MS4 Annual Report Cover Page

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

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MS4 Annual Report Cover Page

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

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

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

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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.

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

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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
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

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

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

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Name of MS4 All Broome-Tioga Stormwater Coalition Municipalities

MS4 Municipal Compliance Certification (MCC) Form

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

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

Name of MS4 Broome-Tioga Stormwater Coalition SPDES ID N Y R 2 0 A 0 0	2													
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If Yes, complete information below.														
Submit a separate sheet for each partner. Information provided in other formats will not be														
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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 5

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

	SPDES ID
Name of MS4 All Broome-Tioga Stormwater Coalition Members	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 perm 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 s	
coalition. It is not necessary to include a separate sheet for each	
If No, proceed to Section 4 - Certification Statement.	
Partner/CoalitionName	
Tioga County Soil and	Water
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
Conservation District	
Address	
183 Corporate Drive	
City	e Zip Y 1 3 8 2 7 -
eMail	
walshw@co.tioga.ny.us	
Phone	
	Binding Agreement in accordance -0-08-002 Part IV.G.? ○ Yes ● No
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What tasks/responsibilities are shared with this partner (e.g. MM1	school Programs or Multiple Tasks):
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• MM2 E n v i r o s c a p e m o d e 1	demos
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.	- .

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

SPDES ID

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

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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.

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

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- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name L E S L I E	MI Last Name B O U L T O N
Title	
DEPUTY COMMISSI	ONER - ENGINEERING
Address	
60 HAWLEY STREE	T - PO BOX 1766
City	State Zip
BINGHAMTON	N Y 1 3 9 0 2 - 1 7 6 6
eMail	
1 b o u 1 t o n @ c o . b r o	o m e . n y . u s
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MCC form for period ending March 9, 2 0 1 5

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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 J O H N	MI Last Name M B E R N A R D O
Title (Clearly print title of individual signing report) D E P U T Y C O U N T Y E X	K E C U T I V E
Signature	Date 0 4 / 2 8 / 2 0 1 5

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 5

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

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Name of MS4	TIOGA COUNTY	N	Y	R	2	0	Α	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:

APPROVED
AS TO FORM BY
TIOGA COUNTY ATTORNEY

MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway Albany, New York I2233-3505

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

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Name of MS4 City of Binghamton	SPDES ID N Y R 2 0 A 3 4 1
Section 2 - Contact Information	
Important Instructions - Please Read	
Contact information must be provided for <u>each</u> of the following po	
 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	
 The Stormwater Management Program (SWMP) Coordinator (I coordination/implementation of SWMP). 	ndividual responsible for
5. Report Preparer (Consultants may provide company name in the	e 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,	
provided and a signature authorization form, signed by the Princ Elected Official must be attached.	cipal Executive Officer of Chief
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 Last Name	·
Richard C Dav	i d
Title	
Mayor Address	
3 8 Hawley Street	
City Stat	te Zip
B i n g h a m t o n N	Y 1 3 9 0 1 -
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MCC form for period ending March 9, 2 0 1 5

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Name of MS4 City of Binghamton		N	Y	R	2	0	Α	3	4	1

Section 4 - Certification Statement

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

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

First Name R i c h a r d	MI K	Last Name Perkins	
Title (Clearly print title of individual signing report) C i t y E n g i n e e r			
Signature		Date 0 5 / 1 4 / 2 0 1	5

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 5

		SF	DES	S ID						
Name of MS4 Town of Bi	ghamlon	N	Y	R	2	0	Α	0	0	9

Section 2 - Contact Information

Important Instructions - Please Read

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

- 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	MI Last Name
John	J Martin
Title	
Town Engineer	
Address	
59 Court Street	
City.	06-4- 72-
<u>City</u>	State Zip
Binghamton	N Y 1 3 9 0 1 -
Binghamton	
Binghamton eMail	NY 13901-

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

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

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

- 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 T i m o t h y	MI Last Name P W h i t e s e 1 1
<u>Title</u>	
Supervisor	
Address	
2 7 9 Park Avenue	
City	State Zip
Binghamton	N Y 1 3 9 0 3 -
eMail	
supervisor@towno	fbinghamton.com
Phone	County
(6 0 7) 7 7 2 - 0 3 5 7	Broome

