverage through DEC, and inspect every active construction project at least once a month during construction.

This report is being submitted for the reporting period ending March 9, 2018

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 Owego

NYR20A079

	Minimum Control Measure 4. Construction Site Stormwater Runoff Control
The	e information in this section is being reported (check one):
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?
1.	How many construction projects have been authorized for disturbances of one acre or more during this reporting period?
2.	How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?
3.	What percent of active construction sites were inspected during this reporting period? \bigcirc NT $\boxed{100}$ $\boxed{\%}$
4.	What percent of active construction sites were inspected more than once? \bigcirc NT $100\ \boxed{\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPs) of construction projects that are subject to MS4 review and approval? • Yes • No • NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? • Yes • No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

II submitting this form to part of a jet of	SPDES ID		
Name of MS4/Coalition Town of Owego	NYR20A079		
6. con't.: Submit additional pages as needed.			
MS4/Coalition Office			
Department			
Town of Owego Planning & Zoning			
Address 2354 State Route 434			
City Apalachin NY	Zip 1 3 7 3 2 -		
Phone			
(6 0 7) 6 8 7 - 0 1 2 3			
○ Library			
Address			
City	Zip		
	0 -		
Phone			
(0) 0 -			
Other			
Address			
	Zip		
City	0 -		
Phone			
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O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.			
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URL			

This report is being submitted for the reporting period ending March 9, 2018

	SPDES ID
Name of MS4/Coalition Town of Owego	NYR20A079
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward achie identified in your Stormwater Management Program Plan (SWMPP), i III.C.1. Submit additional pages as needed.	eving measurable goals ncluding requirements in Part
A. Briefly summarize the Measurable Goal identified In the SWM	PP in this reporting period.
Amend stormwater ordinance to maintain compliance with new GP-0-	-17-002
B. Briefly summarize the observations that indicated the overall e	ffectiveness of this Measurable
Goal.	
New permit has not yet been adopted.	
C. How many times was this observation measured or evaluated i	n this reporting period?
C. 110W many transfer was transfer to the second se	1
	(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal dur	ring this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the S	
E. 1s your MS4 on schedule to meet the deadline set forth in the S	• Yes O No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedule	he goals of this MCM during
Update the Town of Owego stormwater ordinance to reflect changes it is adopted.	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The	information in this section is being reported (check one):		
● C	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 a during this reporting period?	icre or i	nore 0
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 0
3.	What percent of active construction sites were inspected during this reporting p	period?	● NT
4.	What percent of active construction sites were inspected more than once?		● NT
5	Do all inspectors working on behalf of the MS4s contributing to this report use	the NY	S
٥.	Construction Stormwater Inspection Manual? Yes	O No	O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approved t	H.	
	• res	ONO	ONT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made av public review?	ailable i	for O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	d.	

This report is being submitted for the reporting period ending March 9, 2 0 1 8 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	N Y R 2 0 A 0 8 0
Name of MS4/Coalition VILLAGE OF PORT DICKINSON	N Y R 2 0 A 0 8 0
6. con't.: Submit additional pages as needed.	
O MS4/Coalition Office	
Department	
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	Zip
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O Web Page URL(s): Please provide specific address where SWPPPs can	n be accessed - not home page.
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URL	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition VILLAGE OF PORT DICKINSON	SPDES ID N Y R 2 0 A 0 8 0
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP, III.C.1. Submit additional pages as needed.	nchieving measurable goals P), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
THERE HAVE BEEN NO SWPPPs RECEIVED. Measurable go SWPPP'S received and reviewed. Also to document the number a projects are inspected.	oal is to inventory the number of and amount of times construction
B. Briefly summarize the observations that indicated the overa	all effectiveness of this Measurable
WE ARE PREPARED TO TAKE ACTION WHEN WE RECEIV	/E A PROJECT.
C. How many times was this observation measured or evaluat	ed in this reporting period?
	(ex.: samples/participants/ev
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	he SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	et the goals of this MCM during dule).
REVIEW ANY SWPPP'S AND MAKE AVAILABLE FOR PUE Continue to verify that all construction projects disturbing 1 or min place, have stormwater permit coverage through DEC, and insproject at least once a month during construction.	ore acres have an approved SWPPP

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Nar	SPDES ID N Y R 2 0 A 0 5 0
	Minimum Control Measure 4. Construction Site Stormwater Runoff Control
The	e information in this section is being reported (check one):
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?
1.	How many construction projects have been authorized for disturbances of one acre or more during this reporting period?
2.	How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?
3.	What percent of active construction sites were inspected during this reporting period? \bigcirc NT $\boxed{100}$ %
4.	What percent of active construction sites were inspected more than once? ONT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? • Yes O No O 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 O No O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? O Yes O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Evaluating Progress Toward Measurable Goals MCM 4 se this page to report on your progress and project plans toward achieving measurable goals dentified in your Stormwater Management Program Plan (SWMPP), including requirements in Part I.C.1. Submit additional pages as needed. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. There were 2 SWPPP's started in this reporting period. Both are closed. The Air Force Plant #59 SWPPP was closed this period. Briefly summarize the observations that indicated the overall effectiveness of this Measurable	Name of MS4/Coalition Town of Union		NYR20A	0 5 0
see this page to report on your progress and project plans toward achieving measurable goals lentified in your Stormwater Management Program Plan (SWMPP), including requirements in Part L.C.1. Submit additional pages as needed. 3. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. There were 2 SWPPP's started in this reporting period. Both are closed. The Air Force Plant #59 SWPPP was closed this period. 3. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. 4. Inspection reports are reviewed weekly, repeat problems are addressed with developer. Computer tracking used for SWPPP. Sites inspected more than once. Complaints investigated. 5. How many times was this observation measured or evaluated in this reporting period? 6. (ex.: samplear/participants/even) 7. Oh. Has your MS4 made progress toward this measurable goal during this reporting period? 8. Yes O No 8. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? 8. O No 9. Yes O No 9. Yes O No 9. F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on	ame of M34/Countries			
lentified in your Stormwater Management Program Plan (WWMP) in this reporting period. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. There were 2 SWPPP's started in this reporting period. Both are closed. The Air Force Plant #59 SWPPP was closed this period. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. Inspection reports are reviewed weekly, repeat problems are addressed with developer. Computer tracking used for SWPPP. Sites inspected more than once. Complaints investigated. C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/particlpants/even Per O No E. Is your MS4 made progress toward this measurable goal during this reporting period? Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on				
There were 2 SWPPP's started in this reporting period. Both are closed. The Air Force Plant #59 By By By Was closed this period. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. Inspection reports are reviewed weekly, repeat problems are addressed with developer. Computer tracking used for SWPPP. Sites inspected more than once. Complaints investigated. C. How many times was this observation measured or evaluated in this reporting period? O. Has your MS4 made progress toward this measurable goal during this reporting period? O. Has your MS4 on schedule to meet the deadline set forth in the SWMPP? F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on	dentified in your Stormwater Managemer II.C.1. Submit additional pages as needed	d.	,,	
There were 2 SWPPP's started in this reporting period. Both are closed. The Air Force Plant #59 By By By Was closed this period. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. Inspection reports are reviewed weekly, repeat problems are addressed with developer. Computer tracking used for SWPPP. Sites inspected more than once. Complaints investigated. C. How many times was this observation measured or evaluated in this reporting period? O. Has your MS4 made progress toward this measurable goal during this reporting period? O. Has your MS4 on schedule to meet the deadline set forth in the SWMPP? F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on	A. Briefly summarize the Measurable (Goal identified in the SW	VMPP in this reporting p	eriod.
Anspection reports are reviewed weekly, repeat problems are addressed with developer. Computer tracking used for SWPPP. Sites inspected more than once. Complaints investigated. C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/even) D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on	There were 2 SWPPP's started in this rep SWPPP was closed this period.	orting period. Both are cl	losed. The Air Force Plan	t #59
C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/particlpants/even) D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on	Goal.			
D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on	Inspection reports are reviewed weekly, tracking used for SWPPP. Sites inspecte	repeat problems are addre ed more than once. Comp	essed with developer. Con laints investigated.	aputer
D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on	C. How many times was this observat	ion measured or evaluate	<u> </u> _	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on		and this measurable goal		
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Staff received training on inspection procedures. Promote contractor training availability on				Yes O No
Staff received training on inspection procedures. Promote contractor training availability on				
Staff received training on inspection procedures. Promote contractor training availability on	the next reporting cycle (including	an implementation sens		
	Staff received training on inspection pro	ocedures. Promote contra	ctor training availability o	n

This report is being submitted for the reporting period ending March 9, 2 0 1 8 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	S	LNGS	עני					
Name of MS4/Coalition Town of Union			R	2 0	Α	0	5	0
6. con't.:								
Submit additional pages as needed.								
MS4/Coalition Office								
Department Color of the Color o	111	Т	Т		T	T		
Code Enforcement					<u></u>			
3 1 1 1 E Main Street			П		Τ			
City	Zip		1 1	'				
E n d w e 1 1 N Y	1	3 7	6	0 -				
Phone (6 0 7) 7 8 6 - 2 9 2 0								
O Library								
Address		- 			т	т т		
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City	Zip]-				
Phone								
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Other Other								
Address					1	П	т	
City	Zip							
	Zip]_		П		
Phone	<u> </u>	-, -		_				
O Web Page URL(s): Please provide specific address where SWPPPs	can be ac	esse	d - no	t ho	me j	pag€).	
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			<u>. </u>					
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URL								
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MCM 4 Page 2 of 3

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submittir	ng this form as part of a joint report on	behalf of a coalition	leav	ve S	PD	ES	ΙD	olan	k.		
			SPI	DES	ID			<u>1</u>			
	Town of Vestal		N	Y	R	2	0	A	0	6	4
Name of MS4/Coalition	TOWN OF YESTER		1	.1	<u></u>						
											_

	Minimum Control Measure 4. Construction Site Stormwater Runof	f Conti	<u>rol</u>
The	information in this section is being reported (check one):		
OtOt	h behalf of an individual MS4 h behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one a during this reporting period?	cre or m	ore 3
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisdi	ction 8
3.	What percent of active construction sites were inspected during this reporting [period?	
4.	What percent of active construction sites were inspected more than once?	1 0	0 NT 0 %
_	Do all inspectors working on behalf of the MS4s contributing to this report use	the NY	S
	Construction Stormwater Inspection Manual?	O No	O NI
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approved the subject to MS4	ntion Pla al?	
			O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made av public review?	ailable 1 O Yes	or O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	ed.	

This report is being submitted for the reporting period ending March 9, 2 0 1 8 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	If Submitting this form as part of a joint special	SPDES ID
ъ1 -	me of MS4/Coalition Town of Vestal	N Y R 2 0 A 0 6 4
Nan	me of 19194/Coanthori	
6.	con't.:	
	Submit additional pages as needed.	
• 1	MS4/Coalition Office	
	Department Town of Vestal Engin	eering Dept
	Address 1 3 3 F r o n t S t r e e t	
	City	Zip
	Vestal NY	1 3 8 5 0 -
	Phone (607) 786 - 0980	
0	Library	
	Address	
	City	Zip
		-
	Phone	
	() -	
0	Other	
	Address	
		Zip
	City	-
	Phone	
\circ	Web Page URL(s): Please provide specific address where SWPPPs	can be accessed - not home page.
O	URL	
	URL	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part of a joint report on behalf of a coalit	tion leave SPDES ID blank.	
H Shouthting was a second of	SPDES ID	
The World	N Y R 2 0 A 0 6	4
Name of MS4/Coalition Town of Vestal		

7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

All development and construction sites that required SWPPP were reviewed and approved through engineering department. All other development plans were reviewed for BMP's with respect to erosion and sediment controls during construction.

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

All SWPPP projects had weekly reports by a qualified SWPPP inspection and signed off on by a Licensed NYS Professional Engineer submitted to the Town Engineer. The Town Engineer and/or engineering staff visited each site periodically and discussed minor corrective actions with site representatives if repetitive reporting without corrective action was noted on the submitted SWPPP inspection reports.

~	How many	times	was this observation	measured	or evaluated	in this reporting	period?
C.	HUW Many	unics	THE CHIE OFFICE				

(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 O No

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

Continue reviewing SWPPP as development and construction projects dictate. Monitor during construction for conformance to SWPPP and follow up with corrective actions should SWPPP inspections report repetitive issues that are not being effectively addressed. Coordinate with code on building/housing projects, logging permits, and any other projects that may need crosion and sediment controls.

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix} \begin{bmatrix} 1 & 8 \end{bmatrix}$

	SPDES ID		
Naı	me of MS4/Coalition BROOME COUNTY N Y R 2	0 A :	3 3 2
	Minimum Control Measures 4 and 5.		
	Construction Site and Post-Construction Control		
Th	ne 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	a. Has each MS4 contributing to this report adopted a law, ordinance or other remechanism that provides equivalent protection to the NYS SPDES General Per	mit for	r
	Stormwater Discharges from Construction Activities?	• Yes	O No
1b	o. Has each Town, City and/or Village contributing to this report documented the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSDE Analysis Workbook?	Erosio	n and
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La 09/2004 00	aw. 03/2006	• NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have reviewed in this reporting period?	ve been	
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of procomments related to construction SWPPPs? • Yes	ublic O No	O 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 SWPPP process?	the loc • Yes	

Notices of Violation	#	***************************************	1	O No Authority
O Stop Work Orders	#		0	O No Authority
O Criminal Actions	#			No Authority
O Termination of Contracts	#		0	O No Authority
O Administrative Fines	#			No Authority
O Civil Penalties	#	100		No Authority
O Administrative Orders	#			No Authority
O Enforcement Actions or Sanctions	#		0	
Other	#	***************************************		O No Authority

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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

			SPL	ノヒン	ID				_		
Name of MS4/Coalition	Tioga County		N	Y	R	2	0	A	0	4	7
'		•									

Minimum Control Measures 4 and 5

	Construction Site and Post-Construction Control		
Th	ne 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	a. Has each MS4 contributing to this report adopted a law, ordinance or other re mechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?		, O No
	Stormwater Discharges from Construction Activities:	O Tes	O NO
1 b	o. Has each Town, City and/or Village contributing to this report documented the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney certification or using the NYSDE Analysis Workbook? O Yes	Erosion C Gap O No	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local	aw. 03/2006	• NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) ha reviewed in this reporting period?	ve been	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of p comments related to construction SWPPPs? • Yes	ublic ○ No	O 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 SWPPP process?	t the loca Yes	al O No

O Notices of Violation	#	•	No Authority
O Stop Work Orders	#	•	No Authority
O Criminal Actions	#		No Authority
O Termination of Contracts	#	•	No Authority
O Administrative Fines	#	•	No Authority
O Civil Penalties	#	•	No Authority
O Administrative Orders	#	•	No Authority
O Enforcement Actions or Sanctions	#		
O Other	#	•	No Authority

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDE: N Y City of Binghamton	T	0 A 3	4 1
Nai	me of MS4/Coalition City of Bingmanton			
	Minimum Control Measures 4 and 5.			
	Construction Site and Post-Construction Contr	<u>ʻol</u>		
Th	e information in this section is being reported (check one):			
	On behalf of an individual MS4 On behalf of a coalition			
	How many MS4s contributed to this report?			
1a	. Has each MS4 contributing to this report adopted a law, ordinance or o mechanism that provides equivalent protection to the NYS SPDES Gene			7
	Stormwater Discharges from Construction Activities?	71 AT 1 C	• Yes	O No
1b	o. Has each Town, City and/or Village contributing to this report document equivalent to a NYSDEC Sample Local Law for Stormwater Manageme Sediment Control through either an attorney cerfification or using the Manalysis Workbook?	ent and	l Erosior EC Gap	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample I O 09/200		.aw. 03/2006	• NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?		Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPF reviewed in this reporting period?	'Ps) ha	ive been	3
4.	Does your MS4/Coalition have a mechanism for receipt and consideration comments related to construction SWPPPs?	on of p ● Yes	ublic O No	O NT
	If Yes, how many public comments were received during this reporting period	od?		0
5.	Does your MS4/Coalition provide education and training for contractors SWPPP process?	s abou	t the loca	

Notices of Violation	#		0	O No Authority
• Stop Work Orders	#		0	O No Authority
O Criminal Actions	#		 	No Authority
Termination of Contracts	#		0	O No Authority
O Administrative Fines	#			No Authority
O Civil Penalties	#			No Authority
O Administrative Orders	#			No Authority
• Enforcement Actions or Sanctions	#		0	
O Other	#			O No Authority

SWPPP process?

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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

Nan	me of MS4/Coalition Town of Binghamton SPDES ID N Y R 2 0 A 0	0 9					
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	1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for						
	Stormwater Discharges from Construction Activities? • Yes	O No					
1b	.Has each Town, City and/or Village contributing to this report documented that the la equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney certification or using the NYSDEC Gap						
	Analysis Workbook? • Yes • No	ONT					
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. ○ 09/2004 ● 03/2006	O NT					
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	O No					
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	0					
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No	ONT					
	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

◆ Yes ○ No

Notices of Violation	#	0	O No Authority
Stop Work Orders	#	0	O No Authority
Criminal Actions	#	0	O No Authority
O Termination of Contracts	#		No Authority
O Administrative Fines	#		No Authority
© Civil Penalties	#	0	O No Authority
O Administrative Orders	#		O No Authority
O Enforcement Actions or Sanctions	#		
O Other	#		No Authority

SWPPP process?

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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 Chenengo	SPDES ID N Y R 2	2 0 A 1 2 7				
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 corequivalent to a NYSDEC Sample Local Sediment Control through either an att Analysis Workbook?	Law for Stormwater Management an	nd Erosion and DEC Gap				
If Yes, Towns, Cities and Villages provide	- · · · · · · · · · · · · · · · · · · ·	Law. 0 03/2006 ONT				
2. Does your MS4/Coalition have a SWPP	P review procedure in place?	• Yes O No				
3. How many Construction Stormwater P reviewed in this reporting period?	ollution Prevention Plans (SWPPPs) March 10, 2017-March 9, 2018	have been				
4. Does your MS4/Coalition have a mecha comments related to construction SWP.						
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

● Yes ○ No

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

Notices of Violation	#			0	O No Authority
Stop Work Orders	#			0	O No Authority
O Criminal Actions	#				O No Authority
O Termination of Contracts	#				O No Authority
O Administrative Fines	#				O No Authority
O Civil Penalties	#				O No Authority
O Administrative Orders	#				O No Authority
O Enforcement Actions or Sanctions	#				
O Other	#				O No Authority

SWPPP process?

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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

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Nam	SPDES ID Town of Conklin Town of Conklin N Y R 2 0 A 2 5 5											
Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control												
The	e information in this section is being reported (check one):											
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?											
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 cerfification 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?											
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											

● Yes ○ No

Notices of Violation	#	0	O No Authority
Stop Work Orders	#	0	O No Authority
Criminal Actions	#	0	O No Authority
O Termination of Contracts	#		No Authority
O Administrative Fines	#		No Authority
O Civil Penalties	#		No Authority
O Administrative Orders	#		No Authority
O Enforcement Actions or Sanctions	#		
Other	#		No Authority

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

	SPI	DES	ID						
Name of MS4/Coalition TOWN OF DICKINSON	N	Y	R	2	0	А	1	4	3

Minimum Control Measures 4 and 5

	Construction Site and Post-Construction Control	
Th	ne 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 a	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?	No
1 b	o. 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 • No	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. ○ 09/2004 ● 03/2006 ○ N	
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes • 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 • No • No • No • No • No • No • N	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 • Yes	No

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

Notices of Violation	#		3	O No Authority
O Stop Work Orders	#			O No Authority
O Criminal Actions	#			O No Authority
O Termination of Contracts	#			O No Authority
O Administrative Fines	#			O No Authority
O Civil Penalties	#			O No Authority
O Administrative Orders	#			O No Authority
O Enforcement Actions or Sanctions	#			
O Other	#			O No Authority

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPI	<u> DES</u>	<u>ui:</u>						
Name of MS4/Coalition VILLAGE OF ENDICOTT	И	Y	R	2	0	A	1	4	9

	Minimum Control Measures 4 and 5.	
	Construction Site and Post-Construction Control	
Th	e information in this section is being reported (check one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
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?	O No
1 b	o. Has each Town, City and/or Village contributing to this report documented that the law equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?	
	Analysis Workbook? • Yes • No	O IVI
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. © 09/2004 © 03/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? O Yes No	O 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 loca SWPPP process? • Yes	al O No

O Notices of Violation	#			0	O No Authority
O Stop Work Orders	#			0	O No Authority
O Criminal Actions	#			0	O No Authority
O Termination of Contracts	#			0	O No Authority
O Administrative Fines	#			0	O No Authority
O Civil Penalties	#			0	O No Authority
O Administrative Orders	#			0	O No Authority
O Enforcement Actions or Sanctions	#			0	
O Other	#		**********	0	O No Authority

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPL	DES	ID						
Name of MS4/Coalition Town of Fenton	N	Y	R	2	0	Α	0	'	8
Traille of Mist, Countries			•						

	Minimum Control Measures 4 and 5.	
	Construction Site and Post-Construction Control	
	e information in this section is being reported (check one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
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?	O No
1b	.Has each Town, City and/or Village contributing to this report documented that the lav equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney cerfification or using the NYSDEC Gap	and
	Analysis Workbook? • O No	ONT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. ○ 09/2004 ● 03/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	3
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No	ONT
	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 loca SWPPP process? • Yes	ıl O No

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

O Notices of Violation	#			0	O No Authority
O Stop Work Orders	#			0	O No Authority
O Criminal Actions	#			0	O No Authority
O Termination of Contracts	#			0	O No Authority
O Administrative Fines	#			0	O No Authority
O Civil Penalties	#			0	O No Authority
O Administrative Orders	#			0	O No Authority
O Enforcement Actions or Sanctions	#			0	
O Other	#		0	0	O No Authority

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 8 \end{vmatrix}$

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

			SPI	DES	ID.						
Name of MS4/Coalition	Village of Johnson City		N	Y	R	2	0	Α	1	0	1
•											

Minimum Control Measures 4 and 5.