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

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

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 T i m o t h y	MI P	Last Name W h i t e s e l l l
Title (Clearly print title of individual signing report) Superular visor		
Signature F. Lishilesell		Date 0 4 / 2 1 / 2 0 1 5

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 5

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Name of MS4 Town of Chenengo		N	Y	R	2	0	Α	1	2	7

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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

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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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- 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
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

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

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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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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 5

N. C. A. F. D. A. Town of Chenango	SPDES ID N Y R 2 0 A 1 2 7
Name of MS4 Town of Chenango	
Section 4 - Certification Statement	
"I certify under penalty of law that this document and all direction or supervision in accordance with a system de properly gathered and evaluated the information submit persons who manage the system, or those persons direct the information submitted is, the best of my knowledge aware that there are significant penalties for submitting fine and imprisonment for knowing violations." This form must be signed by either a principal executive	signed to assure that qualified personnel ted. Based on my inquiry of the person or thy responsible for gathering the information, and belief, true, accurate, and complete. I am false information, including the possibility of
authorized representative of that person as described in	
First Name MI H a r o 1 d	S n o p e k
Title (Clearly print title of individual signing report) Town Supervissor	
Signature Navel Sypt	
	Date 0 5 / 1 2 / 2 0 1 5

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, $\begin{vmatrix} 2 & 0 & 1 \end{vmatrix}$ 5

	SP	DES	ID						
Name of MS4 Town of Conklin	N	Y	R	2	0	A	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).

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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

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

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Name of MS4	Town of Conklin		N	Y	R	2	0	A	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."

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

First Name	MI	Last Name
James		Finch
Title (Clearly print title of individual signing report)		
Supervisor		
Signature		
	- 24-	/-/ɔ Date
grand (1)	,	04/20/2015

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,

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Name of MS4 Town of DICKINSON		N	Y	R	2	0	Α	1	4	3
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

First Name	MI Last Name
MICHAEL	MARINACCIO
Title	
SUPERVISSOR	
Address	
5 3 1 0 1 d F r o n t S	t r e e t
City	State Zip
	State Zip 0 n N Y 1 3 9 0 5 -
Town of Dickins	
Town of Dickins	o n N Y 1 3 9 0 5 -

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

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

Section 4 - Certification Statement

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

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

First Name MICHAEL	MI	Last Name M A R I N A C C I O
Title (Clearly print title of individual signing report)		
SUPERVISSOR		
Mila Marene ?		Date 0 5 / 1 1 / 2 0 1 5

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 5

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Name of MS4 Village of Endicott		N	Y	R	2	0	A	1.	4	9

Section 2 - Contact Information

Important Instructions - Please Read

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

- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
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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
- 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 5

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Name of MS4 Village of Endicott	SPDES ID N Y R 2 0 A 1 4 9
Section 2 - Contact Information	
Important Instructions - Please Read	
Contact information must be provided for each of the f	ollowing positions as indicated below:
 Principal Executive Officer, Chief Elected Official GP-0-08-002 Part VI.J). 	or other qualified individual (per
2. Duly Authorized Representative (Information for th Authorized Representative is signing this form)	is contact must only be submitted if a Duly
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) Co coordination/implementation of SWMP).	ordinator (Individual responsible for
5. Report Preparer (Consultants may provide company	name in the space provided).
A separate sheet must be submitted for each position filled by the same individual. If one individual fills once and check all positions that apply to that individual	multiple roles, provide the contact information
If a new Duly Authorized Representative is signing	this report, their contact information must be
provided and a signature authorization form, signed 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	
Eigst Name MI	Last Marma
First Name MI John R	Last Name Bertoni
Title	
Mayor	
Address	
1009 East Main Str	eet
City	State Zip
Endicott	NY 13760-
eMail voemayor@stny.rrc	O m
	County
(607)757-2420	Broome

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

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Name of MS4 Village of Endicott	N	Y	R	2	0	Α	1	4	9

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 Na	me										
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Title (Clearly print title of individual signing report)													
Mayor													
Signature			_										
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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 5

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Name of MS4 Town	of Fenton]	N	Y	R	2	0	A	0	7	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:

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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
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