	Construction Site and Post-Construction Control	
The	e information in this section is being reported (check one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
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?	О
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 cerfification or using the NYSDEC Gap Analysis Workbook? • Yes • No • N	Т
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. ○ 09/2004 ● 03/2006 ○ N	Т
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes ON	o
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No • N	Т
	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 ○ N	ĺο

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:

O Notices of Violation	#		0	O No Authority
O Stop Work Orders	#		0	O No Authority
O Criminal Actions	#		0	O No Authority
O Termination of Contracts	#		0	O No Authority
O Administrative Fines	#		0	O No Authority
O Civil Penalties	#		0	O No Authority
O Administrative Orders	#		0	O No Authority
O Enforcement Actions or Sanctions	#		0	
Other	#		0	O No Authority

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$ 1 $\begin{vmatrix} 8 & 1 \end{vmatrix}$

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Γ		- ·-			_	_	_		-	_
	Town of Kirkwood	N	Y	R	2	U	A	ן טן	7	, 4
Name of MS4/Coalition		Щ.	L	L		1				

	Minimum Control Measures 4 and 5.	
	Construction Site and Post-Construction Control	
The	e information in this section is being reported (check one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
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?	O No
1b	.Has each Town, City and/or Village contributing to this report documented that the law equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney cerfification or using the NYSDEC Gap	is and
	Analysis Workbook? • Yes • No	ОИТ
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. © 09/2004 © 03/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No	O 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 loca SWPPP process? • Yes	l O No

Notices of Violation	#			0	0	No Authority
Stop Work Orders	#			0	0	No Authority
Criminal Actions	#			0	0	No Authority
O Termination of Contracts	#				•	No Authority
O Administrative Fines	#					No Authority
Civil Penalties	#			0	0	No Authority
O Administrative Orders	#				•	No Authority
O Enforcement Actions or Sanctions	#					
O Other	#					No Authority

This report is being submitted for the reporting period ending March 9, 2018

	control in
Nar	ne of MS4/Coalition Town of Owego NYR20A079
	Minimum Control Measures 4 and 5.
	Construction Site and Post-Construction Control
The	e information in this section is being reported (check one):
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?
1a	.Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?
1b	.Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook? If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 09/2004 • 03/2006 • NT
2.	O9/2004 • 03/2006 ONT Does your MS4/Coalition have a SWPPP review procedure in place? • Yes ONo
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No • NT
	If Yes, how many public comments were received during this reporting period?
5.	Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? • Yes • No

O Notices of Violation	#	O No Authority
O Stop Work Orders	#	O No Authority
O Criminal Actions	#	O No Authority
O Termination of Contracts	#	O No Authority
O Administrative Fines	#	O No Authority
O Civil Penalties	#	O No Authority
O Administrative Orders	#	O No Authority
O Enforcement Actions or Sanctions	#	
Other	#	O No Authority

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix} 1 \mid 8$

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

		SPI	DES	ID						
Name of MS4/Coalition	VILLAGE OF PORT DICKINSON	N	Y	R	2	0	Α	0	١٠	0

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

	Construction Site and Post-Construction Control		
Th	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a	. Has each MS4 contributing to this report adopted a law, ordinance or other required mechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?	gulatory mit for • Yes	O No
1b	Has each Town, City and/or Village contributing to this report documented the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSDE Analysis Workbook?	Erosion	w is and ONT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La O 09/2004	aw. 03/2006	ONT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have reviewed in this reporting period?	ve been	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of procomments related to construction SWPPPs? • Yes	ublic O No	ONT
	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 SWPPP process?	t the loca Yes	al O No

O Notices of Violation	#		<u> </u>		O No Authority
O Stop Work Orders	#				O No Authority
O Criminal Actions	#				O No Authority
O Termination of Contracts	#				O No Authority
O Administrative Fines	#				O No Authority
O Civil Penalties	#				O No Authority
O Administrative Orders	#				O No Authority
O Enforcement Actions or Sanctions	#				
O Other	#				O No Authority

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

		_	SPI	ES ID					
Na	me of MS4/Coalition Town of Union		N	YR	2	0 A	0	5	0
	Minimum Control Measures Construction Site and Post-Constru		_	itrol					
Th	e information in this section is being reported (check one):								
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?								
1 a	h. Has each MS4 contributing to this report adopted a law, on mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?						for	01	Νo
115	o. Has each Town, City and/or Village contributing to this re equivalent to a NYSDEC Sample Local Law for Stormwa Sediment Control through either an attorney cerfification Analysis Workbook?	ter Man	agei	nent :	and DE	Eros	sion ap		đ
	If Yes, Towns, Cities and Villages provide date of equivalent		_	e Loca 004		aw. 03/200	06	1 🗨	٧T
2.	Does your MS4/Coalition have a SWPPP review procedur	e in pla	ce?			Y	es	01	No
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	ı Plans (SW	PPPs)) ha	ve be	en		2
4.	Does your MS4/Coalition have a mechanism for receipt an comments related to construction SWPPPs?	id consid	dera	tion o	_	ablic O N		01	Υľ
	If Yes, how many public comments were received during this	reporting	g pe	riod?					2
5.	Does your MS4/Coalition provide education and training s SWPPP process?	for conti	ract	ors ab	out	the • Y		l 01	No

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:
do not have authority:

O Notices of Violation	#		O No Authority
Stop Work Orders	#	1	O No Authority
O Criminal Actions	#		O No Authority
O Termination of Contracts	#		O No Authority
Administrative Fines	#		No Authority
O Civil Penalties	#		O No Authority
O Administrative Orders	#		O No Authority
O Enforcement Actions or Sanctions	#		
	#		O No Authority
O Other		L	1

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID N Y R 2 0 A 0 6 4 Name of MS4/Coalition Town of Vestal

	Minimum Control Measures 4 and 5.		
	Construction Site and Post-Construction Control		
The	information in this section is being reported (check one):		
• 0 0 0	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
	Has each MS4 contributing to this report adopted a law, ordinance or other regumechanism that provides equivalent protection to the NYS SPDES General Pern Stormwater Discharges from Construction Activities?	llatory nit for Yes	O No
1b.	.Has each Town, City and/or Village contributing to this report documented that equivalent to a NYSDEC Sample Local Law for Stormwater Management and E Sediment Control through either an attorney cerfification or using the NYSDEC Analysis Workbook?	LOSIOI	w is and ONT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Lav 0 09/2004 • 03	v. /2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have reviewed in this reporting period?	e been	8
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of pu comments related to construction SWPPPs? See Yes	blic O No	O 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 SWPPP process?	the loc • Yes	eal O No

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

O Notices of Violation	#			0	No Authority
O Stop Work Orders	#			0	O No Authority
O Criminal Actions	#			0	O No Authority
O Termination of Contracts	#			0	O No Authority
O Administrative Fines	#			0	O No Authority
O Civil Penalties	#			0	O No Authority
Administrative Orders	#			1	O No Authority
O Enforcement Actions or Sanctions	#			0	
O Other	#			0	O No Authority

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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

II Subilituing	guns form as par	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		SPDES ID	
Name of MS4/Coalition	BROOME COUNTY			N Y R	2 0 A 3 3 2
<u>Minimum C</u>	Control Meas	sure 5. Post-	<u>Constructio</u>	n Stormwater N	<u> Ianagement</u>
 The information in this ● On behalf of an indi ○ On behalf of a coali How many 1. How many and w MS4/Coalition in 	vidual MS4 tion my MS4s contr	ibuted to this r	eport?	1 Inagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
 Alternative Practice Filter Systems Infiltration Basins Open Channels Ponds Wetlands Other Do you use an engage of the system of the povelopment/B 	electronic tool ons and maint	anance? practices hav	e been used to	implement Low 1	• res O No
O Building Codes	• Municipal (Comprehensive I	Plans		
Overlay Districts	Open Space	Preservation Pr	rogram		
○ Zoning	O Local Law	or Ordinance			
O None	O Land Use R	Regulation/Zonin	ıg		
Watershed Plans	Other Comp	orehensive Plan			
• Othor:					

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PLAN

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Nam	ne of MS4/Coalition BROOME COUNTY N Y		0 A 3	3 2
4a.	Are the MS4s contributing to this report involved in a regional/watershed wid	le plann	ing effor ● Yes	t? ○ No
4b.	Does the MS4 have a banking and credit system for stormwater management	practice	es? ○ Yes	• No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a proto and approval of banking and credit of alternative siting of a stormwater man	col for e agemen	evaluation t practice O Yes	•
4d.	. How many stormwater management practices have been implemented as par reporting period?	t of this	system i	o this
5.	What percent of municipal officials/MS4 staff responsible for program imple training on Low Impace Development (LID), Better Site Design (BSD) and of Infrastructure principles in this reporting period?	mentati ther Gre	on attenden	led 5 %

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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

BROOME COUNTY

BROOME COUNTY

R 2 0 A 3 3 2

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.

MEASURABLE GOAL #5A -- To develop and maintain an INVENTORY of 100% of the County's Post-Construction Stormwater Management Practices including location, inspection records and responsible departments / staff.

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

This measure has been met with existing measures, and new practices will be added as constructed. During the 2017-2018 no new post-construction measures were added into the County's inventory.

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

(ex.: samples/participants/events)

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

Yes ○ 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).

During the next reporting period activities to meet this goal include adding any new measures to the inventory that may be constructed during each reporting year. Currently no new measures are anticipated in the 2018-2019 reporting period.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

SPDES	SID
Name of MS4/Coalition BROOME COUNTY N Y	R 2 0 A 3 3 2
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achieving mean identified in your Stormwater Management Program Plan (SWMPP), including III.C.1. Submit additional pages as needed.	surable goals requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	s reporting period.
MEASURABLE GOAL #5B To INSEPCT 100% of the County's Post-Const Management Practices annually.	ruction Stormwater
B. Briefly summarize the observations that indicated the overall effectivene Goal.	ess of this Measurable
100% of the County's Post-Construction Stormwater Management Practices v this reporting period.	were inspected during
C. How many times was this observation measured or evaluated in this rep	porting period? [6x.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this i	reporting period? • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	● 162 ○ 140
F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).	of this MCM during
Continue inspections as established and for any new measures added.	2

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submittin	g this form as part of a joint report on behalf of a coalitic	n lea	ve S	SPD	E2	עו	biai	nĸ.		
	-	SPI	DES	ID						
Name of MS4/Coalition	BROOME COUNTY	N	Y	R	2	0	Α	3	3	2
Name of MS4/Coalition		ļ.,			, <u>.</u>					

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.

MEASURABLE GOAL #5C -- To MAINTAIN 100% of the County's Post-Construction Stormwater Management Practices annually - in accordance with established O&M guidelines.

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

100% of the County's Post-Construction Stormwater Management Practices were maintained in accordance with the O&M guidelines during this reporting period.

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

(ex.: samples/participants/events)

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

Yes O No

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

● Yes ○ 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 maintenance as established and for any new measures added.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 BROOME COUNTY

Name of MS4/Coalition BROOME COUNTY

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.

MEASURABLE GOAL #5D -- To TRAIN 100% of the County staff responsible for inspection and O&M of the County's Post-Construction Stormwater Management Practices, with respect to inspections, record keeping, operation, and maintenance (including good housekeeping measures).

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

Staff training was started in 2016 (2 people trained), but goal has not been 100% achieved, and was not progressed as planned during the past reporting period. We want to train additional staff in these areas to make sure that there is coverage beyond just managers.

C.	How many time	s was this observatio	ı measured or	· evaluated in	this reporting	period?
•	MICH INTEGERY COLORS	W 11				

(ex.: samples/participants/events)

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

O Yes ● No

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

• Yes O No

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

Although existing staff is providing these functions currently, this goal is to formalize the processes described in goals 5A, 5B, and 5C and then to make sure that all staff functioning in these roles (and their support staff) are trained to follow the same (and correct) procedures. It is a priority in 2018-2019 to get this goal completed and functioning in accordance with adopted good-housekeeping documents.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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	Tioga County			N Y R	2 0 A 0 4	/
Minimum (Control Mea	asure 5. Post	-Constructio	n Stormwater M	<u>[anagement</u>	<u>t</u>
1 How many and y	lividual MS4 ition any MS4s con	tributed to this	report?	inagement practices	has your	
MS4/Coalition in	iventoried, ins	pected and mair	ntained in this r	eporting period:		
		# Inventoried	# Inspections	# Times Maintained		
O Alternative Practic	es					
O Filter Systems						
O Infiltration Basins						
O Open Channels						
○ Ponds						
O Wetlands						
○ Other						
BMPs, inspect	ions and main	tanance?		sheet) to track post-	O Yes	0 No
3. What types of Development/I	non-structura Better Site Des	ll practices hav sign/Green Inf	ve been used to rastructure pr	implement Low In inciples?	npact	
O Building Codes	O Municipal	Comprehensive 1	Plans			
Overlay Districts	Open Space	e Preservation Pr	rogram			
O Zoning	O Local Law	or Ordinance				
○ None	O Land Use	Regulation/Zonir	ıg			
Watershed Plans	O Other Com	prehensive Plan				
Other:						

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	-				SPDES ID	OAO	4 7
Nam	ne of MS4/Coalition	Broome-Tioga Stormwate	er Coalition		N Y R 2	2 0 A 0	4 /
4a.	Are the MS4s co	ntributing to this	report involved i	n a regional/w	vatershed wide plar	nning effort • Yes	? O No
4h	Does the MS4 ha	ve a banking and	credit system for	r stormwater i	management pract	ices?	
70.	Does the hip in					O Yes	No
4c.	Do the SWMP P and approval of	lans for each MS4 banking and cred	contributing to it of alternative s	this report inc siting of a stor	clude a protocol for mwater manageme	evaluation ent practice Yes	? • No
44	Uow many starn	nwater managemi	ent practices hav	e been implen	nented as part of th	is system in	this
4u.	reporting period		one pr	1	-		
5.	What nercent of	f municipal officia	ls/MS4 staff resp	onsible for pr	ogram implementa	tion attend	ed
٠,	training on Low Impace Development (LID), Better Site Design (BSD) and other Gre						
	Infrastructure p	orinciples in this re	eporting period?				%

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 8 \end{bmatrix}$

SPDES	
e of MS4/Coalition Tioga County N Y	R 2 0 A 0 4 7
Evaluating Progress Toward Measurable Goals MCM 5	
e this page to report on your progress and project plans toward achieving meas ntified in your Stormwater Management Program Plan (SWMPP), including re C.I. Submit additional pages as needed.	urable goals equirements in Part
Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
Briefly summarize the observations that indicated the overall effectivenes	ss of this Measurable
pal.	
. How many times was this observation measured or evaluated in this repo	orting period?
141's assessment and during this w	(ex.: samples/participants,
Has your MS4 made progress toward this measurable goal during this re	O Yes O No
Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	
Is your 19154 on schedule to meet the deadance set 1970.	O Yes O No
Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).	this MCM during
	· · · · · · · · · · · · · · · · · · ·

This report is being submitted for the reporting period ending March 9, 2 0 1 8

11 54 541	•	-		SPDES ID	
Name of MS4/Coalition	City of Binghamton			N Y R	2 0 A 3 4 1
<u>Minimum C</u>	Control Mea	<u>sure 5. Post-</u>	<u>Constructio</u>	n Stormwater N	<u> Ianagement</u>
The information in this On behalf of an indi On behalf of a coali How ma 1. How many and w MS4/Coalition in	ividual MS4 ition any MS4s cont	ributed to this i	report?	nagement practices	has your
MS4/Coantion in	ventoried, msp	# Inventoried	# Inspections	# Times Maintained	
 Alternative Practice Filter Systems Infiltration Basins Open Channels Ponds Wetlands Other Do you use an orange BMPs, inspection 3. What types of the systems 	electronic tool ons and main	tanance? I practices hav	ve been used to	implement Low I	● Yes ∪ No
Development/B		Comprehensive I		merpies.	
Building CodesOverlay Districts	-	Preservation Pr			
Zoning	• Local Law				
O None		Regulation/Zonin	ıg		
Watershed Plans		prehensive Plan			
Other:					

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

		SPDES ID		
Name	of MS4/Coalition City of Binghamton	N Y R 2	0 A 3	4 1
4a. A	re the MS4s contributing to this report involved in a regional/watersh	ied wide plann	ing effort Yes	t? O No
4b. D	oes the MS4 have a banking and credit system for stormwater manag	gement practic	es? ○ Yes	• No
4c. D	o the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormwate	a protocol for o er managemen	evaluation t practice O Yes	•
	ow many stormwater management practices have been implemented eporting period?	as part of this	system in	this
tı	/hat percent of municipal officials/MS4 staff responsible for program raining on Low Impace Development (LID), Better Site Design (BSD) nfrastructure principles in this reporting period?	n implementat and other Gro	on attendent	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

N Y R 2 0 A 3 4 1 Name of MS4/Coalition City of Binghamton 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. Train inspection/enforcement personnel on post construction runoff regulations and inspection procedures. Perform inspections to ensure conformance with specifications. Continue to keep inventory of post construction stormwater practices. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. SWPPP inventory is used to track post construction stormwater practices. A post construction stormwater map has been created and will be updated as needed. 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? O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Planhing

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

ii submium	g uns torm as pa	it of a joint topo	11 011 0011411 01 4	annea in	
Name of MS4/Coalition	Town of Binghamton			SPDES ID N Y R	2 0 A 0 0 9
<u>Minimum (</u>	Control Mea	sure 5. Post-	<u>Constructio</u>	n Stormwater N	<u> Management</u>
The information in this	s section is bein	g reported (chec	k one):		
On behalf of an indiOn behalf of a coali	ition		_ []]		
	any MS4s conti				
1. How many and w MS4/Coalition in	what type of pos eventoried, insp	t-construction : ected and main	stormwater ma tained in this re	nagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
○ Alternative Practice	es	0	0	0	
O Filter Systems		0	0	0	
O Infiltration Basins		0	0	0	
Open Channels		0	0	0	
○ Ponds		0	0	0	
O Wetlands		0	0	0	
Other		0	0	0	
2. Do you use an o BMPs, inspecti	ons and maint	tanance?			O Yes • No
3. What types of a Development/B	non-structural Better Site Desi	practices hav practices hav	e been used to rastructure pri	inciples?	трасі
Building Codes	Municipal C	Comprehensive F	Plans		
Overlay Districts	Open Space	Preservation Pr	ogram		
Zoning	• Local Law	or Ordinance			
O None	● Land Use F	Regulation/Zonin	g		
O Watershed Plans	O Other Comp	orehensive Plan			
♠ O(1					

Board

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID				
Nam		0 A	0	0 9	9
4a.	Are the MS4s coutributing to this report involved in a regional/watershed wide planni	ing e	ffort Yes	: ? ○]	No
4b.	Does the MS4 have a banking and credit system for stormwater management practice	s? ○ `	Yes	•	No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a protocol for each approval of banking and credit of alternative siting of a stormwater management	, ріа	ation ctice Yes	•	No
4d.	. How many stormwater management practices have been implemented as part of this reporting period?	syste	em ir	thi 0	S
5.	What percent of municipal officials/MS4 staff responsible for program implementation training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?	on at en	ttend 2	ed 5	%

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

			NYR2	A 0 0 9
Name of MS4/Coalition	Town of Binghamton		NIRZI	AOOS
. Evaluating Pro	gress Toward Measurable G	Goals MCM 5		
			ievino measurable s	onals
Jse this page to rep	ort on your progress and proje tormwater Management Progr	am Plan (SWMPP).	including requirem	ents in Part
dentified in your S II C 1 Submit add	itional pages as needed.	um i ium (o mina -),		
A. Briefly summa	rize the Measurable Goal id	entified in the SWN	APP in this report	ing period.
Continue to utilize	stormwater ordinance.			
Perform inspection	s on qualifying project sites.			
R Rriefly summa	rize the observations that in	dicated the overall	effectiveness of th	is Measurable
Goal.				
Stormwater ordina	nce allows enforcement.			
Inspections ensure	compliance with regulations.			
•				
	The state of the s			
C. How many tim	nes was this observation mea	sured or evaluated	in this reporting	period?
2.5				1
				samples/participants/even
D. Has your MS4	made progress toward this	measurable goal d	uring this reportin	g period?
				● Yes ○ No
E. Is your MS4 o	n schedule to meet the dead	line set forth in the	SWMPP?	● Yes ○ No
F. Briefly summa	arize the stormwater activiti	es planned to meet	tne goals of this iv	ICMI during
	ting cycle (including an imp	111111111111111111111111111111111111111	1107.	
Continue to impro	ove review and inspection pro-	cedures.		
				į
	and the second s			

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition	Town of Chenengo			SPDES ID N Y R 2	0 A 1 2 7
Minimum (Control Mea	sure 5. Post-	<u>Constructio</u>	on Stormwater M	anagement
The information in thi On behalf of an ind On behalf of a coal How ma	ividual MS4 ition	ng reported (checo			
1. How many and w MS4/Coalition in	vhat type of pos iventoried, insp	st-construction ected and main	stormwater ma tained in this r	nagement practices be eporting period?	nas your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
O Filter Systems					
O Infiltration Basins					
Open Channels					
Ponds		2	2		
O Wetlands					
Other					
BMPs, inspecti	ons and maint	tanance?		sheet) to track post-	O Yes • No
3. What types of Development/E	non-structural Better Site Des	l practices hav ign/Green Infi	e been used to rastructure pr	implement Low In inciples?	apact
Building Codes	Municipal O	Comprehensive I	Plans		
Overlay Districts	Open Space	Preservation Pr	ogram		
O Zoning	O Local Law	or Ordinance			
○ None	O Land Use F	Regulation/Zonin	g		
O Watershed Plans	Other Comp	prehensive Plan			
O Other:					

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID Y R 2 0 Town of Chenengo Name of MS4/Coalition 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort? O Yes No 4b. Does the MS4 have a banking and credit system for stormwater management practices? No O Yes 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice? O Yes 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 %

This report is being submitted for the reporting period ending March 9, 2 0 1 8

			SPDES ID
ame of MS4/Coalition	Town of Chenengo		N Y R 2 0 A 1 2 7
	gress Toward Measura		
entified in your S	ort on your progress and tormwater Management litional pages as needed.	project plans toward Program Plan (SWM	l achieving measurable goals PP), including requirements in Part
. Briefly summa	rize the Measurable Go	al identified in the S	SWMPP in this reporting period.
taff continiued to	train and improve inspec	ction and maintenanc	e skills.
. Briefly summa	rize the observations th	at indicated the ove	erall effectiveness of this Measurable
imited or no prob	lems annually.		
C. How many tim	es was this observation	measured or evalu	ated in this reporting period?
· IIO, interior			
. Has your MS4	made progress toward	this measurable go	(ex.: samples/participants/ al during this reporting period? ● Yes ○ No
. Is your MS4 o	n schedule to meet the (deadline set forth in	the SWMPP? • Yes • No
. Briefly summa	nrize the stormwater ac ting cycle (including an	tivities planned to n implementation scl	neet the goals of this MCM during hedule).
Continue to train	employees. Develop GIS	and/or spreadsheet t	to track maintenance, practices, etc.

Other:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

II Submitting	g tills form do par	· · · · · · · · · · · · · · · · · · ·		SPDES ID	
Name of MS4/Coalition	Town of Conklin			N Y R 2	2 0 A 2 5 5
Minimum C	Control Meas	ure 5. Post-	-Constructio	<u>n Stormwater M</u>	<u>anagement</u>
The information in this	s section is being	reported (chec	ek one):		
On behalf of an indiOn behalf of a coali	ividual MS4 ition any MS4s contri	buted to this 1	renort?		
1. How many and w MS4/Coalition in	what type of post eventoried, inspe	cted and main	stormwater ma itained in this r	nagement practices heporting period?	as your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
Filter Systems		1	1	1	
Infiltration Basins		1	1		
Open Channels		1	1		
Ponds		5	5		
○ Wetlands					
Other					
BMPs, inspecti	ons and mainta	anance?		heet) to track post-o	● Yes ○ No
3. What types of a Development/B	non-structural Better Site Desig	practices hav gn/Green Inf	e been used to rastructure pr	implement Low Iminciples?	pact
O Building Codes	Municipal C	omprehensive I	Plans		
Overlay Districts	Open Space	Preservation Pr	rogram		
O Zoning	Local Law o	r Ordinance			
○ None	O Land Use Ro	-	ng		
O Watershed Plans	Other Comp	rehensive Plan			

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

Nami	e of MS4/Coalition Town of Conklin	SPDES ID N Y R 2	0 A 2	5 5
	Are the MS4s contributing to this report involved in a regional/w	vatershed wide plant	ning effort Yes	:? ○ No
4b.	Does the MS4 have a banking and credit system for stormwater i	management practic	es? O Yes	• No
4c.	Do the SWMP Plans for each MS4 contributing to this report inc and approval of banking and credit of alternative siting of a stor	clude a protocol for o mwater managemen	evaluation at practice O Yes	
	How many stormwater management practices have been implem reporting period?	nented as part of this	system in	o this
	What percent of municipal officials/MS4 staff responsible for pr training on Low Impace Development (LID), Better Site Design (Infrastructure principles in this reporting period?	ogram implementat (BSD) and other Gro	ion attendeen	l ed

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	N Y R 2 0 A 2 5 5
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achieving identified in your Stormwater Management Program Plan (SWMPP), includ III.C.1. Submit additional pages as needed.	measurable goals ling requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in	this reporting period.
Measurable goal is to document the number of post construction BMP's insthat the owner has conducted and documented maintenance of the post con	spected. Also to verify struction BMP's.
B. Briefly summarize the observations that indicated the overall effect Goal.	
After the post construction BMP's were in place staff inspected them after found no flood damage or migration of silt/sediment in/along the downstre	heavy rainfall events and am receiving waters.
C. How many times was this observation measured or evaluated in thi	s reporting period?
,	8
D. Has your MS4 made progress toward this measurable goal during	(ex.: samples/participants/event this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWM	● 162 ○ 140
F. Briefly summarize the stormwater activities planned to meet the gother the next reporting cycle (including an implementation schedule).	oals of this MCM during
Continue to inspect post construction BMP's and hold owner's/operators a them. Also, to request and file annual maintenance records from each post	ccountable to maintain t construction BMP.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 DICKINS	NC		N Y R 2 0 A 1	4 3
<u>Minimum (</u>	Control Mea	sure 5. Post-	Construction	n Stormwater Managem	<u>ent</u>
The information in thi	s section is being	g reported (chec	k one):		
On behalf of an indOn behalf of a coalHow ma	ividual MS4 ition any MS4s conti	ibuted to this i	report?		
1. How many and w MS4/Coalition in	vhat type of pos wentoried, insp	t-construction ected and main	stormwater ma tained in this re	nagement practices has your eporting period?	
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
O Filter Systems					
O Infiltration Basins					
Open Channels					
○ Ponds					
O Wetlands					
Other					
BMPs, inspecti	ons and maint	anance?		heet) to track post-construct Yes	ion s O No
3. What types of Development/E	non-structural Better Site Desi	practices havign/Green Inf	e been used to rastructure pri	implement Low Impact nciples?	
O Building Codes	Municipal C	Comprehensive I	Plans		
Overlay Districts	Open Space	Preservation Pr	rogram		
O Zoning	O Local Law	or Ordinance			
O None	O Land Use R	Legulation/Zonin	g		
O Watershed Plans	Other Comp	orehensive Plan			
▲ O41					

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This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID N Y R 2 0 A 1 4 3
Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2 0 A 1 4 3
4a. Are the MS4s contributing to this report involved in a regional/wate	ershed wide planning effort? Yes O No
4b. Does the MS4 have a banking and credit system for stormwater man	nagement practices? O Yes • No
4c. Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormward of the stormward	de a protocol for evaluation vater management practice? O Yes No
4d. How many stormwater management practices have been implement reporting period?	ted as part of this system in this
5. What percent of municipal officials/MS4 staff responsible for progressining on Low Impace Development (LID), Better Site Design (BS Infrastructure principles in this reporting period?	ram implementation attended SD) and other Green

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID
ame of MS4/Coalition TOWN OF DICKINSON	N Y R 2 0 A 1 4 3
Toward Magazzahla Coals MCM 5	
Evaluating Progress Toward Measurable Goals MCM 5	
Ise this page to report on your progress and project plans toward achi dentified in your Stormwater Management Program Plan (SWMPP), I.C.1. Submit additional pages as needed.	eving measurable goals including requirements in Part
a. Briefly summarize the Measurable Goal identified in the SWM	IPP in this reporting period.
Measurable goal is to document the number of post construction BNI hat the owner has conducted and documented maintenance of the po	P"s inspected. Also to verify st construction BMP'S.
3. Briefly summarize the observations that indicated the overall	effectiveness of this Measurable
Goal. NO ACTIVITY	
Goal.	
NO ACTIVITY C. How many times was this observation measured or evaluated	in this reporting period?
Goal. NO ACTIVITY C. How many times was this observation measured or evaluated	in this reporting period?
Goal. NO ACTIVITY	in this reporting period? (ex.: samples/participants uring this reporting period? • Yes ○ No
NO ACTIVITY C. How many times was this observation measured or evaluated D. Has your MS4 made progress toward this measurable goal du E. Is your MS4 on schedule to meet the deadline set forth in the	in this reporting period? (ex.: samples/participants)
Goal. NO ACTIVITY C. How many times was this observation measured or evaluated D. Has your MS4 made progress toward this measurable goal du	in this reporting period? (ex.: samples/participants) (ex.: samples/part

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

				2505210	
Name of MS4/Coalition	VILLAGE OF ENDIO	COTT		N Y R 2	2 0 A 1 4 9
<u>Minimum (</u>	Control Mea	sure 5. Post-	-Constructio	on Stormwater M	anagement
The information in thi	s section is bein	ng reported (chec	ck one):		
On behalf of an indOn behalf of a coalHow ma	ition	ributed to this	report?		
1. How many and v MS4/Coalition in	what type of pos eventoried, insp	st-construction pected and mair	stormwater ma ntained in this r	nnagement practices be reporting period?	ias your
		# Inventoried	# Inspections	# Times Maintained	
BMPs, inspecti	electronic tool ons and main	(e.g. GIS, dat tanance?	o o o o o o o o o o o o o o o o o o o	sheet) to track post- o implement Low In- inciples?	O Yes • No
		Comprehensive		1	
Building Codes		e Preservation P			
O Overlay Districts	• Local Law		rogram.		
ZoningNone		Regulation/Zonit	ng		
O Watershed Plans		prehensive Plan			
Other:		-			

This report is being submitted for the reporting period ending March 9, 2 0 1 8 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID NYR 2 0 A VILLAGE OF ENDICOTT Name of MS4/Coalition 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort? Yes O No 4b. Does the MS4 have a banking and credit system for stormwater management practices? O Yes No 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice? O Yes 4d. How many stormwater management practices have been implemented as part of this system in this 0 reporting period?

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

2

Infrastructure principles in this reporting period?

This report is being submitted for the reporting period ending March $9, 2 \mid 0 \mid 1 \mid 8 \mid$

A Submitti	E time form as part as a y	SPDES I	D
Jame of MS4/Coalition	VILLAGE OF ENDICOTT	NY	R 2 0 A 1 4 9
. Evaluating Pro	gress Toward Measurable Goals M	ICM 5	
dentified in your S	ort on your progress and project plar tormwater Management Program Pla itional pages as needed.	is toward achieving measun (SWMPP), including rea	irable goals quirements in Part
A. Briefly summa	rize the Measurable Goal identifie	d in the SWMPP in this	reporting period.
The Skye View He construction. The I time.	ights Construction Project has made Post-Construction Stormwater Mana	significant progress and is gement will be addressed a	s still under at the appropriate
B. Briefly summa Goal.	rize the observations that indicate	d the overall effectivenes	s of this Measurable
Please see the com	ments above.		
C. How many tin	es was this observation measured	or evaluated in this repo	orting period? 0 (ex.: samples/participants/e
D. Has vour MS4	made progress toward this measu	rable goal during this re	eporting period?
	n schedule to meet the deadline set		○ Yes • No
F Rriefly summ:	arize the stormwater activities planting cycle (including an implement	nned to meet the goals of	● Yes ○ No this MCM during
	Post Construction for Skye View He		the appropriate time.
The Coars for the	1 Ost Communication 101 229 1		

Other:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

II Subilitung	g una torm da par	or wjorm - i		SPDES ID	
Name of MS4/Coalition	Town of Fenton			N Y R 2	2 0 A 0 7 8
Minimum C	Control Meas	ure 5. Post-	<u>Constructio</u>	n Stormwater M	<u>anagement</u>
The information in this	s section is being	reported (check	k one):		
On behalf of an indiOn behalf of a coali	tion		49		
	nny MS4s contri				
1. How many and w MS4/Coalition in	hat type of post ventoried, inspe	-construction s cted and main	stormwater ma tained in this re	nagement practices heporting period?	as your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
O Filter Systems					
O Infiltration Basins					
Open Channels					
O Ponds					
O Wetlands					
Other					
BMPs, inspection	ons and mainta	mance?		heet) to track post-o	O Yes • No
3. What types of a Development/B	ion-structural j etter Site Desig	practices hav gn/Green Infr	e been used to astructure pri	implement Low Im inciples?	pact
O Building Codes	Municipal Co	omprehensive F	lans		
Overlay Districts	Open Space 1	Preservation Pr	ogram		
Zoning	• Local Law or	r Ordinance			
○ None	● Land Use Re	egulation/Zonin	g		
O Watershed Plans	Other Comp	rehensive Plan			

1 o p m e n t

P | e | r | m | i | t | t | i | n | g

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Nam	e of MS4/Coalition	Town of Fenton						ES ID Y R	2	0 <i>Z</i>	0 A	7	8
4a.	Are the MS4s co	ntributing to	this report	involved i	in a regiona	il/waters	hed w	ide pl	anni	ing e	effort Yes	? • 1	No
4b.	Does the MS4 ha	ve a banking	and credit	system fo	r stormwat	er mana	gemen	t pra	ctice	es?	Yes	• 1	No
4c.	Do the SWMP P and approval of	lans for each banking and	MS4 contri credit of al	ibuting to ternative	this report siting of a s	include tormwat	a prot er ma	ocol f nager	or e nent	ı pı	iation actice Yes	•	No
4d.	How many storn reporting period		gement pra	ctices hav	e been imp	lemented	l as pa	rt of	this	syst	em in	thi:	S
	What percent of training on Low Infrastructure p	Impace Deve	dopment (L	LID), Bette	er Site Desi	prograngn (BSD)	n impl) and (emen other	itatio Gre	on a en	ttend	ed	%

This report is being submitted for the reporting period ending March 9, 2 0 1 8

SPDES ID N Y R 2 0 A 0 7	8
Name of MS4/Coalition Town of Fenton N Y R 2 0 A 0 7	<u> </u>
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 Par III.C.1. Submit additional pages as needed.	t
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period	
Trucking Terminal NOI will require changes based on the project not moving forward after start of Site Development.	
Beertree NOI will require changes based on site changes. Precast project will require NOI changed base on additional site development	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measur: Goal.	able
Continued monitoring of activity allowed for observation of out of scope actions on sites	
C. How many times was this observation measured or evaluated in this reporting period?	0
D. Has your MS4 made progress toward this measurable goal during this reporting period?	apanta, eventa
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?) No) No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	g
Inspect and approve or correct any Post Construction activity on completed projects.	
3 projects are currently in the Construction Phase.	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

				SPDES ID	
Name of MS4/Coalition	illage of Johnson City			NYR	2 0 A 1 0 1
<u>Minimum C</u>	ontrol Meas	sure 5. Post-	<u>Construction</u>	<u>Stormwater M</u>	lanagement
The information in this	section is beins	g reported (checl	k one):		
• On behalf of an indi	vidual MS4	ibuted to this r			
1. How many and w MS4/Coalition in	hat type of pos ventoried, insp	t-construction : ected and main	stormwater mai tained in this re	nagement practices porting period?	has yonr
		# Inventoried	# Inspections	# Times Maintained	
 Alternative Practice Filter Systems Infiltration Basins Open Channels Ponds Wetlands Other Do you use an engage BMPs, inspection What types of the Development/E 	electronic tool ons and main	tanance? I practices hav	e been used to	implement Low I	• ICS OTTO
 Building Codes 	• Municipal •	Comprehensive 1	Plans		
Overlay Districts		e Preservation Pr			
Zoning	• Local Law	or Ordinance			
○ None	O Land Usc l	Regulation/Zonii	ng		
O Watershed Plans	Other Com	prehensive Plan			
● Other: S i t e	P 1 a n	R e v i e	a w a		

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

SPDES ID	
Name of MS4/Coalition Village of Johnson City N Y R	2 0 A 1 0 1
4a. Are the MS4s contributing to this report involved in a regional/watershed wide pla	nning effort? • Yes • No
4b. Does the MS4 have a banking and credit system for stormwater management prac	tices? ○ Yes • No
4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for and approval of banking and credit of alternative siting of a stormwater management.	or evaluation nent practice? O Yes • No
4d. How many stormwater management practices have been implemented as part of t reporting period?	his system in this
5. What percent of municipal officials/MS4 staff responsible for program implement training on Low Impace Development (LID), Better Site Design (BSD) and other Infrastructure principles in this reporting period?	tation attended Green 1 0 0 %

This report is being submitted for the reporting period ending March 9, 2 0 1 8

			7	NYR2	0 A 1 0	1
ame of MS4/Coal	lition Village of Johnson City			N I K Z		<u>, -</u> , j
. Evaluating	Progress Toward Measural	ble Goals MCM 5				
dentified in yo	o report on your progress and our Stormwater Management I additional pages as needed.	project plans towai Program Plan (SWN	d achievi MPP), inc	ng measurable luding require	e goals ments in Par	rt
A. Briefly sun	nmarize the Measurable Go	al identified in the	SWMPI	in this repo	rting period	l.
nspections. T	as a data base established for line property owner is respons not maintain the systems.	Post-Construction Vible for maintenance	Water Ma	nagement ann storm system	ual , therefore th	ne
Goal.	mmarize the observations th					able
The annual in	spections conclude that the in	nplemented system	s are mair	ntained and op	erable.	
C. How man	y times was this observation	n measured or eval	luated in	this reportin	g period?	8
					: samples/part:	
D. Has your	MS4 made progress toward	l this measurable ફ	goal durii	ng this report	nng periou: ● Yes	O No
	IS4 on schedule to meet the					O No
F. Briefly su the next r	ımmarize the stormwater ac reporting cycle (including ar	ctivities planned to n implementation :	meet the schedule)	e goals of this	MCM duri	ing
The MCC go	oal will continue to be met by to include any new systems th	continuing the ann at may be installed	ual inspec during fu	ctions and exp ture reporting	anding the periods.	LL (A)

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

n basinisin	6	, .		SPDES ID	
Name of MS4/Coalition	Town of Kirkwood			N Y R 2 0	A 0 7 2
<u>Minimum (</u>	Control Mea	sure 5. Post-	Construction	n Stormwater Mana	<u>gement</u>
The information in thi On behalf of an ind		ng reported (chec	k one):		
On behalf of a coal	ition	ributed to this 1	report?		
1. How many and v MS4/Coalition in	what type of pos eventoried, insp	st-construction pected and main	stormwater ma tained in this re	nagement practices has ye porting period?	our
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
O Filter Systems					
O Infiltration Basins					
Open Channels					
Ponds		3	3	3	
○ Wetlands					
O Other					
BMPs, inspecti	ons and main	tanance?			● Yes ○ No
3. What types of a Development/E	non-structura Better Site Des	l practices hav ign/Green Infi	e been used to rastructure pri	implement Low Impac nciples?	t
Building Codes	Municipal (Comprehensive I	Plans		
Overlay Districts	Open Space	Preservation Pr	ogram		
Zoning	• Local Law	or Ordinance			
○ None	● Land Use F	Regulation/Zonin	g		
O Watershed Plans	Other Comp	prehensive Plan			
Other:					

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This report is being submitted for the reporting period ending March 9, 2 0 1 8If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID R 2 0 A Y Town of Kirkwood Name of MS4/Coalition 4a. Are the MS4s coutributing to this report involved in a regional/watershed wide planning effort? Yes O No 4b. Does the MS4 have a banking and credit system for stormwater management practices? No O Yes 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice? No O Yes 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? 2 | 5

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Town of Kirkwood N Y R 2 C) A 0 7 2
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achieving measurable g identified in your Stormwater Management Program Plan (SWMPP), including requirement. III.C.1. Submit additional pages as needed.	coals ents in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporti	ng period.
Measurable goal is the number of post construction BMP's inspected and maintained. Al that the owner has conducted and documented maintenance of the post construction BM	so to verify P's.
B. Briefly summarize the observations that indicated the overall effectiveness of thi Goal.	is Measurable
After the post construction BMP's were in place staff inspected them after heavy rainfall found no flooding or migration of silt/sediment in/around receiving waters.	l events and
C. How many times was this observation measured or evaluated in this reporting p	period?
	3
D. Has your MS4 made progress toward this measurable goal during this reporting	amples/participants/ever g period?
D. Has your MIS4 made progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring one progress toward this measurable goal daring the progress toward this measurable goal daring the progress to the progress toward the progress of the progress to the progress of the prog	Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goals of this M the next reporting cycle (including an implementation schedule).	CM during
Continue to inspect post construction BMP's and hold owner's/operators accountable to them. Also, to request and file annual maintenance records from each post construction	maintain BMP.