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MCC form for period ending March 9,	2 0 1 5					
Name of MS4 Town of Fenton	SPDE	SID R 2	0 A	0	7	8

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
David	Hamlin
Title	
Town Supervisor	
Address	
44 Park Street	
City	State Zip
Port Crane	NY 13833-1504
eMail	
feedback, it is all the filters to be a first the first terms of the f	ny.rr.com
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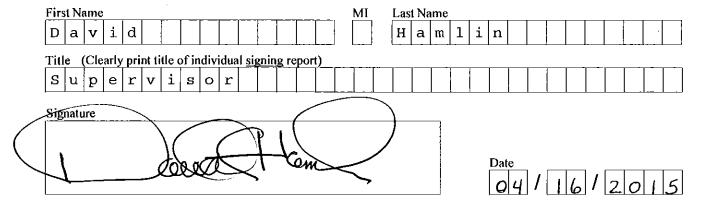
MCC form for period ending March 9, 2 0 1 5

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Name of MS4 Town of Fenton	N	Y	R	2	0	A	0	7	8

Section 4 - Certification Statement

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

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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 5

	SPDES ID	
Name of MS4 Village of Johnson City	N Y R 2 0 A 1 0	1

Section 2 - Contact Information

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

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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).
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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 5

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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	MΙ	Last Name							
G r e g o r y	W	рееп	ı i e						
Title (Clearly print title of individual signing report)									
Mayor									
Signature Comp And			Da	ite	/ 1	6 /	7 2	0	1 5

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 5

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

Section 2 - Contact Information

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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.

- O 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
Scott	R u s s e 1 1
Title	
Code Enforcement	0 f f i c e r
Address	
7 0 C r e s c e n t D r i v	7 e
City	State Zip
City K i r k w o o d	State Zip N Y 1 3 7 9 5 -
K i r k w o o d	NY 13795-
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MCC form for period ending March 9, 2 0 1 5

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Name of MS4 Town of Kirkwood	N Y	R 2	0	A 0	7	2
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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
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name	<u>N</u>	MI Last Name
John		P Mastronardi
Title		
Town Engine	e r	
Address		
1 3 S. Washi	n g t o n	Street, Suite 1
City		State Zip
City B i n g h a m t o n		State Zip N Y 1 3 9 0 3 -
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MCC form for period ending March 9, 2 0 1 5

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Important Instructions - Please Read

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

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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 5

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

Section 4 - Certification Statement

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First Name Gordon	MI E	Last Name K n i f f e n
Title (Clearly print title of individual signing report) Superular visor		
Signature Signature		Date
Goden Confler		0 4 / 2 0 / 2 0 1 5

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, $\begin{bmatrix} 2 & 0 \end{bmatrix} \begin{bmatrix} 1 & 5 \end{bmatrix}$

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Name of MS4 Town of Owego	N	Y	R	2	0	Α	0	7	9
									

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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

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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

First Name Donald	MI Last Name Castelllucci Jr.
Title Town of owego Su	pervisor
Town of owego Su	
2 3 5 4 S t a t e R o u t e	<u></u>
City	State Zip
Apalachin	NY 13732 - 1010
eMail	
dcastellucci@tov	n o f o w e g o . c o m '
Phone	County
(607)687-0123	Tioga

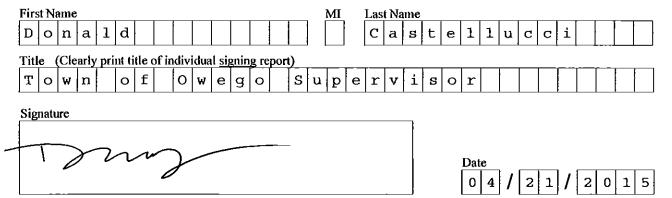
MCC form for period ending March 9, 2 0 1 5

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Name of MS4	Town of Owego		N	Y	R	2	0	A	0	7	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.



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, $2 \mid 0 \mid 1 \mid 5 \mid$

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Name of MS4 VILLAGE OF PORT DICKINSON		N	YR	2 0	A	0	8 0
Section 2 - Contact Information							
Important Instructions - Please Read							
Contact information must be provided for <u>each</u> of the following po	sitions	as ir	ndicat	ed be	low	:	
1. Principal Executive Officer, Chief Elected Official or other qua GP-0-08-002 Part VI.J).	lified ir	ndivi	idual	(per			
Duly Authorized Representative (Information for this contact m Authorized Representative is signing this form)	nust only	y be	subn	nitted	if a	Dul	у
3. The Local Stormwater Public Contact (required per GP-0-08-00	02 Part `	VII.	A.2.c	& Pa	rt V	III. <i>A</i>	1.2.c)
 The Stormwater Management Program (SWMP) Coordinator (I coordination/implementation of SWMP). 	Individu	ıal re	espon	sible	for		
5. Report Preparer (Consultants may provide company name in the	e space	prov	vided).			
A separate sheet must be submitted for each position listed abo filled by the same individual. If one individual fills multiple rol once and check all positions that apply to that individual.					•		
If a new Duly Authorized Representative is signing this report, provided and a signature authorization form, signed by the Prin Elected Official must be attached.							
For each contact, select all that apply:							
O Principal Executive Officer/Chief Elected Official							
O Duly Authorized Representative							
O Local Stormwater Public Contact							
O Stormwater Management Program (SWMP) Coordinator							
O Report Preparer							
First Name MI Last Name							

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

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Name of MS4 VILLAGE OF PORT DICKINSON		N	Y	2	0	А	0	8	0
Section 4 - Certification Statement									
"I certify under penalty of law that this document and all attachment direction or supervision in accordance with a system designed to as properly gathered and evaluated the information submitted. Based opersons who manage the system, or those persons directly responsithe information submitted is, the best of my knowledge and belief, aware that there are significant penalties for submitting false information and imprisonment for knowing violations."	ssure that on my in ble for a true, ac mation, i	nt q nqu gath cur incl	ualif iry o nerin ate, a ludin	ied j f the g the and o g th	pers e pe e int com e po	onr rsor forr ple ossi	nel n oi nati te. i bili	ion, I an ty o	n
This form must be signed by either a principal executive officer or authorized representative of that person as described in GP-0-08-00				offi	cial	l, or	du	ly	
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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 I2233-3505

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

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

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.

- 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 5

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Name of MS4 Town of Union	SPDES ID N Y R 2 0 A 0 5 0
Section 4 - Certification Statement	
"I certify under penalty of law that this document and all attachmedirection or supervision in accordance with a system designed to a properly gathered and evaluated the information submitted. Based persons who manage the system, or those persons directly responsible information submitted is, the best of my knowledge and belief aware that there are significant penalties for submitting false information and imprisonment for knowing violations."	I on my inquiry of the personner sible for gathering the information, f, true, accurate, and complete. I am rmation, including the possibility of
This form must be signed by either a principal executive officer of authorized representative of that person as described in GP-0-08-0	r ranking elected official, or duly 002 Part VI.J.
First Name MI Last Name S O T	A K
Title (Clearly print title of individual signing report) S U P E R V I S O R	
Signature Kose A-Sotak.	Date 05 / 20 / 20 1 5

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, $\begin{vmatrix} 2 & 0 & 1 \end{vmatrix}$ 5

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

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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- 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 5

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

Section 2 - Contact Information

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- 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 5

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

Section 4 - Certification Statement

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

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First Name	MI	Last Name
John		Schaffer
Title (Clearly print title of individual signing report)		
Town Supervisor		
Signature		
w John Schafter		Data
		Date

05/08/2015

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

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

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

	SI	DE	SШ						
Name of MS4/Coalition Broome-Tioga Stormwater Coalition	N	Y	R	2	0	C	0	0	2
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Water Quality Trends

The information in this section is being reported (check on	e):
---	-----

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

 How many MS4s are contributed to this report?

 O 1 5
- 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One.