Other:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018

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

If submitting	g this form as pa	irt of a joint repo	ort on benail of a	Coantion leave of DE	D ID Olulk.
r				SPDES ID	176
Name of MS4/Coalition	Town of Owego			NYR20AD	/ 9
<u>Minimum (</u>	Control Mea	sure 5. Post-	- <u>Constructio</u>	n Stormwater <u>M</u>	<u>lanagement</u>
The information in thi	s section is bein	g reported (chec	ck one):		
	ition any MS4s cont				
1. How many and v MS4/Coalition in	vhat type of pos ventoried, insp	st-construction sected and mair	stormwater ma ntained in this r	nagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
Alternative Practice	es	4	4	0	
O Filter Systems					
Infiltration Basins		1.			
Open Channels					
Ponds		4	4	0	
O Wetlands					
Other					
BMPs, inspecti	ons and main	tanance?		sheet) to track post-	O Yes • No
3. What types of Development/E	non-structura Better Site Des	l practices hav ign/Green Inf	ve been used to rastructure pr	implement Low Ininciples?	npact
O Building Codes	O Municipal (Comprehensive 3	Plans		
Overlay Districts	Open Space	Preservation Pr	rogram		
O Zoning	O Local Law	or Ordinance			
None	O Land Use F	Regulation/Zonir	ıg		
O Watershed Plans	Other Comp	prehensive Plan			

This report is being submitted for the reporting period ending March 9, 2018

Name of MS4/Coalition Town of Owego	SPDES ID NYR20A079
4a. Are the MS4s contributing to this report involved in a regional/waters	hed wlde planning effort? ● Yes ○ No
4b. Does the MS4 have a banking and credit system for stormwater mana	gement practices? O Yes • No
4c. Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormwater.	a protocol for evaluation ter management practice? O Yes • No
4d. How many stormwater management practices have been implemented reporting period?	as part of this system in this
5. What percent of municipal officials/MS4 staff responsible for programment training on Low Impace Development (LID), Better Site Design (BSD) Infrastructure principles in this reporting period?	n implementation attended) and other Green 0 %

This report is being submitted for the reporting period ending March 9, 2018
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 Owego NYR2 0A 079
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.
Develop and maintain an inventory of projects under local post-construction regulations.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable
Goal.
Inventories all SWPPPs within the Town of Owego and checked status with NYSDEC
C. How many times was this observation measured or evaluated in this reporting period?
C. How many times was this observation ineasured of evaluated in this approximation in the second of
D. Has your MS4 made progress toward this measurable goal during this reporting period?
P. Has your MIS4 made progress toward this measurable goal carried to a Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Develop spreadsheet to track post-construction BMPs inspections and maintenance.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 PORT I	DICKINSON		SPDES ID N Y R	2 0 A 0 8 0
Minimum C	Control Meas	sure 5. Post-	<u>Construction</u>	n Stormwater M	anagement
	ividual MS4 ition any MS4s contr	ibuted to this r	eport?		
1. How many and w MS4/Coalition in	what type of positiventoried, inspe	t-construction : ected and main	stormwater ma tained in this re	nagement practices leporting period?	nas your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
O Filter Systems					
O Infiltration Basins					
Open Channels					
○ Ponds					
○ Wetlands					
Other					
BMPs, inspecti	ons and maint	anance?		heet) to track post-	• Yes O No
3. What types of a Development/B	non-structural Better Site Desi	practices hav gn/Green Infi	e been used to astructure pri	implement Low In inciples?	npact
O Building Codes	Municipal C	omprehensive I	lans		
Overlay Districts	O Open Space	Preservation Pr	ogram		
O Zoning	O Local Law o	r Ordinance			
O None	O Land Use R	egulation/Zonin	g		
O Watershed Plans	Other Comp	rehensive Plan			
O Other:	TIVIT	Y T H I	S PER	IOD	

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ACTIV

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Nam	e of MS4/Coalition VILLAGE OF PORT DICKINSON	and .	SPE	ES II		0	A 0	8	0
	Are the MS4s contributing to this report involved in a regiona	l/watersh	ed w	ide p	lanı	ning •	effor Yes	t?	No
4b.	Does the MS4 have a banking and credit system for stormwate	er manag	emei	nt pr	actic	es?	Yes	•	No
4c.	Do the SWMP Plans for each MS4 contributing to this report and approval of banking and credit of alternative siting of a st	include a tormwate	pro r ma	tocol mage	for emer	ու թո	uation actico Yes	e (No
4d.	How many stormwater management practices have been impl reporting period?	emented	as p	art of	i this	s sys	tem i	n thi	is
5.	What percent of municipal officials/MS4 staff responsible for training on Low Impace Development (LID), Better Site Desig Infrastructure principles in this reporting period?	program gn (BSD)	imp and	leme othe	ntat · Gr	ion a een	atteno 2		%

This report is being submitted for the reporting period ending March 9, 2 0 1 8

· · · · · · · · · · · · · · · · · · ·	
Name of MS4/Coalition VILLAGE OF PORT DICKINSON	N Y R 2 0 A 0 8 0
I.M. samuella Coole MCM 5	
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
Measurable goal is to document the number of post construction that the owner has conducted and documented maintenance of the	BNP"s inspected. Also to verify ne post construction BMP'S.
B. Briefly summarize the observations that indicated the ove	erall effectiveness of this Measurable
NO ACTIVITY	
C. How many times was this observation measured or evaluation	ated in this reporting period?
	(ex.: samples/participants/eve
D. Has your MS4 made progress toward this measurable go	al 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 n the next reporting cycle (including an implementation sci	neet the goals of this MCM during
IT IS NOT LIKELY THAT THERE WILL BE ANY POST CO	
YEAR Continue to inspect post construction BMP's and hold owner's them. Also, to request and file annual maintenance records from	operators accountable to maintain

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

SPDES ID

				1 1 1 1	
Name of MS4/Coalition	Town of Union			NYR	2 0 A 0 5 0
<u>Minimum (</u>	Control Meas	sure 5. Post-	-Constructio	n Stormwater I	<u>Management</u>
The information in thi	is section is being	g reported (chec	ck one):		
On behalf of an indOn behalf of a coalHow many	lividual MS4 ition any MS4s contr	ibuted to this	report?		
1. How many and v MS4/Coalition in	what type of pos eventoried, insp	t-construction ected and mair	stormwater ma ntained in this r	nagement practices eporting period?	i has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	es				
O Filter Systems					
O Infiltration Basins					
O Open Channels					
Ponds		1 0	1 0		
O Wetlands					
O Other					
2. Do you use an o BMPs, inspecti	ions and maint	anance?			● 1¢2 ○ 140
3. What types of Development/E	non-structural Better Site Desi	practices hav gn/Green Inf	e been used to rastructure pr	implement Low I inciples?	[mpact
Building Codes	Municipal C	Comprehensive l	Plans		
O Overlay Districts	O Open Space	Preservation Pr	rogram		
○ Zoning	O Local Law o	or Ordinance			
O None	◆ Land Use R	egulation/Zonin	ıg		
O Watershed Plans	O Other Comp	rehensive Plan			
O Other:					

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 Union	SPDES ID N Y R 2 0 A 0 5 0
4a. Are the MS4s contributing to this report involved in a regional/waters	shed wide planning effort? • Yes • No
4b. Does the MS4 have a banking and credit system for stormwater mana	gement practices? O Yes • No
4c. Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormwa	a protocol for evaluation ter management practice? O Yes • No
4d. How many stormwater management practices have been implemented reporting period?	d as part of this system in this
5. What percent of municipal officials/MS4 staff responsible for program training on Low Impace Development (LID), Better Site Design (BSD Infrastructure principles in this reporting period?	m implementation attended) and other Green 0 %

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part of a joint report to SPDES ID N Y R 2 0 A 0	5 0
Name of MS4/Coalition Town of Union NYR20A0	
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 III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting peri	ou.
Code enforcement software is used to track SWPPP inspections. The Town is only responsible maintaining one system.	for
B. Briefly summarize the observations that indicated the overall effectiveness of this Meas	surable
Yearly inspections made to make sure systems are performing properly.	
C. How many times was this observation measured or evaluated in this reporting period	2 1 2 participants/even
D. Has your MS4 made progress toward this measurable goal during this reporting peri	od? s O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes	
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM of the next reporting cycle (including an implementation schedule).	
Train additional staff to inspect systems.	
	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 8 \end{vmatrix}$

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

If submitting	this form as par	rt of a joint repo	rt on behalf of a	coalition leave SPD	ES ID DIAIK.
ļ				SPDES ID N Y R	
Name of MS4/Coalition	Fown of Vestal			NYR	ZOAOOT
		sure 5. Post-	<u>Constructio</u>	n Stormwater I	<u>Management</u>
The information in this	s section is bein	g reported (chec	k one):		
	tion my MS4s conti	ributed to this r			
1. How many and w MS4/Coalition in	hat type of posventoried, insp	st-construction s ected and main	stormwater ma tained in this r	chot ting berroa.	s has your
		# Inventoried	# Inspections	# Times Maintained	
○ Alternative Practice	ac		0	0	
• Filter Systems	<i>7</i> .5	1 6	1 6	1 6	
• Infiltration Basins			2	2	
Open Channels		2	2	2	
Ponds		1 3	1 3	1 3	
Wetlands				0	
O Other		0	0	0	
2. Do you use an one BMPs, inspection 3. What types of Development/B	ons and main	tanance? I oractices hav	e been used to	implement Low	• ies • ino
Development/E					
Building Codes		Comprehensive I			
Overlay Districts	•	e Preservation Pr	ogram		
Zoning	Local Law				
O None		Regulation/Zonir	ng		
O Watershed Plans	Other Com	prehensive Plan			
• Other:					

Reviews

P 1 a n

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$ 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 Vestal	SPDES ID N Y R 2 0 A 0 6 4
4a. Are the MS4s contributing to this report involved in a regional/watersh	ed wide planning effort? ● Yes ○ No
4b. Does the MS4 have a banking and credit system for stormwater manage	ement practices? ○ Yes ● No
4c. Do the SWMP Plans for each MS4 contributing to this report include a and approval of banking and credit of alternative siting of a stormwate	protocol for evaluation r management practice? O Yes • No
4d. How many stormwater management practices have been implemented reporting period?	as part of this system in this
5. What percent of municipal officials/MS4 staff responsible for program training on Low Impace Development (LID), Better Site Design (BSD) Infrastructure principles in this reporting period?	implementation attended and other Green 5 5 %

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part	of a John report on bena	S	SPDES ID	
ame of MS4/Coalition Town of Vestal			N Y R 2 0	A 0 6 4
. Evaluating Progress Toward M	leasurable Goals MC	M 5		
Jse this page to report on your progr dentified in your Stormwater Manag II.C.1. Submit additional pages as n	ess and project plans to gement Program Plan (oward achieving	, measurable go ding requireme	oals nts in Part
A. Briefly summarize the Measura	able Goal identified in	the SWMPP i	n this reportin	g period.
The Town has a data base established annual inspections. Each site is inspections is notified if any issues are identified of their stormwater system. The enghave been addressed.	ected yearly by the eng	gmeering depart The owner is re	esponsible for r	naintenance
B. Briefly summarize the observa Goal.				
The annual inspections found 5 incide the corrective actions were completed included in our MS4 records.	idents that were reported, a letter to the owner	ed for corrective or stating that the	actions to owr eaction is close	ners. Once ed is also
C. How many times was this obse D. Has your MS4 made progress			(ex.: sa	mples/participants
E. Is your MS4 on schedule to m	eet the deadline set fo	orth in the SWN	ЛРР?	● Yes ○ No
F. Briefly summarize the stormw the next reporting cycle (inclu	vater activities planne iding an implementat	ed to meet the g ion schedule).	oals of this M	CM during
The MCC goal will continue to be inspections to include any new sys	mot by continuing the	annual inspection	ons and expand re reporting per	ing the riods.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Name of MS4/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3 3 2
Minimum Control Measure 6. Stormwater Manageme The information in this section is being reported (check one):	ent for Municipal Operations
 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.

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

	herrorme	U WILLIAM	the past 5
Addressed i	n SWMP?	<u>vears?</u>	•
• Yes	○ No	Yes	\bigcirc No
● Yes	O No	Yes	O No
—	O No	Yes	\circ No
	O No	Yes	O No
	O No	Yes	\circ No
	O No	Yes	\bigcirc No
A	O No	Yes	\circ No
~	• No	O Yes	O No
	O No	Yes	O No
A 17	O No	Yes	O No
─ 37	O No	Yes	O No
	○ No	Yes	O No
A 77	○ No	Yes	O No
△ 37	O No	Yes	\bigcirc No
	Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	Addressed in SWMP?	Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes Yes O No Yes

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID		
Name of MS4/Coalition BROOME COUNTY	N Y R 2	0 A 3	3 2
2. Provide the following information about municipal operations a	good housekeep	ing prog	rams:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres		1 6
• Streets Swept (Number of miles X Number of times swept)	# Miles	3	4 0
Catch Basins Inspected and Cleaned Where Necessary	#	1	4 9
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		6
Phosphorus Applied In Chemical Fertilizer	# Lbs.		0
Nitrogen Applied In Chemical Fertilizer	# Lbs. 	2 6	8 2
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.) 	# Acres er of	7 0	5.
3. How many stormwater management trainings have been provided during this reporting period?	ded to municipa	al employ	ees 4
4. What was the date of the last training?	0 2 / 2 2	/ 2 0	1 8
5. How many municipal employees have been trained in this repo	rting period?		5
6. What percent of municipal employees in relevant positions and stormwater management training?	departments r	eceive 8	0 %

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

			261	7CO	עני						
i]		v	_	_		7	3)	^
Name of MS4/Coalition	BROOME COUNTY		N	Y	R	2	0	A	3	3	
Name of M34/Coantion				J							

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.

MEASURABLE GOAL #6A -- To complete a self-assessment every 3 years for each of the 19 County facilities within the MS4 jurisdictional area, and then to use these assessments to evaluate established good housekeeping and implement changes as needed.

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

Self-assessments at the 19 County Facilities within the MS4 boundaries were 100% completed during the 2016-2017 reporting year, including on-site inspections at each facility by DPW staff. The next self assessment is due during the 2019-2020 reporting year. We have begun development of individualized reporting checklists for each facility, but did not get this completed during this reporting period.

C.	How many t	imes was	this	observation	measured	or	evaluated	in	this r	eportiu	g p	eriod?

(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 O No

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

Using results from the on-site inspections and self-assessment analysis completed in 2016, continue to develop individualized reporting checklists for each facility to use based on their individual needs. We would like to get this effort completed during the 2018-2019 reporting period.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

If submitting this form as part of a joint report on behalf of a coalition leave SPDES	
Name of MS4/Coalition BROOME COUNTY N Y	
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward achieving measidentified in your Stormwater Management Program Plan (SWMPP), including re III.C.1. Submit additional pages as needed.	surable goals equirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
MEASURABLE GOAL #6B To sweep 100% of County Roads and Parking I boundaries at least once annually in accordance with Good Housekeeping measurements.	Lots within the MS4 ures.
B. Briefly summarize the observations that indicated the overall effectivene Goal.	ess of this Measurable
The County is working on this goal by better defining the MS4 road boundaries infrastructure mapping, and the development of good housekeeping records. Al roads and parking lots, we did not get the MS4 boundary definition completed a	though we did sweep
C. How many times was this observation measured or evaluated in this repo	orting period? 3 4 3 (ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal during this re	
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 the next reporting cycle (including an implementation schedule).	f this MCM during
Continue program as established, but complete delineation of what is within MS create checklist information for Highways and facility managers to utilize.	S4 boundaries and

This report is being submitted for the reporting period ending March 9, 2 0 1 8

SF	PDES ID
Name of MS4/Coalition BROOME COUNTY	I Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward achieving a identified in your Stormwater Management Program Plan (SWMPP), including III.C.1. Submit additional pages as needed.	measurable goals ing requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in	this reporting period.
MEASUREABLE GOAL #6C To clean and inspect 50% of catch basins MS4 boundary annually.	and drop inlets within the
B. Briefly summarize the observations that indicated the overall effective Goal.	
Cleaning / inspection is occurring by County Highway Division each year, confirmation whether 50% of structures as denoted in this goal are actually inspected due to the lack of good mapping.	however, we do not have being cleaned and
C. How many times was this observation measured or evaluated in this	reporting period? 1 4 9 (ex.: samples/participants/events.
D. Has your MS4 made progress toward this measurable goal during the	nis reporting period? ○ Yes ● No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMF	PP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goathe the next reporting cycle (including an implementation schedule).	ds of this MCM during
Continue program as established. And priority within 2018 to complete systems.	mapping of closed

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed.	d achieving measurable goals MPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
MEASUREABLE GOAL #6D To minimize the amount of phehemical fertilizers.	hosphorus and nitrogen applied in
B. Briefly summarize the observations that indicated the ove	erall effectiveness of this Measurable
Chemical fertilizers are only being used / applied at the En Joie in our Parks or other facilities.	golf course, they are no longer used
C. How many times was this observation measured or evalu	ated in this reporting period?
C. 11011 many constant and a second a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a second and a second and a second and a second and a second and	1
<u>.</u>	(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable go	al 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 n the next reporting cycle (including an implementation sci	neet the goals of this MCM during hedule).
Continue as developed and implemented, and continue to moninitrogen contents.	tor materials for phosphorus /

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition BROOME COUNTY SPDES ID N Y R 2 0 A 3 3 2
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.
MEASUREABLE GOAL #6E To minimize the acreage of herbicide/pesticide usage within the MS4 boundaries.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Herbicides are only being used along County roadways at guide rail locations, and at En Joie golf course.
C. How many times was this observation measured or evaluated in this reporting period?
D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes ○ No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes ○ No 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).
Review minimization to the greatest extent possible and monitor products used.

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

Name of MS4/Coalition BROOME COUNTY SPDE:	S ID R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward achieving mea identified in your Stormwater Management Program Plan (SWMPP), including III.C.1. Submit additional pages as needed.	surable goals requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in thi	s reporting period.
MEASUREABLE GOAL #6F To develop staff training related to the stormwand good housekeeping measures, and to have 100% of County staff educated ithis goal. This goal will be accomplished in part by the BTSC as part of MCM will assist in the creation of applicable training materials and opportunities.	n accordance with
B. Briefly summarize the observations that indicated the overall effectivene Goal.	ess of this Measurable
Progress was stalled on this goal during this reporting period. Additional target accomplished.	ted training was not
C. How many times was this observation measured or evaluated in this rep	(ex.: samples/participants/e
D. Has your MS4 made progress toward this measurable goal during this r	O Yes ● No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? F. Briefly summarize the stormwater activities planned to meet the goals o	● Yes ○ No f this MCM during
the next reporting cycle (including an implementation schedule).	
Continue educational outreach to County employees - specifically targeting tho the self-assessment process as critical (such as custodial workers).	se identified during

Name of MS4/Coalition

BROOME COUNTY

MS4 Annual Report Form

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

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

SPDES ID Υ R 2

0 A

identified in your	eport on your progress and project plans toward achieving measurable goals Stormwater Management Program Plan (SWMPP), including requirements in Part ditional pages as needed.
A. Briefly summ	arize the Measurable Goal identified in the SWMPP in this reporting period.
training to new C	E GOAL #6G To target 100% distribution of good housekeeping guidelines and bunty employees upon orientation. This goal will be accomplished in part by the MCM-1 and MCM-2, they will assist in the creation of applicable training materials
B. Briefly summ Goal.	arize the observations that indicated the overall effectiveness of this Measurab
Goal for 2016 wa	s to develop printed material - which was accomplished. Goal for 2017 was to all new employees during orientation - this was not accomplished.

0 (ex.: samples/participants/events)

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

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

O Yes No

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

O Yes • No

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

Goal this reporting period is to make new training pamphlets available to all new employees during their orientation with the Personnel Department.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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

Name of MS4/Coalition | BROOME COUNTY | SPDES ID | N | Y | R | 2 | 0 | A | 3 | 3 | 2 |

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.

MEASUREABLE GOAL #6H -- To maintain the County's existing PBS/SPCC plans and training as established and to keep these plans current with any changes in state and/or federal regulations.

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

Existing SPCC plans are reviewed annually for compliance with current federal and state regulations, and all staff training at each facility has been completed during this reporting period as specified in the SPCC reports. During this reporting period 21 staff members completed this update training. In addition, all County SPCC plans were reviewed and updated.

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

			2	1	
lex.:	samples/	par	tici	pant	s/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 O No

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

Continue program as established tracking that 100% of staff training is being completed as stipulated within the SPCC plan documents. During this next reporting period the County will develop a list of all staff members at each facility or within each department that require the SPCC training.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

PROOME COUNTY N V R 2 0 A 3 3 2	If Submitting this form as part of a John report on comme	(DDEAT)
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. MEASUREABLE GOAL #61 — To complete an updated and detailed inventory of County buildings and facilities within the MS4 boundaries (including updated mapping), and to develop facility specific good housekeeping programs for each. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. There are 14 County facilities, 4 County parks, and 1 County Golf Course located within the MS4 boundary. The County has developed and finalized good housekeeping documents for all of these locations and have begun specific facility mapping. Mapping at 12 facilities, 4 parks, and the golf course has been completed (6 of these during the last reporting period). Creating individualized Good Housekeeping Checklists for each facility was started in 2016 and progressed in 2017. C. How many times was this observation measured or evaluated in this reporting period? Pess No E. Is your MS4 made progress toward this measurable goal during this reporting period? Pess No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). During the 2017-2018 reporting period, mapping/survey is planned for the remaining 2 facilities within the MS4 boundary. Additionally completion of the individualized MS4 housekeeping	Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. MEASUREABLE GOAL #61 To complete an updated and detailed inventory of County buildings and facilities within the MS4 boundaries (including updated mapping), and to develop facility specific good housekeeping programs for each. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. There are 14 County facilities, 4 County parks, and 1 County Golf Course located within the MS4 boundary. The County has developed and finalized good housekeeping documents for all of these locations and have begun specific facility mapping. Mapping at 12 facilities, 4 parks, and the golf course has been completed (6 of these during the last reporting period). Creating individualized Good Housekeeping Checklists for each facility was started in 2016 and progressed in 2017. C. How many times was this observation measured or evaluated in this reporting period? One I last your MS4 made progress toward this measurable goal during this reporting period? One F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). During the 2017-2018 reporting period, mapping/survey is planned for the remaining 2 facilities within the MS4 boundary. Additionally completion of the individualized MS4 housekeeping	7. Evaluating Progress Toward Measurable Goals MCM 6	
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B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. There are 14 County facilities, 4 County parks, and 1 County Golf Course located within the MS4 boundary. The County has developed and finalized good housekeeping documents for all of these locations and have begun specific facility mapping. Mapping at 12 facilities, 4 parks, and the golf course has been completed (6 of these during the last reporting period). Creating individualized Good Housekeeping Checklists for each facility was started in 2016 and progressed in 2017. C. How many times was this observation measured or evaluated in this reporting period? D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). During the 2017-2018 reporting period, mapping/survey is planned for the remaining 2 facilities within the MS4 boundary. Additionally completion of the individualized MS4 housekeeping	A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
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boundary. The County has developed and finalized good housekeeping documents for all of these locations and have begun specific facility mapping. Mapping at 12 facilities, 4 parks, and the golf course has been completed (6 of these during the last reporting period). Creating individualized Good Housekeeping Checklists for each facility was started in 2016 and progressed in 2017. C. How many times was this observation measured or evaluated in this reporting period? Lex.: samples/participants/event D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). During the 2017-2018 reporting period, mapping/survey is planned for the remaining 2 facilities within the MS4 boundary. Additionally completion of the individualized MS4 housekeeping		all effectiveness of thls Measurable
D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). During the 2017-2018 reporting period, mapping/survey is planned for the remaining 2 facilities within the MS4 boundary. Additionally completion of the individualized MS4 housekeeping	boundary. The County has developed and finalized good houseked locations and have begun specific facility mapping. Mapping at course has been completed (6 of these during the last reporting personnel.)	eeping documents for all of these 12 facilities, 4 parks, and the golf eriod). Creating individualized
D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). During the 2017-2018 reporting period, mapping/survey is planned for the remaining 2 facilities within the MS4 boundary. Additionally completion of the individualized MS4 housekeeping	C. How many times was this observation measured or evaluate	
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). During the 2017-2018 reporting period, mapping/survey is planned for the remaining 2 facilities within the MS4 boundary. Additionally completion of the individualized MS4 housekeeping	D. Has your MS4 made progress toward this measurable goal	during this reporting period?
During the 2017-2018 reporting period, mapping/survey is planned for the remaining 2 facilities within the MS4 boundary. Additionally completion of the individualized MS4 housekeeping	E. Is your MS4 on schedule to meet the deadline set forth in t	he SWMPP?
During the 2017-2018 reporting period, mapping/survey is planned for the remaining 2 facilities within the MS4 boundary. Additionally completion of the individualized MS4 housekeeping	F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	eet the goals of this MCM during
	within the MS4 boundary. Additionally completion of the indivi-	ed for the remaining 2 facilities dualized MS4 housekeeping