If Yes, choose one of the following

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

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

No

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Other

MS4 Annual Report Form

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

N SAGARO IN E	Broome-Tioga Stormwater Coalition	SPDES ID N Y R 2 0 C 0 0 2
Name of 1/154/Coamton_		
<u>Minim</u>	um Control Measure 1. Public Ed	ucation and Outreach
The information in this	section is being reported (check one):	
○ On behalf of an indivOn behalf of a coalityHow ma		5
1. Targeted Public	Education and Outreach Best Manageme	ent Practices
Check all topics that	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 Hazardou	s Waste Disposal	• Recycling
Illicit Discharge Det	ection and Elimination	O Riparian Corridor Protection/Restoration
• Infrastructure Mainte	enance	Trash Management
● Smart Growth		● Vehicle Washing
Storm Drain Marking	g	O Water Conservation
• Green Infrastructure	/Better Site Design/Low Impact Development	 Wetland Protection
Other:		○ None
T o w n C l Other	eanupDays, F1	0 0 d i n g
2. Specific audienc	es targeted during this reporting period:	
● Public Employees	Contractors	
Residential	• Developers	
Businesses	● General Public	
Restaurants	Industries	
O Other:	Agricultural	

Other

MS4 Annual Report Form

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

Name of MS4/Coalition Broome-Tioga Stormwater Coalition	SPDES ID N Y R 2 0 C 0 0 2					
Minimum Control Measure 1. Public Edu	ucation and Outreach					
The information in this section is being reported (check one):						
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 0 1 	5					
1. Targeted Public Education and Outreach Best Manageme	ent Practices					
Check all topics that were included in Education and Outreach de	uring this reporting period:					
Construction Sites	Pesticide and Fertilizer Application					
● General Stormwater Management Information	Pet Waste Management					
 Household Hazardous Waste Disposal 	• Recycling					
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration					
■ Infrastructure Maintenance	■ Trash Management					
Smart Growth	 Vehicle Washing 					
Storm Drain Marking	O Water Conservation					
• Green Infrastructure/Better Site Design/Low Impact Development	 Wetland Protection 					
	O None O o d i n g					
2. Specific audiences targeted during this reporting period:						
● Public Employees ● Contractors						
● Residential • Developers						
● Businesses ● General Public						
● Restaurants • Industries						
Other: • Agricultural						

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

SPDES ID

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

Name of MS4/Coalition Broome-Tioga Stormwater Coalition N Y R 2 0 C 0 0 2
4. Evaluating Progress Toward Measurable Goals MCM 1
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Roll out Water From Rain public education campaign. This includes implementation of a branding strategy for public education efforts, website, development of TV ads, development of radio ads, development of print material, and an implementation and tracking strategy.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Implemented the "Water From Rain" public education program. A website for residents was developed at www.waterfromrain.org, as well as a social media facebook page. Other materials: 1 minute long commercial, 3 30 second commercials, 1 radio spot, and an educational brochure. The site has been live and commercials have began airing in February 2014. Brochures were printed and distributed at various events (500 total distributed).
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? • 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).
Will continue to promote program and broadcast commercials in the coming year. Will update website content and post on social media to promote public events as scheduled. Will do another printing of 1800 brochures to distribute to the MS4 communities.

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

<u></u>		SPDES ID	
Name of MS4/Coalition Broome-Tiog	a Stormwater Coalition	N Y R 2 0 C	0 0 2
4. Evaluating Progress Tov	vard Measurable Goals MCM 1		
Use this page to report on you identified in your Stormwater III.C.1. Submit additional page	r progress and project plans toward Management Program Plan (SWM ges as needed.	d achieving measurable goals (IPP), including requirements	in Part
A. Briefly summarize the M	Leasurable Goal identified in the	SWMPP in this reporting p	eriod.
Assist MS4s by implementin officials and employees, as w	g training programs and providing vell as local developers and contrac	training materials for munici tors.	pal
B. Briefly summarize the o	bservations that indicated the over	erall effectiveness of this M	easurable
- Provided Good Housekeep videos during this reporting - Tioga County Municipal B	iment and Erosion Control (3/26/14) ing and IDDE training videos to Miperiod (see individual MCM6 report oard Training on Stormwater (Octobation in these events under addition	S4's on request - 4 MS4's util rts) bber 2014) - 18 ppl	3 ppl lized the
C. How many times was th	is observation measured or evalu		9
D. Has your MS4 made pro	ogress toward this Measurable G	•	eriod? Geriod No
E. Is your MS4 on schedul	e to meet the deadline set forth in	the SWMPP? • Y	es O No
F. Briefly summarize the s the next reporting cycle	tormwater activities planned to n (including an implementation scl	neet the goals of this MCM hedule).	during
Develop a training schedule additional trainings for good Assess opportunities for add	for the coming years. Continued se housekeeping program developme itional topics.	ediment and erosion control to ent, green infrastructure train	rainings, ing.
			1

2014.

MS4 Annual Report Form

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

SPDES ID
Name of MS4/Coalition Broome-Tioga Stormwater Coalition NYR20C002
4. Evaluating Progress Toward Measurable Goals MCM 1
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Promote stormwater awareness and education for the general public at local events, through BTSC events. and mailings. Topics include green infrastructure, general stormwater information, best management practices, kids activities, solid waste, composting, grasscycling, hazardous waste management. Promote websites, www.BroomeTiogaStormwater.com and www.waterfromrain.org at these events. Incorporate hands on activities such as a rain garden simulation and enviroscape model.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
2014-2015 Events: Earth Day Southern Tier Earth Fest, 2500 ppl; Waterman Conservation Earth Day, 100 ppl; Broome Riverbank Cleanup participants, info distributed to 175 ppl; waterfromrain event, 100 ppl,; Distribution of information in municipalities' local newsletters.
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).
Expand the variety of materials distributed and the audiences reached. Incorporate events that reach a broader demographic (i.e. downtown festivals, sporting events: 5 public events proposed April-October) Continue to distribute materials Utilize and promote "Water From Rain" public education and outreach campaign, developed in

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

Name of MS4/Coalition Bro	oome-Tioga Stormwater Coalition		N Y R 2 0	C 0 0 2
4. Evaluating Progre	ss Toward Measurable G	oals MCM 1		
Use this page to report identified in your Storr III.C.1. Submit addition	on your progress and proje mwater Management Progra nal pages as needed.	ct plans toward achie am Plan (SWMPP), in	ving measurable g icluding requirem	oals ents in Part
A. Briefly summarize	e the Measurable Goal ide	ntified in the SWMI	PP in this reporti	ng period.
Hold a press conference	ce and launch event to pron	note the Water from R	Kain campaign.	
B. Briefly summarize Goal.	e the observations that ind	licated the overall ef	fectiveness of thi	s Measurable
included a press confe importance of stormw educating kids about s	the Discovery Center of the crence announcing the launce ater protection. The event a stormwater protection. These oScape, rain barrel painting	ch of the website and place included several a see included a coloring	giving information activities geared to contest, green inf	n about the owards
C. How many times	was this observation meas	ured or evaluated in	this reporting p	eriod?
D. H	de museum tomond this N	Assaurable Coal dur		mples/participants/events)
D. Has your M54 ma	de progress toward this N	Teasurable Goal dui		● Yes ○ No
E. Is your MS4 on so	hedule to meet the deadli	ne set forth in the SV	WMPP?	• Yes O No
	e the stormwater activities cycle (including an imple			CM during
Will continue to spons	sor Water from Rain events	. An event is schedule	ed for May of 201	5.

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

SPDI	ES ID
Name of MS4/Coalition Broome-Tioga Stormwater Coalition N	Y R 2 0 C 0 0 2
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieving me identified in your Stormwater Management Program Plan (SWMPP), including III.C.1. Submit additional pages as needed.	easurable goals g requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in the	is reporting period.
Assist MS4s by implementing training programs and providing training mater officials and employees, as well as local developers and contractors.	ials for municipal
B. Briefly summarize the observations that indicated the overall effectives Goal.	ness of this Measurable
- Broome/Tioga SWCD, Sediment and Erosion Control (3/26/14, 5/7/14, 2/4/12) - Provided Good Housekeeping and IDDE training videos to MS4's on request videos during this reporting period (see individual MCM6 reports) - Tioga County Municipal Board Training on Stormwater (October 2014) - 18 - Munis reported on participation in these events under additional MCMs.	t - 4 MS4's utilized the
C. How many times was this observation measured or evaluated in this re	eporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this Measurable Goal during thi	s 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 the next reporting cycle (including an implementation schedule).	of this MCM during
Develop a training schedule for the coming years. Continued sediment and ere additional trainings for good housekeeping program development, green infra Assess opportunities for additional topics.	osion control trainings, structure training.