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

Name of MS4/Coalition BROOME COUNTY 7. Evaluating Progress Toward Measurable Goals MCM 6 Use this page to report on your progress and project plans toward achieving measurable identified in your Stormwater Management Program Plan (SWMPP), including requirem III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this report MEASUREABLE GOAL #6J To implement program tracking and record keeping the individualized for each County facility based on the good housekeeping documents and accordance with the NYSDEC tracking system and forms so that the County will be in a transition to this annual reporting method once it is implemented by the DEC.	ting period. at is
Use this page to report on your progress and project plans toward achieving measurable gidentified in your Stormwater Management Program Plan (SWMPP), including requirem III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this report MEASUREABLE GOAL #6J To implement program tracking and record keeping the individualized for each County facility based on the good housekeeping documents and accordance with the NYSDEC tracking system and forms so that the County will be in a	ting period. at is
identified in your Stormwater Management Program Plan (SWMPP), including requirem III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this report MEASUREABLE GOAL #6J To implement program tracking and record keeping the individualized for each County facility based on the good housekeeping documents and accordance with the NYSDEC tracking system and forms so that the County will be in a	ting period. at is
MEASUREABLE GOAL #6J To implement program tracking and record keeping the individualized for each County facility based on the good housekeeping documents and accordance with the NYSDEC tracking system and forms so that the County will be in a	at is
individualized for each County facility based on the good housekeeping documents and accordance with the NYSDEC tracking system and forms so that the County will be in a	l in
B. Briefly summarize the observations that indicated the overall effectiveness of th Goal.	is Measurable
This was a new program goal in 2016 that has not been completed or implemented in ei last 2 reporting years - part of the hold up is the delay in issuance of the new MS4 perm NYSDEC, and part of the delay is due to the requirement to complete goal #61 before thimplemented.	nit by
C. How many times was this observation measured or evaluated in this reporting p	period?
	amples/participants/
D. Has your MS4 made progress toward this measurable goal during this reporting	
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 M the next reporting cycle (including an implementation schedule).	CM during
This goal will be progressed in coordination with MCM-6l goal during the 2018-2019 r year.	reporting

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix} 1 = \begin{bmatrix} 8 & 1 \end{bmatrix}$

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

Name of MS4/Coalition Tioga County	SPDES ID N Y R 2 0 A 0 4 7
Minimum Control Measure 6. Stormwater Man	nagement for Municipal Operations
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	

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

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

		periori	neu wiimi	the pasts
Operation/Activity/Facility	Addressed in	n SWMP?	years?) -
Street Maintenance	● Yes	○ No	O Yes	No
Bridge Maintenance	• Yes	O No	O Yes	No
Winter Road Maintenance		○ No	O Yes	No
Salt Storage		○ No	O Yes	No
Solid Waste Management	_	○ No	O Yes	No
New Municipal Construction and Land Disturbar		○ No	O Yes	No
Right of Way Maintenance	A 7 7	○ No	O Yes	No
Marine Operations	~ 37	• No	O Yes	No
Hydrologic Habitat Modification		• No	O Yes	No
Parks and Open Space	O 17	• No	O Yes	No
Municipal Building	- X T	○ No	O Yes	No
Stormwater System Maintenance		○ No	O Yes	No
Vehicle and Fleet Maintenance	A 77	○ No	O Yes	No
Other	$\sim M_{\odot}$	• No	O Yes	No

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Tioga County	N Y R 2 0	
2. Provide the following information about municipal operat	ions good housekeeping	programs:
O Parking Lots Swept (Number of acres X Number of times swep	ot) # Acres	
O Streets Swept (Number of miles X Number of times swept)	# Miles	
Catch Basins Inspected and Cleaned Where Necessary	#	5 5
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.) 	# Acres	
3. How many stormwater management trainings have been pluring this reporting period?	provided to municipal en	nployees
4. What was the date of the last training?	10/27/	2 0 1 7
5. How many municipal employees have been trained in this	reporting period?	3
6. What percent of municipal employees in relevant position stormwater management training?	s and departments receiv	/e %

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix} \begin{bmatrix} 8 & 1 & 1 \end{bmatrix}$

If submittin	g this form as part of a joint report on behalf of a	coalition l	eav	e S	PD	ES	ID	bla	ık.		
			SPD								
MS4/Coalition	Tioga County		N	Y	R	2	0	Α	0	4	7

7. Evaluating Progress Toward Measurable Goals MCM 6

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

- A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
- -Received a Satisfactory rating NYS DEC on the MS4 Stormwater Audit conducted on 2/25/2013. -Tioga County Public Works continues to follow the best management practices as defined in the
- "Tioga County and Town of Owego Stormwater Management Program Plan", which is effective through 2020.
- B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

No illicit discharges or spills, leaks observed.			

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

	3	6	5	

(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 O No

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

Continue to follow EPA/OSHA self audit recommendations conducted more than 6 years ago, which have also been incorporated into the Tioga County and Town of Owego Stormwater Management Program Plan 2020.

The NYS DEC Audit Report recommended conducting this audit more often.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

he information in this section	n is baing raported (chack	one)	
		Concj.	
On behalf of an individual M On behalf of a coalition	/154		
	4s contributed to this re	eport?	
110 W Many Ma			
1S4s must answer the qu	estions or check NA a	s 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 3,4,5,10,11,12	Phosphorus Phosphorus
Non-Traditional Onondaga Lake Watershed	1,2,77a-d,8a,8b,9	3,4,3,10,11,12	-
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		2.2.5.01, 10.11, 12	Phosphorus
Traditional Land Use	1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use 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	1,4,7a-d,8a,9,10,11,12	2,3,5,6,86	Pathogens and Nitrogen
Traditional Land Use 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 2,3,5,8b,10,11,12	Phosphorus Phosphorus
Non-Traditional LI 27 Embayments	1,4,6,7a-d,8a,9	2,3,3,80,10,11,12	-
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
	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID Y R 2 0 A 0 4 Tioga County Name of MS4/Coalition 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes O No O N/A 4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period? % 5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that O Yes O No N/A disturb five thousand square feet or more? 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 N/A O Yes O No Standards? 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? O Yes O No N/A 7b. How many projects have been sited in this reporting period? 0 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 O Yes O No N/A lands? 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?

O Yes

 \circ No

N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Tioga County	SPDES II		0 4 7
9. Has your MS4/Coalition developed and implemented a		olanting? Yes O No	• N/A
10. Has your MS4/Coalition enacted a local law prohibitin prohibiting goose feeding?		cipal prope Yes ○ No	
11. Does your MS4/Coalition have a pet waste bag program	m? O Y	Yes O No	• N/A
12. Does your MS4/Coalition have a program to manage g populations?	goose	Yes ○ No	• N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Name of MSAIC colition City of Binghamton			SPDES ID NYR20	A 3 4 1	
Name of MS4/Coalition City of Bingnantion					
Minimum Control Measure 6. Stormw	ater Mana	ngement fo	or Municipal (<u>Operations</u>	
The information in this section is being reported (chec	ck 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 Pollutants of Concern to the MS4 system. It operation/facility has been addressed in the Program(SWMP) Plan and whether a self-reporting period. A self-assessment is perfectiveness of existing programs and 3) it that will be addressed by the pollution prevent done already.	For each open MS4's/Coan assessment formed to: 1) erations and dentify the i	eration/facil dition's Stor has been pe determine I facilities; 2 municipal o	lity indicate whe mwater Manag rformed during the sources of p 2) evaluate the perations and fa	ether the ement the ollutants	
		<u>Self-Assessment</u> <u>Operation/Activity/Facility</u>			
	4.11		performed within		
	Addressed i		<u>years?</u>	○ No	
Street Maintenance			• Yes	● No	
Bridge Maintenance				O No	
Winter Road Maintenance			• Yes	O No	
Salt Storage			• Yes	• No	
Solid Waste Management			• Yes	O No	
New Municipal Construction and Land Disturbar			O Yes	● No	
Right of Way Maintenance			O Yes	• No	
Marine Operations			O Yes	• No	
Hydrologic Habitat Modification		○ No		O No	
Parks and Open Space		○ No		O No	
Municipal Building	🕶 103	O 140	100		

Stormwater System Maintenance..... • Yes

Vehicle and Fleet Maintenance..... • Yes

Other..... O Yes

O No

O No

No

○ No • Yes

○ No • Yes

● No ○ Yes

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID					
Name of MS4/Coalition City of Binghamton	NYR2	0 A	3	4	1	
2. Provide the following information about municipal operations go	ood housekeep	oing p	rogi	ran	1S:	
Parking Lots Swept (Number of acres X Number of times swept)	# Acres			3	4	
• Streets Swept (Number of miles X Number of times swept)	# Miles	2	6	1	0	
Catch Basins Inspected and Cleaned Where Necessary	#		6	6	5	
Post Construction Control Stormwater Management Practices And Advanced Wilson Management	#				1	
Inspected and Cleaned Where Necessary		<u></u>	.1			
O Phosphorus Applied In Chemical Fertilizer	# Lbs.					
O Nitrogen Applied In Chemical Fertilizer	# Lbs.					
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number	# Acres					
times applied to the nearest tenth.)						
3. How many stormwater management trainings have been provide	ed to municip	al emp	oloy	ees	;	
during this reporting period?	•				3	
4. What was the date of the last training?	03/29	/ 2	0	1	8	
] [-				
5. How many municipal employees have been trained in this report	ing period?				4	
6. What percent of municipal employees in relevant positions and departments receive						
stormwater management training?			5	0	%	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition City of Binghamton	SPDES ID N Y R 2 0 A 3 4 1
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward achie identified in your Stormwater Management Program Plan (SWMPP), i III.C.1. Submit additional pages as needed.	eving measurable goals ncluding requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWM	PP in this reporting period.
Provided training to all municipal employees whose operations impact impact of moving/landscaping through the use of best management prequipment maintenance/washing according to plan, to reduce impact of hazardous waste material from impacting storm water through proper Continue street sweeping and cleaning catchbasins.	actices. Perform vehicle and of storm water. Prevent
B. Briefly summarize the observations that indicated the overall e Goal.	ffectiveness of this Measurable
2610 miles of street swept and 665 catchbasins cleaned during reporti	ng period.
C. How many times was this observation measured or evaluated in	n this reporting period? (ex.: samples/participants/events,
D. Has your MS4 made progress toward this measurable goal dur	ring this reporting period? • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the S	WMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule	ne goals of this MCM during
Continue training as available. Continue the use of BMP's in moving. Continue to use good house keeping procedures to reduce the impact maintenance and washing.	/landscaping operations. of vehicle/equipment

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

	SPI	DES	ID						
Name of MS4/Coalition City of Binghamton	N	Y	R	2	0	Α	3	4	1
Name of M34/Coantion	L								

On behalf of a coalition	1S4		
How many MS4	ls contributed to this re	port? 1	
S4s must answer the que	estions or check NA a	s indicated in the table	below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	-	-	-
Fraditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Fraditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Von-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	-	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12 2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9 1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12 2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional Greenwood Lake Watershed	1,0,7a-0,8a,9	2,3,7,3,00,10,11,12	-
Fraditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Fraditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Von-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay	-	-	
Fraditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Fraditional 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			Pathogens and Nitrogen
Fraditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Fraditional 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	
Oscawana Lake Watershed	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Land Use Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Von-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments	1,1,0,74 4,04,7	_	-
Fraditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Fraditional 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

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

SPDES ID 3 Y R 2 0 A City Of Binghamton Name of MS4/Coalition 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection O No O N/A Yes and Maintenance Plan Program? 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 \bigcirc No \bigcirc N/A Yes disturb five thousand square feet or more? 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 O No O N/A Yes Standards? 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? No O N/A O Yes 7b. How many projects have been sited in this reporting period? 0 7c. What percent of the projects included in 7b have been completed in this reporting period? 0 % 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 O Yes ● No O N/A lands?

Yes

O No

0 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?

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

	ು	PDE_{i}	עגכ					
Name of MS4/Coalition City of Binghamton		Y Y	R	2	0 A	3	4	1
9. Has your MS4/Coalition developed and implemented a pro	gram of r	ativ	e pl	ant	ing?			
•		(Y	es	\circ N	0	\circ N	A
10. Has your MS4/Coalition enacted a local law prohibiting pe prohibiting goose feeding?	t waste oi				l proj • N			
11. Does your MS4/Coalition have a pet waste bag program?		(● Y	es	ΟN	0	0 N	/A
12. Does your MS4/Coalition have a program to manage goose populations?	•	(ΥC	es	• N	0	0 N	/A

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 Binghamton N Y R	2	0	A	0	0	9

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	

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

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

			performed within the pas	[3
Operation/Activity/Facility	Addressed in	<u>ı SWMP?</u>	<u>years?</u>	
Street Maintenance	• Yes	○ No	● Yes ○ No	
Bridge Maintenance	• Yes	O No	• Yes • No	
Winter Road Maintenance	• Yes	○ No	• Yes • No	
Salt Storage		○ No	• Yes • No	
Solid Waste Management			● Yes ○ No	
New Municipal Construction and Land Disturba			• Yes • No	
Right of Way Maintenance	• Yes		• Yes • No	
Marine Operations	O Yes	• No	O Yes • No	
Hydrologic Habitat Modification			O Yes • No	
Parks and Open Space		O No	• Yes • No	
Municipal Building	A 17	○ No	● Yes ○ No	
Stormwater System Maintenance		○ No	• Yes O No	
Vehicle and Fleet Maintenance	• Yes	○ No	• Yes • No	
Other	$\cap \mathbf{v}_{-a}$	● No	○ Yes • No	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID			
Name of MS4/Coalition Town of Binghamton	NYR2	0 A 0	0 9)
2. Provide the following information about municipal operations g	good housekeep	ing pro	gram	s:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres			2
• Streets Swept (Number of miles X Number of times swept)	# Miles		3 (0
Catch Basins Inspected and Cleaned Where Necessary	#	2	0 (0
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#		(0
O Phosphorus Applied In Chemical Fertilizer	# Lbs.			0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.		(0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres =		•	
3. How many stormwater management trainings have been provided during this reporting period?	led to municipa	l emplo		2
4. What was the date of the last training?	10/27	/ 2 0	1 '	7
5. How many municipal employees have been trained in this report	rting period?			4
6. What percent of municipal employees in relevant positions and stormwater management training?	departments r	eceive	0	%

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Town of Binghamton	N Y R 2 0 A 0 0 9
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Self assess municipal operations and train personnel in procedure	es.
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Self assessment has identified potential pollutants and training has Eight additional training elements were covered.	as promoted proper procedures.
C. How many times was this observation measured or evalua	ted in this reporting period?
D. Has your MS4 made progress toward this measurable goa	(ex.: samples/participants/event I during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation scho	eet the goals of this MCM during edule).
Continue training and proper procedures. Implement capital improvement projects to reduce pollutants of o	concern.
ALLEGO TO THE STATE OF THE STAT	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

		SPL	DES	ID					
Name of MS4/Coalition Town of Binghamton	Town of Binghamton	N	_	R	2	0	Α	0	9
		<u> </u>					•		

On behalf of an individual M On behalf of a coalition		10	
•	ls contributed to this re		
S4s must answer the que	.,	s indicated in the table	below.
MS4 Description	Answer	CHEERIVA	1 - 1
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	-		Plb
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,3,00,10,11,12	1 1103PHOTUS
Oyster Bay	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Land Use	1,4,7a-d,9,10,11,12 1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use Non-Traditional	1,4,7a-d,9,10,11,12	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary	1,4,74-4,7	2,5,1,5,023,00,10,11,1	-
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	-		Dothoons
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens Pothogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b 5,6,8a,8b,10,11,12	Pathogens Pathogens
Non-Traditional	1,2,3,4,7a-d,9	J,0,68,60,10,11,12	Tatrogeno
Does your MS4/Coaliti phosphorus/nitrogen/p	on have an education athogens on waterboo	program addressing in dies?	mpacts of ○ Yes ○ No ●

This report is being submitted for the reporting period ending March 9, 2018

		SPDES ID		
Nar	me of MS4/Coalition Town of Binghamton	N Y R 2	0 A 0	0 9
3.	Does your MS4/Coalition have a Stormwater Conveyance Sand Maintenance Plan Program?	System (infrastructu O Yes	re) Insp O No	ection
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report	stems that have been ing period?	inspect	ted %
5.	Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Discharg (GP-0-08-001) to reduce pollutants in stormwater runoff fr disturb five thousand square feet or more?	ges from Constructio	n Activ	ities
6.	Has your MS4/Coalition developed a program to address prunoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Actithe New York State Stormwater Design Manual Enhanced Standards?	that disturb greater NYS DEC SPDES (vities (GP-0-08-001)	than or General , includi	•
7a	Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?	educe erosion or O Yes	O No	O N/A
7b	.How many projects have been sited in this reporting period	d?		
7c.	What percent of the projects included in 7b have been com	pleted in this report	ing peri	od?
7d	.What percent of projects planned in previous years have b			%
		O No	Projects	Planned
8a	Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper fertilizer application lands?	f management pract ion on municipally o ○ Yes	ices and wned O No	O N/A
8b	.Has your MS4/Coalition developed and implemented a tur procedures policy that addresses proper disposal of grass of municipally owned lands?	f management pract clippings and leaves ○ Yes	ices and from O No	0 n/a

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Town of Binghamton		SPDES ID N Y R 2	0 A 0	0 9
9. Has your MS4/Coalition developed	and implemented a program of	native plant	ting? ○No	O N/A
10. Has your MS4/Coalition enacted a prohibiting goose feeding?	local law prohibiting pet waste o			rties and O N/A
11. Does your MS4/Coalition have a pe	et waste bag program?	○ Yes	O No	O N/A
12. Does your MS4/Coalition have a propopulations?	ogram to manage goose	○ Yes	O No	O N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 8

		SPDES	ID .	
Name of MS4/Coalition Town of Chenengo		N Y	R 2 0 Z	A 1 2 7
Minimum Control Measure 6. Stor	mwater Manage	ment for Mu	inicipal (<u>Operations</u>
The information in this section is being reported	(check one):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to 	this report?			
1. Choose/list each municipal operation/fa Pollutants of Concern to the MS4 syste operation/facility has been addressed in Program(SWMP) Plan and whether a reporting period. A self-assessment is potentially generated by the permittee' effectiveness of existing programs and that will be addressed by the pollution not done already.	m. For each operate the MS4's/Coalities self-assessment has performed to: 1) des operations and facts of the much the mu	tion/facility ind on's Stormwat been perform termine the so cilities; 2) eval nicipal operation housekeepin	dicate whe fer Manag ed during urces of po uate the ons and fa ng progran	ether the ement the ollutants acilities n, if it's
		-	<u>Self-Assessi</u> tion/Activi	
				the past 3
Operation/Activity/Facility	Addressed in S		<u>years?</u>	=
Street Maintenance		No		O No
Bridge Maintenance		No		● No
Winter Road Maintenance	● Yes 〇	No	🖝 Yes	○ No

Operation/Activity/Facility	<u>Addressed iı</u>	n SWMP?	<u>years?</u>	•
Street Maintenance	• Yes	○ No	• Yes	○ No
Bridge Maintenance	O Yes	● No	O Yes	No
Winter Road Maintenance		O No	• Yes	\circ No
Salt Storage		○ No	• Yes	O No
Solid Waste Management		● No	O Yes	No
New Municipal Construction and Land Disturbar		○ No	O Yes	No
Right of Way Maintenance	—	○ No	O Yes	No
Marine Operations		• No	O Yes	No
Hydrologic Habitat Modification		● No	O Yes	No
Parks and Open Space		○ No	O Yes	No
Municipal Building	A 37	○ No	O Yes	No
Stormwater System Maintenance		○ No	• Yes	\bigcirc No
Vehicle and Fleet Maintenance		○ No	O Yes	No
Other	$\sim u$.	• No	O Yes	No

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

	SPDES ID			
Name of MS4/Coalition Town of Chenengo	N Y R 2	0 A	1 2	7
2. Provide the following information about municipal operations g	ood housekeer	ing pr	ograi	ms:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres			1
• Streets Swept (Number of miles X Number of times swept)	# Miles		6	6
Catch Basins Inspected and Cleaned Where Necessary	#		1 0	0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#			2
O Phosphorus Applied In Chemical Fertilizer	# Lbs.			
O Nitrogen Applied In Chemical Fertilizer	# Lbs.			
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Numbe times applied to the nearest tenth.)	# Acres r of		,	
3. How many stormwater management trainings have been provid	ed to municipa	al empl	loyee	S
during this reporting period?				1
4. What was the date of the last training?	0 1 / 2 4	/ 2	0 1	. 8
5. How many municipal employees have been trained in this report	ting period?	Ę Į		2
6. What percent of municipal employees in relevant positions and stormwater management training?	departments r	1 1	0 0]%