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

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

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Name of MS4/Coalition	Broome-Tioga Stormwater Coali	ition	SPDES ID N Y R :	2 0 C 0 0 2
4. Evaluating Pro	gress Toward Measu	rable Goals MCM 1		
identified in your St	ort on your progress ar ormwater Managemen tional pages as needed	t Program Plan (SWM	d achieving measurab IPP), including requi	le goals rements in Part
A. Briefly summan	rize the Measurable C	Goal identified in the	SWMPP in this rep	orting period.
homeowners and but MS4 and BTSC we	nwater education mater usinesses. Make literat obsites and at outreach n.org and www.Broor ne general public.	ure and displays availa events. Promote the B	able at MS4 and parti TSC websites,	ner offices, on
B. Briefly summar Goal.	rize the observations	that indicated the ove	erall effectiveness of	this Measurable
and Water offices, management, greer	for display at 15 MS4 Broome County Libra infrastructure, genera mation are also incorp	ry (Solid waste, compo Il stormwater informat	osting, grasscycling, lion, kids activities).	and Tioga Soil nazardous waste
C. How many tim	es was this observation	on measured or evalu		ng period? 20 : samples/participants/eve
D. Has your MS4	ınade progress towar	d this Measurable G		
E. Is your MS4 or	schedule to meet the	e deadline set forth in	the SWMPP?	● Yes ○ No
F. Briefly summa the next report	rize the stormwater a	nctivities planned to n an implementation sc	neet the goals of this hedule).	MCM during
Expand temporary	of materials distribute or permanent displays gional Farmers Market	into other municipally	y owned facilities and	l/or local

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

	SPDES ID
Name of MS4/Coalition Broome-Tioga Stormwater Coalition	N Y R 2 0 C 0 0 2
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieved in your Stormwater Management Program Plan (SWMPP), in Ill.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.
Continue public outreach via public presentations and local media.	
B. Briefly summarize the observations that indicated the overall of Goal.	effectiveness of this Measurable
-Tioga SWCD reps participated in news segment on WEBO radio entget across water quality protection message Press releases distributed for events including Water From Rain can report public meeting. All press releases include a statement to raise a protection.	npaign launch and Annual
C. How many times was this observation measured or evaluated i	in this reporting period?
	(ex.: samples/participants/events
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 S	SWMPP? • Yes • No
F. Briefly summarize the stormwater activities plauned to meet t the next reporting cycle (including an implementation schedul	he goals of this MCM during le).
Do public outreach via press releases, newspaper guest viewpoints an	nd news spots.

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

If authinting this form as part of a joint report on section of a section of the	
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 MCM 1	
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.	
Roll out Water From Rain public education campaign. This includes implementation of a branding strategy for public education efforts, website, development of TV ads, development of radio ads, development of print material, and an implementation and tracking strategy.	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measura Goal.	ble
Implemented the "Water From Rain" public education program. A website for residents was developed at www.waterfromrain.org, as well as a social media facebook page. Other materials: I minute long commercial, 3 30 second commercials, 1 radio spot, and an educational brochure. The site has been live and commercials have began airing in February 2014. Brochures were printed an distributed at various events (500 total distributed).	d
C. How many times was this observation measured or evaluated in this reporting period?	6
D. Has your MS4 made progress toward this Measurable Goal during this reporting period? • Yes C	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	5
Will continue to promote program and broadcast commercials in the coming year. Will update website content and post on social media to promote public events as scheduled. Will do another	

2014.

MS4 Annual Report Form

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

	SPDES ID
Name of MS4/Coalition Broome-Tioga Stormwater Coalition	N Y R 2 0 C 0 0 2
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward actidentified in your Stormwater Management Program Plan (SWMPP III.C.1. Submit additional pages as needed.	chieving measurable goals), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
Promote stormwater awareness and education for the general public events. and mailings. Topics include green infrastructure, general s management practices, kids activities, solid waste, composting, gramanagement. Promote websites, www.BroomeTiogaStormwater.co these events. Incorporate hands on activities such as a rain garden service.	tormwater information, best sscycling, hazardous waste om and www.waterfromrain.org at
B. Briefly summarize the observations that indicated the overal Goal.	ll effectiveness of this Measurable
2014-2015 Events: Earth Day Southern Tier Earth Fest, 2500 ppl; Day, 100 ppl; Broome Riverbank Cleanup participants, info distribevent, 100 ppl,; Distribution of information in municipalities' local	uted to 175 ppl; waterfromrain
C. How many times 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	e SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	t the goals of this MCM during lule).
Expand the variety of materials distributed and the audiences reach a broader demographic (i.e. downtown festivals, sporting events: 5 April-October) Continue to distribute materials Utilize and promote "Water From Rain" public education and outro	public events proposed