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Town of Chenengo	N Y R 2 0 A 1 2 7
7. Evaluating Progress Toward Measurable Goals MCM	6
Use this page to report on your progress and project plans to identified in your Stormwater Management Program Plan (S' III.C.1. Submit additional pages as needed.	vard achieving measurable goals WMPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in	he SWMPP in this reporting period.
Continue to maintain a clean fleet, hydroseed exposed ares a sand application, as well as chemical applications (fertilizers	nd ditches, control wasteful salt and s, etc.). Staff training ongoing.
B. Briefly summarize the observations that indicated the Goal.	overall effectiveness of this Measurable
No noticeable runoff problems noted or reported associated	within municipal facilities
C. How many times was this observation measured or ev	aluated in this reporting period?
	(ex.: samples/participants/eve
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?
F. Briefly summarize the stormwater activities planned the next reporting cycle (including an implementation	o meet the goals of this MCM during schedule).
Continue to improve on staff training and log of imrovemen recreation.	ts. Possible IPM programs for parks and

This report is being submitted for the reporting period ending March 9, 2 0 1 8

		t Strategy Best Mai	
he information in this section	is being reported (check	cone):	
On behalf of an individual NO On behalf of a coalition How many MS4	AS4 4s contributed to this re	eport?	
MS4s must answer the que	estions or check NA a		
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	1.67. 18-0	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Land Use Traditional Non-Land Use	1,6,7a-d,8a,9 1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	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 Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	- Filospilotus
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		22560	Pathogens and Nitrogen
Traditional Land Use	1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b 2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use 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

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

		SPI	DES ID		
Name of MS4/C	Coalition Town of Chenengo	N	Y R 2	0 A 1	2 7
3. Does your and Main	r MS4/Coalition have a Stormwater Cont tenance Plan Program?	veyance System (infi	rastructui O Yes	re) Inspe	ection O N/A
4. Estimate and main	the percentage of on-site wastewater treatained or rehabilitated as necessary in th	itment systems that list reporting period?	have been	inspect	ed %
NYSDEC (GP-0-08-	MS4/Coalition developed a program that SPDES General Permit for Stormwater -001) to reduce pollutants in stormwater ive thousand square feet or more?	Discharges from Co	nstructio	n Activi	ities
runoff fro equal to o Permit fo	MS4/Coalition developed a program to a com new development and redevelopment one acre that provides equivalent protection Stormwater Discharges from Construction State Stormwater Design Manual Es?	projects that disturion to the NYS DEC tion Activities (GP-0	b greater SPDES ()-08-001),	than or General includi	
	r MS4/Coalition have a retrofitting progr us/nitrogen/pathogen loading?	ram to reduce erosio	on or O Yes	O No	O N/A
7b.How man	ny projects have been sited in this reporti	ng period?			
7c. What per	rcent of the projects included in 7b have	been completed in th	nis report	ing peri	od?
7d.What per	rcent of projects planned in previous year	rs have been comple	ted?		%
				Projects	Planned
8a.Has your procedur lands?	MS4/Coalition developed and implementes policy that addresses proper fertilizer	ted a turf manageme application on mun	ent practi icipally o O Yes	ices and wned O No	O N/A
procedur	MS4/Coalition developed and implementes policy that addresses proper disposal ally owned lands?	ted a turf managem of grass clippings an	ent practi id leaves t O Yes	ices and from O No	O N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Town of Chenengo	SPDES ID N Y R	2 0 A 1	2 7
9. Has your MS4/Coalition developed and implemented a pro-	rogram of native pla	anting?	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting prohibiting goose feeding?		pal prope es ○ No	
11. Does your MS4/Coalition have a pet waste bag program?	O Ye	es O No	O N/A
12. Does your MS4/Coalition have a program to manage good populations?	se ○ Ye	es O No	O N/A

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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 Conklin	SPDES ID N Y R 2 0 A 2 5 5
Minimum Control Measure 6. Stormwater Manage	ment for Municipal Operations
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	
1. Choose/list each municipal operation/facility that contribute Pollutants of Concern to the MS4 system. For each operation/facility has been addressed in the MS4's/Coalitie Program(SWMP) Plan and whether a self-assessment has reporting period. A self-assessment is performed to: 1) de potentially generated by the permittee's operations and face effectiveness of existing programs and 3) identify the municipal that will be addressed by the pollution prevention and good not done already.	cion/facility indicate whether the on's Stormwater Management been performed during the termine the sources of pollutants cilities; 2) evaluate the nicipal operations and facilities

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

		periorn	iea witiin	the past 3
Operation/Activity/Facility	Addressed in	n SWMP?	<u>years?</u>	•
Street Maintenance	🖲 Yes	○ No	. 🛡 Yes	○ No
Bridge Maintenance	• Yes	○ No	. • Yes	○ No
Winter Road Maintenance	_	○ No	. • Yes	\bigcirc No
Salt Storage	• Yes	○ No	. • Yes	O No
Solid Waste Management		● No	. O Yes	No
New Municipal Construction and Land Disturba		○ No	, • Yes	○ No
Right of Way Maintenance	A 11	○ No		○ No
Marine Operations	$\sim \tau$	• No	. O Yes	No
Hydrologic Habitat Modification	_	• No	. O Yes	No
Parks and Open Space	A 17	○ No	. • Yes	○ No
Municipal Building	A 17	○ No	. • Yes	○ No
Stormwater System Maintenance		○ No	. • Yes	○ No
Vehicle and Fleet Maintenance	A 17	○ No	. • Yes	\bigcirc No
Other	• Yes	○ No	. • Yes	○ No

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

	SPDES ID			
Name of MS4/Coalition Town of Conklin	N Y R 2	0 A	2 5	5
2. Provide the following information about municipal operations g	good housekeep	ing pr	ogran	ns:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres			3
• Streets Swept (Number of miles X Number of times swept)	# Miles		4	1
Catch Basins Inspected and Cleaned Where Necessary	#		3	9
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#			8
O Phosphorus Applied In Chemical Fertilizer	# Lbs.			
O Nitrogen Applied In Chemical Fertilizer	# Lbs.			
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres er of			
3. How many stormwater management trainings have been provide	led to municipa	al empl	oyees	3
during this reporting period?				2
4. What was the date of the last training?	10/27	/ 2	0 1	7
5. How many municipal employees have been trained in this report	rting period?	ĺ		2
6. What percent of municipal employees in relevant positions and stormwater management training?	departments r	eceive	5 0	%

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix} 8$

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 Conklin	No.		N Y R 2	0 A 2	5 5
7. Evaluating Prog	ress Toward Me	asurable Goals l	мсм 6			
Use this page to repoidentified in your State III.C.1. Submit additional state in the state of t	ort on your progres ormwater Manage tional pages as nee	ss and project pla ment Program Pl eded.	ns toward achie an (SWMPP), ii	ncluding require	ments in l	
A. Briefly summar Measurable goal is Also, to ensure that	to reduce pollutan	ts of concern thro	ugh the use of	good housekeep	•	
B. Briefly summar Goal.	ize the observation	ons that indicate	d the overall e	ffectiveness of t	his Meas	urable
Since relevant staff violations.	have been trained	on good houseke	eping practices	there have been	no repor	ted
C. How many time	s was this observ	ation measured	or evaluated in			
D. Has your MS4 1	nade progress to	ward this measu	rable goal duri			ticipants/even <mark>?</mark>
E. Is your MS4 on	schedule to meet	the deadline set	forth in the S	WMPP?	YesYes	○ No ○ No
F. Briefly summar the next reporti	ize the stormwate ng cycle (includir	er activities plan 1g an implement	ned to meet th ation schedule	e goals of this N).	MCM dui	ring
Continue to evaluate of concern. Continu	e good housekeep ue to attend storm	ing programs and water manageme	implement new nt trainings whe	v practices to rec en available.	duce polli	itants

This report is being submitted for the reporting period ending March 9, 2 0 1 8

		t Strategy Best Mai		
ne information in this section	n is being reported (check	c one):		
On behalf of an individual I	MS4			
On behalf of a coalition	4s contributed to this re	mort?		
How many MS	4s contributed to this re	sport:		
I S4s must answer the qu	estions or check NA a	s indicated in the table	below.	
MC4 Description	Answer	Check NA	(POC)	
MS4 Description NYC EOH Watershed	Austrei	- CHICKINI		
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 Phosphorus	
Traditional Non-Land Use	1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12	Phosphorus	
Non-Traditional Oyster Bay	1,4,0,7a-0,8a,9	2,3,3,60,10,11,12	-	
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	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen	
Traditional Land Use Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12 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 2,3,5,8b,10,11,12	Phosphorus Phosphorus	
Non-Traditional LI 27 Embayments	1,4,6,7a-d,8a,9	2,3,3,00,10,11,12	- roophorus	
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	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

	If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.
	SPDES ID
Na	me of MS4/Coalition Town of Conklin N Y R 2 0
3.	Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? O 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? $ \hspace{1.5cm} \bigcirc \hspace{.1cm} \text{Yes} \hspace{.1cm} \bigcirc \hspace{.1cm} \text{No} \hspace{.1cm} \bigcirc \hspace{.1cm} \text{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?
7a	Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading?
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?
	O 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?
8b	Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from

municipally owned lands?

○ Yes ○ No ○ N/A

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix} \begin{bmatrix} 1 & 8 \end{bmatrix}$

Name of MS4/Coalition Town of Conklin	SPDES ID N Y R 2	0	
9. Has your MS4/Coalition developed and implemented a pro	ogram of native plant ○ Yes		O N/A
10. Has your MS4/Coalition enacted a local law prohibiting per prohibiting goose feeding?			rties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	○ Yes	O No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	e O Yes	○ No	O N/A

not done already.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Name of MS4/Coalition TJOWN OF DICKINSON	SPDES ID N Y R 2 0 A 1 4 3
Minimum Control Measure 6. Stormwater Manageme	ent for Municipal Operations
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	
1. Choose/list each municipal operation/facility that contributes Pollutants of Concern to the MS4 system. For each operation operation/facility has been addressed in the MS4's/Coalition Program(SWMP) Plan and whether a self-assessment has be reporting period. A self-assessment is performed to: 1) deterpotentially generated by the permittee's operations and facility.	n/facility indicate whether the 's Stormwater Management een performed during the rmine the sources of pollutants

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

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

			performed within	the past 3
Operation/Activity/Facility	Addressed	in SWMP?	<u>years?</u>	
Street Maintenance	• Yes	○ No	• Yes	O No
Bridge Maintenance	○ Yes	● No	○ Yes	No
Winter Road Maintenance	_	○ No	• Yes	O No
Salt Storage	• Yes	○ No	• Yes	O No
Solid Waste Management		○ No	• Yes	O No
New Municipal Construction and Land Disturba		○ No	• Yes	O No
Right of Way Maintenance	A 77	○ No	• Yes	O No
Marine Operations		• № No	O Yes	No
Hydrologic Habitat Modification		● No	O Yes	No
Parks and Open Space	45 ₹ 7	○ No	• Yes	O No
Municipal Building		; ○ No	• Yes	O No
Stormwater System Maintenance		○ No	• Yes	O No
Vehicle and Fleet Maintenance		○ No	• Yes	O No
Other		○ No	O Yes	O No

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID		
Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2	0 A 1	4 3
2. Provide the following information about municipal operations	good housekeep	ing prog	rams:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres		5
• Streets Swept (Number of miles X Number of times swept)	# Miles		1 0
Catch Basins Inspected and Cleaned Where Necessary	#		4 7
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#		
Phosphorus Applied In Chemical Fertilizer	# Lbs.		0
Nitrogen Applied In Chemical Fertilizer	# Lbs.		0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Numb times applied to the nearest tenth.)	# Acres er of		,
3. How many stormwater management trainings have been providuring this reporting period?	ded to municipa	al employ	ees 6
4. What was the date of the last training?	12/00	/ 2 0	
5. How many municipal employees have been trained in this repo	orting period?		7
6. What percent of municipal employees in relevant positions and stormwater management training?	l departments r	eceive	0 %

This report is being submitted for the reporting period ending March 9, 2 0 1 8

		SPE	DES	עגי						
Name of MS4/Coalition T	DOWN OF DICKINSON	N	Y	R	2	0	A	1	4	3

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

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.

CLEANING OF STREETS AND PARKING LOTS, INSPECTION OF CATCHBASINS, AND GOOD HOUSEKEEPING. Measurable goal is to reduce pollutants of concern through the use of good housekeeping programs. Also, to ensure that all relevant staff receive good housekeeping training.

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

THE SWEEPING WAS DONE MORE THAN ONCE AND THE CATCHBASINS WERE INSPECTED. There has been a decrease in migration of materials to the streams and rivers due to catch basin and culvert cleaning. LEAF AND YARD WASTE ARE COLLECTED WEEKLY SPRING THROUGH FALL.

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

8	, F					
			5	0		
(ex.:	samples/	/par	tici,	pant	:s/events)

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

• Yes O No

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

• Yes O No

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

ALL EMPLOYEES GET GOOD HOUSEKEEPING TRAINING ONCE A YEAR. Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern. Continue to attend stormwater management training(s) when available.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	to below associated (about	- analy	
The information in this section On behalf of an individual M		. one).	
On behalf of a coalition			
How many MS4	ls contributed to this re	port?	
MS4s must answer the que	estions or check NA a	s indicated in the table	below.
	Anous	Check NA	(POC)
MS4 Description NYC EOH Watershed	Answer	- CRECK NA	-
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	- 1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Land Use 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 2,3,5,8b,10,11,12	Phosphorus Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,3,80,10,11,12	-
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		225696	Pathogens and Nitrogen
Traditional Land Use	1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b 2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use 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	2,3,5,86,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	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

This report is being submitted for the reporting period ending March 9, 2 0 1 8 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		SPDES ID		
Naı	ne of MS4/Coalition TOWN OF DICKINSON	N Y R 2	0 A 1	L 4 3
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (infrastructur O Yes	re) Insp O No	ection O N/A
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report	vstems that have been ting period?	inspec	eted %
5.	Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Dischar (GP-0-08-001) to reduce pollutants in stormwater runoff fidisturb five thousand square feet or more?	ges from Constructio	n Activ	ities
6.	Has your MS4/Coalition developed a program to address prunoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Actithe New York State Stormwater Design Manual Enhanced Standards?	s that disturb greater e NYS DEC SPDES (ivities (GP-0-08-001),	than or General includi	r i
7a	Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?	educe erosion or O Yes	O No	o n/a
7b	.How many projects have been sited in this reporting perio	d?		
7e	. What percent of the projects included in 7b have been con	npleted in this report	ing peri	iod?
7 d	. What percent of projects planned in previous years have b			%
		○ No	Projects	Planned
8a	Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper fertilizer applicate lands?	f managemeut practition on municipally o	wned	I O N/A
8b	.Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper disposal of grass municipally owned lands?	rf management pract clippings aud leaves O Yes	ices and from O No) O N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition TOWN OF DICKINSON	SPDES ID N Y R 2	0 A	1 4 3
9. Has your MS4/Coalition developed and implemented a program of	native plan	ting? ○ No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste of prohibiting goose feeding?			rties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	○ Yes	O No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	O No	O N/A

not done already.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

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 Endicott	SPDES ID N Y R 2 0 A 1 4 9
Minimum Control Measure 6. Stormwater Managemen	nt for Municipal Operations
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	
1. Choose/list each municipal operation/facility that contributes of Pollutants of Concern to the MS4 system. For each operation/soperation/facility has been addressed in the MS4's/Coalition's Program(SWMP) Plan and whether a self-assessment has been reporting period. A self-assessment is performed to: 1) determine the potentially generated by the permittee's operations and facilities.	facility indicate whether the Stormwater Management n performed during the nine the sources of pollutants

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

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

			periormeu	MICHITAL	the past 3
Operation/Activity/Facility	Addressed in	ı SWMP?	Y	<u>ears?</u>	
Street Maintenance	• Yes	○ No	•	Yes	O No
Bridge Maintenance		○ No	•	Yes	O No
Winter Road Maintenance	• Yes	○ No	•	Yes	O No
Salt Storage		○ No	•	Yes	O No
Solid Waste Management	• Yes	O No	•	Yes	\bigcirc No
New Municipal Construction and Land Disturba		○ No	•	Yes	O No
Right of Way Maintenance	A 77	○ No	•	Yes	O No
Marine Operations	\sim 37	• No		Yes	No
Hydrologic Habitat Modification	_	• No	0	Yes	No
Parks and Open Space	▲ 1 7	○ No	•	Yes	O No
Municipal Building	★ ₹ 7	○ No	•	Yes	\bigcirc No
Stormwater System Maintenance		○ No	•	Yes	O No
Vehicle and Fleet Maintenance		○ No	•	Yes	O No
Other					O No

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID					
Name of MS4/Coalition VILLAGE OF ENDICOTT	N Y R 2	0 7	A 1	4	9	
2. Provide the following information about municipal operations g	ood housekeep	ing	prog	ran	ıs:	
Parking Lots Swept (Number of acres X Number of times swept)	# Acres			2	0	
• Streets Swept (Number of miles X Number of times swept)	# Miles			8	5	
Catch Basins Inspected and Cleaned Where Necessary	#	5	0 0			
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#					
	# Lbs.			T		
O Phosphorus Applied In Chemical Fertilizer	# 1.08.					
O Nitrogen Applied In Chemical Fertilizer	# Lbs.					
O Pesticide/Herbicide Applied # Acres (Number of acres to which pesticide/herbicide was applied X Number of						
(Number of acres to which pesticide/nerolicide was applied X Number of times applied to the nearest tenth.)						
3. How many stormwater management trainings have been provide	led to municipa	ıl en	nploy	yees	ł	
during this reporting period?					2	
4. What was the date of the last training?	12/14]/[2 0	1	7	
5. How many municipal employees have been trained in this report	rting period?				2	
6. What percent of municipal employees in relevant positions and departments receive stormwater management training?						

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 8$

		SPDES ID
Name of MS4/Coalition Village of Endicott		N Y R 2 0 A 1 4 9
. Evaluating Progress Toward Measura	ble Goals MCM 6	
Jse this page to report on your progress and dentified in your Stormwater Management II.C.1. Submit additional pages as needed.	project plans toward ac Program Plan (SWMPF	chieving measurable goals P), including requirements in Part
A. Briefly summarize the Measurable Go	al identified in the SV	VMPP in this reporting period.
3. Briefly summarize the observations th Goal.	at indicated the overa	ll effectiveness of this Measurable
Jour		
C. How many times was this observation	measured or evaluate	ed in this reporting period?
How many times was this observation	mountain or or manage	
). Has your MS4 made progress toward	this measurable goal	(ex.: samples/participants/eve
		O Yes O No
E. Is your MS4 on schedule to meet the d	eadline set forth in th	e SWMPP? O Yes O No
F. Briefly summarize the stormwater act the next reporting cycle (including an	ivities planned to mee implementation sched	et the goals of this MCM during dule).

This report is being s If submitting this form	submitted for the re		
	as part of a joint repor	porting period ending I rt on behalf of a coalition I	March 9, eave SPDES ID blank.
ne of MS4/Coalition			SPDES ID N Y R 2 0
Additional Waters	hed Improvemen	t Strategy Best Mar	nagement Practices
e information in this section is	s being reported (check	c one):	
On behalf of an individual MS On behalf of a coalition			
How many MS4s	contributed to this re	port?	
S4s must answer the ques	tions or check NA a	s indicated in the table	below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed		-	-
raditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus Phosphorus
raditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9 1,2,77a-d,8a,8b,9	5,10,11,12 3,4,5,10,11,12	Phosphorus
on-Traditional Onondaga Lake Watershed	1,2,77a-u,6a,60,9	3,4,5,10,11,12	-
raditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
raditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
on-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	-	40	-
raditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
raditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
on-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay	1 47- 40 10 11 12	2,3,5,6,8a,8b	Pathogens
raditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
raditional Non-Land Use on-Traditional	1,4,7a-d,9,10,11,12 1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary	-	-	-
	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
ramatonal Land USE	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
raditional Non-Land Use	1,4,74-4,04,7		
raditional Land Use raditional Non-Land Use lon-Traditional Oscawana Lake Watershed	-	2 2 5 91. 12. 11. 12	Phoenharue
raditional Non-Land Use on-Traditional Oscawana Lake Watershed raditional Land Use	- 1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
raditional Non-Land Use on-Traditional Oscawana Lake Watershed raditional Land Use raditional Non-Land Use	- 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus Phosphorus
raditional Non-Land Use lon-Traditional Oscawana Lake Watershed raditional Land Use raditional Non-Land Use lon-Traditional	- 1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12 2,3,5,8b,10,11,12	Phosphorus
raditional Non-Land Use On-Traditional Oscawana Lake Watershed raditional Land Use raditional Non-Land Use Ion-Traditional LI 27 Embayments	- 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12	Phosphorus Phosphorus
raditional Non-Land Use lon-Traditional Oscawana Lake Watershed raditional Land Use raditional Non-Land Use lon-Traditional	- 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus Phosphorus Phosphorus

	This report is being submitted for the reporting period ending March 9, If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.
Na	me of MS4/Coalition SPDES ID N Y R 2 0
3.	Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? O 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? O Yes O No O 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?
7a	. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading?
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	i. What percent of projects planned in previous years have been completed?
	O 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? O Yes O No O N/A
8b	o.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? O Yes O No O N/A

This report is being submitted for the reporting period ending March 9, If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NY R 2 0 Name of MS4/Coalition 9. Has your MS4/Coalition developed and implemented a program of native planting? ○ Yes ○ No O N/A 10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and ○ Yes ○ No O N/A prohibiting goose feeding? O Yes O No O N/A 11. Does your MS4/Coalition have a pet waste bag program? 12. Does your MS4/Coalition have a program to manage goose O Yes O No O N/A populations?

This report is being submitted for the reporting period ending March 9, 2 0 1 8

Name of MS4/Coalition Town of Fenton	SPDES ID N Y R 2 0 A 0 7 8
Minimum Control Measure 6. Stor	rmwater 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?
Pollutants of Concern to the MS4 system operation/facility has been addressed in Program(SWMP) Plan and whether a reporting period. A self-assessment is potentially generated by the permittee effectiveness of existing programs and	Facility that contributes or may potentially contribute em. For each operation/facility indicate whether the in the MS4's/Coalition's Stormwater Management self-assessment has been performed during the performed to: 1) determine the sources of pollutants 's operations and facilities; 2) evaluate the d 3) identify the municipal operations and facilities a prevention and good housekeeping program, if it's Self-Assessment Operation/Activity/Facility
Operation/Activity/Facility	Addressed in SWMP? years? Yes O No Yes O No

			performed	<u>within</u>	the past 3
Operation/Activity/Facility	Addressed in	n SWMP?	Y	<u>ears?</u>	
Street Maintenance	• Yes	○ No	•	Yes	O No
Bridge Maintenance		● No	O	Yes	No
Winter Road Maintenance		○ No		Yes	O No
Salt Storage		○ No	•	Yes	O No
Solid Waste Management		○ No	•	Yes	O No
New Municipal Construction and Land Disturba		○ No	C	Yes	No
Right of Way Maintenance	A 17	O No	, •	Yes	○ No
Marine Operations		• No	C	Yes	No
Hydrologic Habitat Modification		• No	C	Yes	No
Parks and Open Space	A 7.7	O No		Yes	O No
Municipal Building	A 17	O No		Yes	O No
Stormwater System Maintenance		○ No		Yes	O No
Vehicle and Fleet Maintenance	• Yes	○ No	•	Yes	O No
Other	O Yes	● No		Yes	No

This report is being submitted for the reporting period ending March 9, 2 0 1 8

	SPDES ID					
Name of MS4/Coalition Town of Fenton	NYR2	0	A	0	7	8
2. Provide the following information about municipal operations go	od housekee _l	oing	pr	ogr	am	is:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres					5
Streets Swept (Number of miles X Number of times swept)	# Miles				4	9
Catch Basins Inspected and Cleaned Where Necessary	#				5	0
O Post Construction Control Stormwater Management Practices	#					0
Inspected and Cleaned Where Necessary			1			
O Phosphorus Applied In Chemical Fertilizer	# Lbs.					0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.					0
O Pesticide/Herbicide Applied	# Acres			(0
(Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	01					
	od to municin	al e	mn	lov	ees	
3. How many stormwater management trainings have been provide during this reporting period?	u to mumerp					0
		ـــــــــــــــــــــــــــــــــــــ	I			
4. What was the date of the last training?	1 1 / 0 5	5] /	2	0	1	5
5. How many municipal employees have been trained in this report	ing period?					0
6. What percent of municipal employees in relevant positions and d stormwater management training?	ерагинентя	cce			0	%

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 To	own of Fenton		N Y R 2 0 A 0	7 8
7. Evaluating Progr	ess Toward Measurable Goal	s MCM 6		
Use this page to repor identified in your Stor III.C.1. Submit addition	t on your progress and project prowater Management Program onal pages as needed.	olans toward achievi Plan (SWMPP), incl	ng measurable goals luding requirements in	Part
A. Briefly summariz	e the Measurable Goal identi	fied in the SWMPP	in this reporting per	iod.
New Staff orientation	to include operations and meth	nods		
B. Briefly summariz Goal.	ze the observations that indica	ited the overall effe	ectiveness of this Meas	surable
No issues				
C. How many times	was this observation measure	ed or evaluated in t		0
D. Has your MS4 m	ade progress toward this mea	surable goal durin	ex.: samples/pa g this reporting perio	
			• Yes	O No
E. Is your MS4 on se	chedule to meet the deadline	set forth in the SW	MPP?	O No
F. Briefly summariz	ze the stormwater activities pl g cycle (including an impleme	lanned to meet the entation schedule).	goals of this MCM du	ring
Additional Staff Train	ning			
			WENTER CONTROL OF THE PARTY OF	

		SPL	DES	ID						
Name of MS4/Coalition Town of Fenton		N	Y	R	2	0	Α	0	7	8
Name of MS4/Coantion	7									

On behalf of a coalition	1S4		
	s contributed to this re	port?	
S4s must answer the que	estions or check NA as	s 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	*	0.2.4.5.01.10.11.10	Phosphorus
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	2,3,4,5,85,10,11,12	1 Hospitorus
Greenwood Lake Watershed	1467-1960	2,3,5,8b,10,11,12	Phosphorus
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	2,3,5,86,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,2,200,10,11,12	-
Oyster Bay	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
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 1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Non-Traditional Peconic Estuary	1,77,74 43,7	_	
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	-	-	Pothorana
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 Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	T Fathogens

		SPDES ID		
Nai	ne of MS4/Coalition Town of Fenton	N Y R 2	0 A 0	7 8
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (infrastructu • Yes	ı re) İnsp O No	oection O N/A
4.	Estimate the percentage of on-site wastewater treatment s and maintained or rehabilitated as necessary in this report	ystems that have bee ting period?	n inspec	eted 0 %
5.	Has your MS4/Coalition developed a program that provid NYSDEC SPDES General Permit for Stormwater Dischar (GP-0-08-001) to reduce pollutants in stormwater runoff f disturb five thousand square feet or more?	rges from Constructi	on Activ	rities
6.	Has your MS4/Coalition developed a program to address runoff from new development and redevelopment project equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Acre the New York State Stormwater Design Manual Enhance Standards?	s that disturb greate ne NYS DEC SPDES tivities (GP-0-08-001)	r tnan of General), includ	r I
7a	. Does your MS4/Coalition have a retrofitting program to a phosphorus/nitrogen/pathogen loading?	reduce erosion or O Yes	• No	O N/A
7 t	.How many projects have been sited in this reporting perio	od?		0
70	. What percent of the projects included in 7b have been co	mpleted in this repor	ting per	iod?
70	I. What percent of projects planned in previous years have	been completed?		0 %
		• N	o Project	s Planned
82	a. Has your MS4/Coalition developed and implemented a tu procedures policy that addresses proper fertilizer applica lands?	rf management praction on municipally Yes	ownea	
81	o.Has your MS4/Coalition developed and implemented a tu procedures policy that addresses proper disposal of grass	s clippings and leaves	from	
	municipally owned lands?	Yes	O No	O N/A

Name of MS4/Coalition Town of Fenton	SPDES I		0 A 0	7 8
9. Has your MS4/Coalition developed and implemented a pr	ogram of native	planti Yes	ng? O No	• N/A
10. Has your MS4/Coalition enacted a local law prohibiting p prohibiting goose feeding?	et waste on mun	icipal Yes	proper O No	ties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	•	Yes	O No	O N/A
12. Does your MS4/Coalition have a program to manage goos	j e	Yes	• No	O N/A

On behalf of a coalition

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Minimum Control Measure 6. Stormwater Manageme	ent for Municipal Operations
Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
	SPDES ID
it submitting this form as part of a joint report on ourself of	

The information in this section is being reported (check one):
On behalf of an individual MS4

How many MS4s contributed to this report?

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

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

			periorinea waterin	the past of
Operation/Activity/Facility	Addressed in	SWMP?	<u>years?</u>	
Street Maintenance	• Yes	○ No	• Yes	O No
Bridge Maintenance	O Yes	● No	○ Yes	No
Winter Road Maintenance	• Yes	O No	• Yes	\bigcirc No
Salt Storage		O No	• Yes	O No
Solid Waste Management		O No	• Yes	O No
New Municipal Construction and Land Disturba		O No	Yes	O No
Right of Way Maintenance		O No	• Yes	O No
Marine Operations	O V		○ Yes	No
.	~ **		○ Yes	No
Hydrologic Habitat Modification	A 37 .		• Yes	O No
Parks and Open Space			• Yes	O No
Municipal Building		*	■ Yes	O No
Stormwater System Maintenance			• Yes	O No
Vehicle and Fleet Maintenance	O Vos		○ Yes	O No
Other	🔾 163	○ 140 ,		··

	SPDES ID N Y R 2	0 A 1	0 1
Name of MS4/Coalition Village of Johnson City	N Y R 2	<u> </u>	<u> </u>
2. Provide the following information about municipal operations g	good housekeepi	ing progi	ams:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres		3
• Streets Swept (Number of miles X Number of times swept)	# Miles	2 0	8 0
• Catch Basins Inspected and Cleaned Where Necessary	#	5	0 0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	# [8
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.		0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres er of	0	0].
3. How many stormwater management trainings have been providuring this reporting period?	ded to municips	al employ	rees
4. What was the date of the last training?	0 3 / 0 5	/ 2 0	1 8
5. How many municipal employees have been trained in this repo	orting period?		2 7
6. What percent of municipal employees in relevant positions and stormwater management training?	d departments r	eceive 1 0	0 %

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

	SPDES ID N Y R 2 0 A 1 0 1
Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward achiev identified in your Stormwater Management Program Plan (SWMPP), incl. III.C.1. Submit additional pages as needed.	ing measurable goals cluding requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMP	P in this reporting period.
The Village continues to train employees regarding municipal operation contribute POCs to the MS4 system.	ns that could possibly
B. Briefly summarize the observations that indicated the overall eff.	
During this reporting period the street sweeper was utilized 416 hours, 360 hours for cleaning catchbasins, the loader/backhoe were utilized 28 ditches and a total of 1,060 manhours were utilized for this Measurable re-construction projects, CBs are replaced with castings that have "No loads are replaced with castings are	Goal. Also, during street
C. How many times was this observation measured or evaluated in	this reporting period? 1 3 2 (ex.: samples/participants/events.
D. Has your MS4 made progress toward this measurable goal during	
E. Is your MS4 on schedule to meet the deadline set forth in the SV	VMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule)	e goals of this MCM during
The Village will continue to train employees responsible for municipal potentially contribute to the MS4 system. The Village will continue its sweeping, cathchasin cleaning, creek/open ditch maintenance and instamarkers.	s operations of street

	SPD	ES	ID						
Name of MS4/Coalition Broome-Tioga Stormwater Coalition	N	Y	R	2	0	С	0	0	2

	is being reported (check	one):	
On behalf of an individual N On behalf of a coalition			
How many MS ²	4s contributed to this re	port?	
184s must answer the qu	estions or check NA as	s 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	-	0.3.4.5.01.10.11.10	Phosphorus
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	T ROSPITOTUS
Greenwood Lake Watershed	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
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 Oyster Bay	1,4,0,74-4,04,7	-	-
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	2,3,5,6,86	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	-		Phosphorus
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	2,3,5,86,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	I nospilorus
LI 27 Embayments	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
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	5,6,8a,8b,10,11,12	Pathogens

						SPDES ID		,,
Nar	ne of MS4/Coalition	Broome-Tioga Stormw	vater Coalition			N Y R 2	0 C 0	0 2
3.	Does your MS4 and Maintenan	/Coalition have ace Plan Program	a Stormwater m?	Conveyance	System (infrastructur • Yes	e) Inspe O No	ection
4.	Estimate the po and maintained	ercentage of on- d or rehabilitate	site wastewate ed as necessary	r treatment s in this repor	ystems the	nat have been od?	inspect	ed %
5.	NYSDEC SPD (GP-0-08-001)	Coalition develes General Per to reduce pollut ousand square f	mit for Stormy lants in stormy	vater Dischai	rges from	Constructio	n Activi vities th	nes at
6.	runoff from ne equal to one ac	Coalition develow development ore that provide rmwater Discha State Stormwat	and redevelop s equivalent pr arges from Con	ment project otection to th struction Ac	s that dis ie NYS D tivities (C	turb greater EC SPDES (FP-0-08-001),	tnan or Seneral includi ai	
7я	. Does your MS phosphorus/ni	4/Coalition have trogen/pathoge	e a retrofitting n loading?	program to I	reduce er	osion or ● Yes	O No	O N/A
7k	.How many pr	ojects have been	sited in this r	eporting peri	od?			0
70	. What percent	of the projects i	included in 7b	have been co	mpleted i	n this report	ing peri	od?
70	l.What percent	of projects plan	ned in previou	ıs years have	been con			0 %
						O No	Projects	Planned
8:	a.Has your MS4 procedures po lands?	/Coalition deve	loped and imp sses proper fer	lemented a tu tilizer applica	ırf manaş ation on 1	gement pract nunicipally o ○ Yes	ices and wned O No	I ● N/A
8	b.Has your MS4 procedures pe municipally o	4/Coalition deve blicy that addres wned lands?	loped and imp sses proper dis	lemented a tu posal of grass	ırf mana s clippinş	gement pract gs and leaves ● Yes	tices and from O No	i O N/A

	NYR2	0 C C	0 2
9. Has your MS4/Coalition developed and implemented a program of	native plan ○ Yes	ting? ○ No	• N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste o prohibiting goose feeding?	on municipa ● Yes	l propei O No	rties and ON/A
11. Does your MS4/Coalition have a pet waste bag program?	O Yes	• No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	• No	O N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 Kirkwood	ИĀ	R	2	0 7	A C	7	2

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	

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

Self-Assessment Operation/Activity/Facility performed within the past 3 years? Addressed in SWMP? Operation/Activity/Facility Street Maintenance.....

Yes ○ No • Yes O No ● No ○ Yes No Bridge Maintenance..... O Yes ○ No • Yes O No Winter Road Maintenance.....

Yes O No Salt Storage..... 9 Yes ○ No • Yes Solid Waste Management..... O Yes ● No ○ Yes No O No New Municipal Construction and Land Disturbance..

Yes ○ No • Yes ○ No • Yes Right of Way Maintenance.....

Yes O No No ● No ○ Yes Marine Operations..... O Yes No Hydrologic Habitat Modification..... O Yes ● No ○ Yes ○ No • Yes O No Parks and Open Space..... • Yes O No Municipal Building..... • Yes ○ No Yes O No Stormwater System Maintenance..... • Yes ○ No • Yes ○ No • Yes \bigcirc No Vehicle and Fleet Maintenance.....

Yes O No ● Yes O No Other...... • Yes

	SPDES ID		
Name of MS4/Coalition Town of Kirkwood	NYR2	0 A 0	7 2
	and howastroom	ing prog	rome:
2. Provide the following information about municipal operations	good nousekeep	ang prog	amsı
 Parking Lots Swept (Number of acres X Number of times swept) 	# Acres		5
• Streets Swept (Number of miles X Number of times swept)	# Miles		4 4
Catch Basins Inspected and Cleaned Where Necessary	#	1	6 0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		3
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.		0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Numb times applied to the nearest tenth.)	# Acres er of		0.0
3. How many stormwater management trainings have been provi	ded to municipa	al employ	ees
during this reporting period?	•		2
4. What was the date of the last training?	10/27	/ 2 0	1 7
5. How many municipal employees have been trained in this repo	orting period?		2
6. What percent of municipal employees in relevant positions and stormwater management training?	l departments r	eceive 5	0 %

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

	SPDES ID N Y R 2 0 A 0 7 2
Name of MS4/Coalition Town of Kirkwood	N I K Z O K O / Z
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWN III.C.1. Submit additional pages as needed.	rd achieving measurable goals MPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the	
Measurable goal is to reduce pollutants of concern through the Also, to ensure that all relevant staff receive good housekeepin	use of good housekeeping programs. g training.
B. Briefly summarize the observations that indicated the ov Goal.	verall effectiveness of this Measurable
Since staff have been trained on good housekeeping practices t	there have been no reported violations.
C. How many times was this observation measured or evalu	uated in this reporting period?
D. Has your MS4 made progress toward this measurable go	
E. Is your MS4 on schedule to meet the deadline set forth in	n the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to the next reporting cycle (including an implementation so	meet the goals of this MCM during chedule).
Continue to evaluate good housekeeping programs and implen of concern. Continue to attend stormwater management training	nent new practices to reduce pollutants ng(s) when available.

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Additional Water	Shed Improvemen	t Strategy Best Mai	
The information in this section	is being reported (check	cone):	
On behalf of an individual NO On behalf of a coalition			
How many MS4 MS4s must answer the quo	4s contributed to this re		helow.
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	*	-	Phosphorus
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	raospaolus
Greenwood Lake Watershed	1467-4900	2,3,5,8b,10,11,12	Phosphorus
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,85,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,3,80,10,11,12	-
Oyster Bay Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Land Use 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	1,4,74 4,5	-	-
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	2,3,4,5,86,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	-		-
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,85,10,11,12	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	*	-	- n d
	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b 5,6,8a,8b,10,11,12	Pathogens
			Pathogens

			SPDES ID		
Nar	me of MS4/Coalition Town of Kirkwood		N Y R 2	0 A 0	7 2
3.	Does your MS4/Coalition have a Stormwater Conveyar and Maintenance Plan Program?	nce System	(infrastructur	re) Inspo	ection O N/A
4.	Estimate the percentage of on-site wastewater treatment and maintained or rehabilitated as necessary in this report to the percentage of on-site wastewater treatment and maintained or rehabilitated as necessary in this report to the percentage of on-site wastewater treatment and maintained or rehabilitated as necessary in this report to the percentage of on-site wastewater treatment and maintained or rehabilitated as necessary in this report to the percentage of on-site wastewater treatment and maintained or rehabilitated as necessary in this report to the percentage of on-site wastewater treatment and maintained or rehabilitated as necessary in this report to the percentage of the perce	nt systems (porting per	that have beer riod?	i inspect	ted %
5.	Has your MS4/Coalition developed a program that pro NYSDEC SPDES General Permit for Stormwater Disc (GP-0-08-001) to reduce pollutants in stormwater runo disturb five thousand square feet or more?	charges from	m Constructio	n Activi	ities
6.	Has your MS4/Coalition developed a program to address runoff from new development and redevelopment projection to one acre that provides equivalent protection to Permit for Stormwater Discharges from Construction the New York State Stormwater Design Manual Enhant Standards?	jects that di o the NYS l Activities (isturb greater DEC SPDES (GP-0-08-001),	than or General , includi	
7a.	. Does your MS4/Coalition have a retrofitting program of phosphorus/nitrogen/pathogen loading?	to reduce e	rosion or ○ Yes	O No	O N/A
7b	.How many projects have been sited in this reporting p	eriod?			
7c.	. What percent of the projects included in 7b have been	completed	in this report	ing peri	od?
7d	. What percent of projects planned in previous years ha	ve been co	mpleted?		%
				Projects	
8a	.Has your MS4/Coalition developed and implemented a procedures policy that addresses proper fertilizer appl lands?	turf mana lication on	gement pract municipally o O Yes	ices and wned O No	O N/A
8b	.Has your MS4/Coalition developed and implemented a procedures policy that addresses proper disposal of gr municipally owned lands?	a turf mana ass clippin	ngement pract gs and leaves O Yes	ices and from ○ No	O N/A

Name of MS4/Coalition Town of Kirkwood	SPDES ID N Y R 2	0 A 0	7 2
9. Has your MS4/Coalition developed and implemented a progr	ram of native plant ○ Yes	ing? ○ No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet v prohibiting goose feeding?	waste on municipal O Yes	propei O No	rties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	○ Yes	○ No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	O No	O N/A

This report is being submitted for the reporting period ending March 9, 2018

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

Town of Owego		SPDES NYR2	ID 0A079	
Name of MS4/Coalition				
Minimum Control Measure 6. Stormw	ater Mana	ngement for Mu	nicipal (<u>Operations</u>
The information in this section is being reported (chec	ck one):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this 	report?			
1. Choose/list each municipal operation/facility Pollutants of Concern to the MS4 system. It is operation/facility has been addressed in the Program(SWMP) Plan and whether a self-reporting period. A self-assessment is perfectiveness of existing programs and 3) it that will be addressed by the pollution prevent done already.	For each open MS4's/Coal assessment loans to the comment of the contract of th	eration/facility ind lition's Stormwate has been performe determine the sou I facilities; 2) evalu municipal operation	icate wheer Managed during irces of plate the ons and fa	ether the ement the ollutants
		_	elf-Assess	
				ty/Facility 1 the past 3
Operation/Activity/Facility	<u>Addressed i</u>		years?	
Street Maintenance		○ No ,		○ No
Bridge Maintenance		○ No		○ No
Winter Road Maintenance	_	○ No		○ No
Salt Storage	_	○ No		\bigcirc No
Solid Waste Management		• No	O Yes	\bigcirc No
New Municipal Construction and Land Disturbar		○ No	• Yes	○ No
Right of Way Maintenance	• Yes	○ No	• Yes	O No
Marine Operations	~ T.	• No	O Yes	\bigcirc No
Hydrologic Habitat Modification		○ No		\bigcirc No
Parks and Open Space		O No	• Yes	O No
Municipal Building		○ No	• Yes	O No

○ No • Yes

○ No • Yes

○ No ○ Yes

O No

 \bigcirc No

O No

Stormwater System Maintenance.....

Vehicle and Fleet Maintenance.....

Yes

Other..... O Yes

	SPDES ID	
Name of MS4/Coalition Town of Owego	NYR20A079	
2. Provide the following information about municipal operations	good housekeeping p	rograms:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres	1
• Streets Swept (Number of miles X Number of times swept)	# Miles	44
© Catch Basins Inspected and Cleaned Where Necessary	# 2	80
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#	4
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Numb times applied to the nearest tenth.)	# Acres 0	
3. How many stormwater management trainings have been providuring this reporting period?	ded to municipal em	ployees
4. What was the date of the last training?	10/27/2	2 0 1 7
5. How many municipal employees have been trained in this repo	orting period?	1
6. What percent of municipal employees in relevant positions and stormwater management training?	l departments receiv	e 50 %

This report is being submitted for the reporting period ending March 9, 2018

If submitting this form as part of a joint report	rt on behalf of a coalition lea	ave SPDES ID blank.
		PDES ID
Name of MS4/Coalition Town of Owego	N	YR20A079
7. Evaluating Progress Toward Measurable Go	oals MCM 6	
Use this page to report on your progress and project identified in your Stormwater Management Program III.C.1. Submit additional pages as needed.	t plans toward achieving im Plan (SWMPP), includi	measurable goals ing requirements in Part
A. Briefly summarize the Measurable Goal ider	ntified in the SWMPP in	this reporting period.
Provide educational material and training opportuninformed of local, state and/or federal regulations.	nities to municipal work c	rews to keep them
B. Briefly summarize the observations that indi Goal. Broome Tioga Stormwater Coaliation provided M	, Allen Marketter () Alle	
Diomic Toga Stormmater Common provider		
C. How many times was this observation measu	red or evaluated in this	reporting period?
•		[1] (ex.: samples/participants/ev
D. Has your MS4 made progress toward this m	easurable goal during th	
E. Is your MS4 on schedule to meet the deadlin	e set forth in the SWMF	PP? • Yes • No
F. Briefly summarize the stormwater activities the next reporting cycle (including an imple	planned to meet the goamentation schedule).	ls of this MCM during
Create inventory of landscaping and lawn care are activities and road maintenance activities.		cles, maintenance

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

			SPDES ID	
Name of MS4/Coalition VILLAGE OF PORT DICKINSON			N Y R 2 0	0 8 0 A
Minimum Control Measure 6. Stormy	vater Mana	gement fo	r Municipal (<u>Operations</u>
The information in this section is being reported (che	eck one):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this 	report?			
1. Choose/list each municipal operation/facility Pollutants of Concern to the MS4 system. operation/facility has been addressed in the Program(SWMP) Plan and whether a self-reporting period. A self-assessment is peripotentially generated by the permittee's operfectiveness of existing programs and 3) that will be addressed by the pollution prenot done already.	For each open MS4's/Coal-assessment of the formed to: 1) becations and identify the terminal formething the terminal formethin	eration/facili lition's Stor nas been per determine (facilities; 2 nunicipal op good housek	ity indicate when mwater Manag formed during the sources of p evaluate the perations and faceeping program Self-Assess Operation/Activi	ether the ement the ollutants acilities m, if it's
and the state of t	A .1.1			the past 3
Operation/Activity/Facility	Addressed i	n SWMP?	<u>years?</u>	the past 3
Street Maintenance	• Yes	<u>n SWMP?</u> ○ No	<u>years?</u> ● Yes	the past 3 O No
Street Maintenance	● Yes	o No ● No	<u>years?</u> 	O No No
Street Maintenance Bridge Maintenance Winter Road Maintenance	• Yes • Yes • Yes	• No • No	years? ● Yes ○ Yes ● Yes	• the past 3 • No • No • No • No
Street Maintenance	YesYesYesYesYes	o No ○ No ○ No ○ No	years?	 No No No No No No No
Street Maintenance	YesYesYesYesYesYes	No	years?	O No No No No No No No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage	• Yes • Yes • Yes • Yes • Yes • Yes • Yes nce. • Yes	No	years?	 No No No No No No No No No No No No No
Street Maintenance	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	No	years?	 No No No No No No No No No No No No No No No
Street Maintenance	• Yes • Yes • Yes • Yes • Yes • Yes nce • Yes • Yes • Yes • Yes • Yes • Yes	No	years?	 No No No No No No No No No No No No No No No No No
Street Maintenance	 Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes 	No	years?	 ∴ No ∴ No ∴ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No
Street Maintenance	 Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes 	No	years?	 No No No No No No No No No No No No No No No No No No No No No No No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturba Right of Way Maintenance Marine Operations Hydrologic Habitat Modification Parks and Open Space	• Yes • Yes • Yes • Yes • Yes nce • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	No	years?	 ∴ No ∴ No ∴ No ∴ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No
Street Maintenance	 Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes 	No	years?	 No No No No No No No No No No No No No No No No No No No No No No No No No No No

Other..... O Yes • No O Yes • No

	SPDES ID		
Name of MS4/Coalition VILLAGE OF PORT DICKINSON	N Y R 2	0 A C	0 8 0
2. Provide the following information about municipal operations	good housekeep	ing pro	grams:
 Parking Lots Swept (Number of acres X Number of times swept) 	# Acres		2
• Streets Swept (Number of miles X Number of times swept)	# Miles		9
Catch Basins Inspected and Cleaned Where Necessary	#		1 8
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#		
Phosphorus Applied In Chemical Fertilizer	# Lbs.		. 0
Nitrogen Applied In Chemical Fertilizer	# Lbs.		0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres [er of		•
3. How many stormwater management trainings have been provi	ded to municip	al emplo	vees
during this reporting period?			2
4. What was the date of the last training?	0 2 / 1 6	/ 2	0 1 8
5. How many municipal employees have been trained in this repo	orting period?		2
6. What percent of municipal employees in relevant positions and stormwater management training?	l departments r		0 0 %

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

If submitting	this form as part of a joint rep	port on behalf of a	SPDES ID	5 1D blank.
Name of MS4/Coalition V	ILLAGE OF PORT DICKINSON		N Y R 2	0 8 0 A 0 2
Name of MS4/Coantion_	The state of the s		J	
7. Evaluating Progr	ess Toward Measurable (Goals MCM 6		
Use this page to report identified in your Sto- III.C.1. Submit additi	t on your progress and proj mwater Management Prog onal pages as needed.	ect plans toward ram Plan (SWM)	achieving measurab PP), including requir	le goals ements in Part
A. Briefly summariz	ze the Measurable Goal id	lentified in the S	SWMPP in this repo	orting period.
GOOD HOUSEKEE	REETS AND PARKING Le PING. Measurable goal is programs. Also, to ensure to	s to reduce pollut	ants of concern throu	igh the use of
B. Briefly summari Goal.	ze the observations that in	ndicated the ove	rall effectiveness of	this Measurable
INSPECTED. There catch basin and culv	AS DONE MORE THAN has been a decrease in migert cleaning. YARD WASTNE FROM 10/25 TO 11/22	ration of materia E PICK-UP WA	ils to the streams and	rivers due to
C. How many times	was this observation mea	asured or evalua		g period? 5 0 samples/participants/
D. Has your MS4 m	ade progress toward this	measurable goa		
E. Is your MS4 on	schedule to meet the dead	line set forth in	the SWMPP?	• Yes O No
F. Briefly summari	ze the stormwater activiti ng cycle (including an imp	es planned to m lementation sch	eet the goals of this edule).	MCM during
Continue to evaluate	GET GOOD HOUSEKEE good housekeeping progra e to attend stormwater mar	ams and impleme	ent new practices to r	reduce pollutants

This report is being submitted for the reporting period ending March 9, 2 0 1 8 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 PORT DICKINSON		SPDES ID N Y R 2 0
Additional Water	shed Improvemen	t Strategy Best Mai	nagement Practices
The information in this section	is being reported (check	one):	
○ On behalf of an individual M○ On behalf of a coalitionHow many MS4	1S4 Is contributed to this re	port?	
MS4s must answer the que	estions or check NA as	s indicated in the table	
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			Phosphorus
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	T nosphorus
Greenwood Lake Watershed	-	22.585.10.11.12	Phosphorus
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 2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,3,80,10,11,12	1 Hospitorus
Oyster Bay	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Land Use		2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,4,5,8a,8b,10,11,12	Pathogens
Non-Traditional	1,4,7a-d,9	2,5,4,5,00,00,10,11,12	-
Peconic Estuary	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Land Use 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	1,4,74,4,04,7		_
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	2,3,5,86,10,11,12	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
 Does your MS4/Coalitiphosphorus/nitrogen/p Has 100% of the MS4/ 	athogens on waterboo	dies?	○ Yes ○ No ○ N/A in GIS?
If N/A, go to question 3			○ Yes ○ No ○ N/A

% %

If No, estimate what percentage of the conveyance system has been mapped so far.

Estimate what percentage was mapped in this reporting period.

Nar	ne of MS4/Coalition VILLAGE OF PORT DICKINSON	SPDES ID N Y R 2	0 A 0	8 0
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (infrastructur	r e) Inspe ○ No	ection O N/A
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this repor	ystems that have been ting period?	inspect	ted %
5.	Has your MS4/Coalition developed a program that provid NYSDEC SPDES General Permit for Stormwater Dischar (GP-0-08-001) to reduce pollutants in stormwater runoff f disturb five thousand square feet or more?	rges from Constructio	n Activi	ities
6.	Has your MS4/Coalition developed a program to address runoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Act the New York State Stormwater Design Manual Enhanced Standards?	s that disturb greater ne NYS DEC SPDES (tivities (GP-0-08-001),	tnan or General includi	
7a	. Does your MS4/Coalition have a retrofitting program to r phosphorus/nitrogen/pathogen loading?	reduce erosion or O Yes	O No	O N/A
7b	. How many projects have been sited in this reporting perio	od?		
7c	. What percent of the projects included in 7b have been cor	mpleted in this report	ing peri	od?
7d	. What percent of projects planned in previous years have		Projects	Manned
8a	.Has your MS4/Coalition developed and implemented a tu procedures policy that addresses proper fertilizer applica lands?	rf management pract	ices and	
8l	o. Has your MS4/Coalition developed and implemented a tu procedures policy that addresses proper disposal of grass municipally owned lands?	arf management pract s clippings and leaves ○ Yes	ices and from O No	I O N/A

	SPDES ID N Y R 2	0 A 0	0 8 0
9. Has your MS4/Coalition developed and implemented a program of	native plant ○ Yes	ting? O No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste o prohibiting goose feeding?	n municipa O Yes	l prope	rties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	○ Yes	O No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	O Yes	O No	O N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 8
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 Union	N Y R 2 0 A 0 5	0
Minimum Control Measure 6. Stormwater Manage	ement for Municipal Operatio	ons

L HE L	поливцоп	in this section	n is bei	ng reported	(check one):
On	hebalf of a	n individual	MSA		

On behalf of a coalition	<u></u>	
How many MS4s contributed to this report?		

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

			<u>Self-Assessment</u>		
		<u>Op</u>	<u>eration/Activ</u>	<u>ity/Facility</u>	
			<u>formed within</u>	n the past 3	
Operation/Activity/Facility	<u>Addressed</u>	n SWMP?	years'	<u>?</u>	
Street Maintenance	• Yes	O No	O Yes	• No	
Bridge Maintenance	O Yes	○ No		O No	
Winter Road Maintenance	• Yes	O No ,	O Yes	No	
Salt Storage	• Yes	O No	O Yes	No	
Solid Waste Management		O No		No	
New Municipal Construction and Land Disturba	ance • Yes	O No	O Yes	No	
Right of Way Maintenance	• Yes	O No	O Yes	No	
Marine Operations	O Yes	O No	O Yes	O No	
Hydrologic Habitat Modification	O Yes	O No	O Yes	\circ No	
Parks and Open Space	Yes	O No	O Yes	No	
Municipal Building	• Yes	O No	O Yes	No	
Stormwater System Maintenance	• Yes	O No	O Yes	No	
Vehicle and Fleet Maintenance		O No	O Yes	No	
Other	O Yes	O No	O Yes	O No	

1) Scottiscand	SPDES ID	FIA
Name of MS4/Coalition Town of Union	N Y R 2 0 A 0	5 0
2. Provide the following information about municipal operations g	ood housekeeping prog	rams:
O Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
Cuites V Number of times swept)	# Miles	9 9
Streets Swept (Number of miles X Number of three Swept) Catch Basins Inspected and Cleaned Where Necessary	# 1	4 0
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#	
	# Lbs.	0
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	0
O Nitrogen Applied In Chemical Fertilizer	# Acres	
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Numb times applied to the nearest tenth.) 	er of	
3. How many stormwater management trainings have been provi	ded to municipal emplo	yees
during this reporting period?		
4. What was the date of the last training?	0 3 / 1 0 / 2	0 1 6
5. How many municipal employees have been trained in this repo		
6. What percent of municipal employees in relevant positions an stormwater management training?	d departments receive	0 0 %

This report is being submitted for the reporting period ending March 9,	2 () 1	8
If submitting this form as part of a joint report on behalf of a coalition leave SPDE	S ID	blar	nk.

Name of MS4/Coalition Town of Union	SPDES ID N Y R 2 0 A 0 5 0
7. Evaluating Progress Toward Measurable Goals	s MCM 6
Use this page to report on your progress and project p identified in your Stormwater Management Program l III.C.1. Submit additional pages as needed.	lans toward achieving measurable goals Plan (SWMPP), including requirements in Part
A. Briefly summarize the Measurable Goal identif	ied in the SWMPP in this reporting period.
Provided ewaste collection and continue to participate disposal at landfill. Continue to promote good house Eliminate use of garbage truck washing on Scarborou	e in drug collections to prevent improper keeping efforts at municipal facilities
B. Briefly summarize the observations that indicat	ed the overall effectiveness of this Measurable
Amount of e waste collected. Amount of roads swept	and storm drains cleaned
. How many times was this observation measured	or evaluated in this reporting period?
	1
Was now MCA	(ex.: samples/participants/e
. Has your MS4 made progress toward this measu	rable goal during this reporting period?

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

Yes

O No

Increase staff training on BMP and self evaluations. Install storm drain markers.

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

it submitting this for	in as part of a joint roper.		SPDES ID				
Name of MS4/Coalition Town of Un	ion		A 0 5 0 N Y R 2 0				
Additional Watershed Improvement Strategy Best Management Practices							
The information in this section		one):					
 On behalf of an individual M On behalf of a coalition How many MS4 	1S4 Is contributed to this re	port?					
MS4s must answer the que	estions or check NA as						
MS4 Description	Answer	Check NA	(POC)				
NYC EOH Watershed	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus				
Traditional Land Use 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	1.69. 10.0	2,3,4,5,86,10,11,12	Phosphorus				
Traditional Land Use	1,6,7a-d,8a,9 1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus				
Traditional Non-Land Use Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus				
Greenwood Lake Watershed		-	71				
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus Phosphorus				
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12	Phosphorus				
Non-Traditional	1,4,6,7a-d,8a,9	2,3,3,80,10,11,12	7,700,000				
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	-		Pathogens and Nitrogen				
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 2,3,4,5,8b,10,11,12	Pathogens and Nitrogen				
Non-Traditional	1,4,7a-d,8a,9	2,5,4,5,00,10,11,12	*				
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	1 100 (0 10 10 10 10 10	5 4 0a 9b	Pathogens				
	1,2,3,4,7a-d,9,10,11,12						
Traditional Non-Land Use	1,2,3,4,78-0,9,10,11,12	5.6.8a.8b.10.11.12	Pathogens				
Traditional Land Use Traditional Non-Land Use	athogens on waterboo	dies?	impacts of ○ Yes • No ○ N/A in GIS?				
If N/A, go to question 3.	•		© 103 O 100 O 100.				
If No, estimate what per Estimate what percentage			apped so far.				

		SPDES ID		
Nai	me of MS4/Coalition Town of Union	N Y R 2	0 A 0	5 0
3.	Does your MS4/Coalition have a Stormwater Conveyance Stand Maintenance Plan Program?	System (infrastruct ○ Yes	are) Inspec	ction O N/A
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report	stems that have beding period?	n inspecte	×d %
5.	Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Discharge (GP-0-08-001) to reduce pollutants in stormwater runoff for disturb five thousand square feet or more?	ges from Construct	on Activit tivities tha	ies
6.	Has your MS4/Coalition developed a program to address prunoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Actithe New York State Stormwater Design Manual Enhanced Standards?	that disturb greate e NYS DEC SPDES vities (GP-0-08-001	r than or General), includin val	g o n/a
7a	. Does your MS4/Coalition have a retrofitting program to re phosphorus/nitrogen/pathogen loading?	educe erosion or O Yes	No	o n/a
7b	.How many projects have been sited in this reporting period	d?		
7e.	. What percent of the projects included in 7b have been com	pleted in this repo	ting perio	d?
7d	.What percent of projects planned in previous years have b			<u></u> %
		• N	o Projects F	lanned
8a	Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper fertilizer applicates lands?	f management praction on municipally • Yes	ownea	o n/a
8b	Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper disposal of grass of municipally owned lands?	clippings and leaves	from	o n/a

Name of MS4/Coalition Town of Union	SPDES ID N Y R 2	0 A 0	5 0
9. Has your MS4/Coalition developed and implemented a program of	native plant O Yes	ting? ● No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste prohibiting goose feeding?	on municipa O Yes	l prope ● No	rties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	• Yes	O No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	O Yes	• No	O N/A

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

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

			SPDES ID	A 0 6 4			
Name of MS4/Coalition Town of Vestal			N Y R 2 0 A	4 0 6 4			
Minimum Control Measure 6. Stormy	vater Mana	gement fo	r Municipal (<u>)perations</u>			
The information in this section is being reported (che	eck one):						
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this 	report?	- Indiana					
1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's							
not done already.			Self-Assess	m <u>ent</u>			
			Operation/Activi				
			performed within				
Operation/Activity/Facility	Addressed i		years?	O No			
Street Maintenance	• Yes		Yes	● No			
Bridge Maintenance	O Yes		O Yes	○ No			
Winter Road Maintenance			• Yes	O No			
Salt Storage	• Yes		• Yes	© No			
Solid Waste Management	O Yes		○ Yes	O No			
New Municipal Construction and Land Disturba	ance • Yes		• Yes	O No			
Right of Way Maintenance	• Yes		O Yes	• No			
Marine Operations	*******			• No			
Hydrologic Habitat Modification Parks and Open Space	○ Yes • Yes		○ Yes • Yes	O No			

Municipal Building.....

Stormwater System Maintenance..... • Yes

Vehicle and Fleet Maintenance.....

• Yes

Other..... O Yes

O No

O No

O No

O No

○ No • Yes

○ No • Yes ○ No • Yes

O No O Yes

	SPDES ID		
Name of MS4/Coalition Town of Vestal	NYR2	0 A 0	6 4
2. Provide the following information about municipal operations g	ood housekeep	ing prog	rams:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres		8
Streets Swept (Number of miles X Number of times swept)	# Miles		8 0
Catch Basins Inspected and Cleaned Where Necessary	#	3	0 2
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		4 0
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		
O Nitrogen Applied In Chemical Fertilizer	# Lbs.		
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres Er of		•
3. How many stormwater management trainings have been provide	led to municipa	al emplo	yees
during this reporting period?			1
4. What was the date of the last training?	10/27	/ 2 0	1 7
5. How many municipal employees have been trained in this repo	rting period?		3
6. What percent of municipal employees in relevant positions and stormwater management training?	departments r	eceive	3 %

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix}$ 1 8

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.
SPDES ID N Y R 2 0 A 0 6 4
Name of MS4/Coalition Town of Vestal N Y R 2 0 A 0 6 4
7. Evaluating Progress Toward Measurable Goals MCM 6
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
The Town will continue to train employees regarding municipal operations that could possibly contribute POCs to the MS4 system. The Town will continue street sweeping, cleaning catch basins, storm pipes and ditches each year and also provide brush and leaf pick up which it recycles into wood chip mulch and leaf mulch for the use of the residents.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
The accurate documentation of street sweeping, catch basin cleaning and storm pipe cleaning is allowing greater efficiency each year. Crews are now able to more readily identify areas that may need additional attention.
C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
The Town will continue to train employees responsible for municipal operations to identify issues and problem areas as well as improve management of the MS4 system. The Town will continue its operations of brush and leaf pick up, street sweeping, catch basin cleaning, open ditch maintenance.

	Proome Tings Stormwater Coalition	SPI)ES	2	0	С	0	0	2
Name of MS4/Coalition	Broome-Tioga Stormwater Coalition	L	il.	 				•	

S4s must answer the que		s indicated in the table	below.
MS4 Description	Answer	- CRECK 172K	
NYC EOH Watershed	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Traditional Non-Land Use	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Non-Traditional	2,2,714 4,04,00,7	-	
Onondaga Lake Watershed Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus
Traditional Land Use 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	*	-	Di1
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			Dothogana
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	-		Pathogens and Nitrogen
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	2,3,4,5,86,10,11,12	Pathogens and Petrogen
Oscawana Lake Watershed			Phosphorus
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	- inospirorus
LI 27 Embayments		5 6 9a 9b	Pathogens
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b 5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b,10,11,12	Pathogens
Non-Traditional Does your MS4/Coalit	1,2,3,4,7a-d,9 ion have an education oathogens on waterbo	ı program addressing i	mpacts of ● Yes ○ No ○

	SPD	ES ID		
Nar	ne of MS4/Coalition Broome-Tioga Stormwater Coalition N	Y R 2	0 C 0	0 2
3.	Does your MS4/Coalition have a Stormwater Conveyance System (infrand Maintenance Plan Program?	astructur O Yes	e) Insp∈ ○ No	ection O N/A
4.	Estimate the percentage of on-site wastewater treatment systems that had maintained or rehabilitated as necessary in this reporting period?	iave been	inspect	ed %
5.	Has your MS4/Coalition developed a program that provides protection NYSDEC SPDES General Permit for Stormwater Discharges from Co (GP-0-08-001) to reduce pollutants in stormwater runoff from construdisturb five thousand square feet or more?	msti ucuo	II ACUIT	LICO
6.	Has your MS4/Coalition developed a program to address post-construction from new development and redevelopment projects that disturble equal to one acre that provides equivalent protection to the NYS DEC Permit for Stormwater Discharges from Construction Activities (GP-Country of the New York State Stormwater Design Manual Enhanced Phosphorus Standards?	SPDES ()-08-001),	General , includi	
7 <i>a</i>	a. Does your MS4/Coalition have a retrofitting program to reduce erosic phosphorus/nitrogen/pathogen loading?	on or Yes	O No	O N/A
71	o. How many projects have been sited in this reporting period?		1	
76	c. What percent of the projects included in 7b have been completed in the	is report	ting peri	iod?
70	d. What percent of projects planned in previous years have been comple			%
		\circ No) Projects	Planned
8:	a.Has your MS4/Coalition developed and implemented a turf managem procedures policy that addresses proper fertilizer application on murlands?	ent pract nicipally o O Yes	tices and owned O No	i ● N/A
8	b. Has your MS4/Coalition developed and implemented a turf managen procedures policy that addresses proper disposal of grass clippings a municipally owned lands?	nent prac nd leaves O Yes	пош	d ● N/A

Name of MS4/Coalition Broome-Tioga Stormwater Coalition	SPDES ID N Y R 2	0 C C	0 2
9. Has your MS4/Coalition developed and implemented a program	of native plant ○ Yes	ing? O No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet was prohibiting goose feeding?	ste on municipa ○ Yes	l prope O No	rties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	○ Yes	O No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	O Yes	O No	O N/A