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

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 MCM 1
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Inform local businesses and developers about best management practices for pollution prevention and stormwater management.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Development proposals submitted to the Counties for review under GML 239 are reviewed for stormwater impacts. Advice is given regarding BMP's for uses that may have stormwater impacts. There were a total of 161 239 reviews this reporting year.
C. How many times was this observation measured or evaluated in this reporting period? [1 6 1] [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? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue to provide guidance for businesses and developers through the 239 review process.

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

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

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

Minimum Control Measure 2. Public Involvement/Participation

On behalf of an individual MS4	
 On behalf of a coalition 	<u> </u>
How many MS4s contributed to this report?	0 1 5

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

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

Cleanup Events #Events					2		
Comments on SWMP Received #Comments					0		
Community Hotlines Phone # (6 0 7) 7 7 8	-	3	8	6	7		
Phone # (6 0 7) 7 7 8 - 2 3 7 5 Phone # ()] _						
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Community Meetings # Attendees				5	0		
O Plantings Sq. Ft.							
● Storm Drain Markings # Drains		1	0	5	0		
● Stakeholder Meetings # Attendees				4	8		
● Volunteer Monitoring # Events					3		
● Other: H H W / E l e c t r o n i c s , T r e e s a	1	е	ន				
2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? • Yes • No.							
● List-Serve # In List				4	8		
● Newspaper Advertising # Days Run					1		
O TV/Radio Notices # Days Run							
● Other: W e b s i t e		_					

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

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

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

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

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

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

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

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

	2hde2 id
Name of MS4/Coalition Broome-Tioga Stormwater Coalition	N Y R 2 0 C 0 0 2
4.a. If this report was made available on the internet, what date	e was it posted?
Leave blank if this report was not posted on the internet.	0 5 / 2 9 / 2 0 1 5
4.b. For how many days was/will this report be posted?	3 6 5
If submitting a report for single MS4, answer 5.a If submitting	g a joint report, answer 5.b
5.a. Was an Annual Report public meeting held in this reporting	
If Yes, what was the date of the meeting?	05/29/2015
If No, is one planned?	O Yes ● No
5.b. Was an Annual Report public meeting held for all MS4s co	
this reporting period?	● Yes ○ No
If No, is one planned for each?	O Yes ● No
6. Were comments received during this reporting period?	O Yes ● No
If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.	
o with the response to comments to this report.	

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

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

Name of MS4/Coalition	Broome-Tioga Stormwater Coalition		N	Y R 2 0	C 0 0	2
7. Evaluating Prop	gress Toward Measurable Goa	ls MCM 2				
identified in your St	ort on your progress and project tormwater Management Program itional pages as needed.	plans toward : Plan (SWMF	achieving n P), includir	neasurable go ng requireme	oals nts in Pa	rt
A. Briefly summar	rize the Measurable Goal ident	ified in the S	WMPP in	this reportin	g period	l.
water quality by red	f community participation in stre ducing non-point source pollution wolve the public, students, and lo	n. Inform pub	dic about so	grams. Aim ources of and	to impro solutions	ve s to
B. Briefly summar Goal.	rize the observations that indic	ated the over	all effectiv	eness of this	Measur	able
	verbank Cleanup (10/5/13) - 175 am Cleanup (May 2013) - 3 volu					
C. How many time	es was this observation measur	ed or evaluat	ted in this i	reporting pe	riod?	
·						2
D 11 3504	1.11.		1 .d			cipants/events)
D. Has your MIS4	made progress toward this me	asurabie goai	i auring in			O No
E. Is your MS4 on	n schedule to meet the deadline	set forth in t	the SWMP	P?	Yes C) No
F. Briefly summar	rize the stormwater activities p ing cycle (including an implem	lanned to me entation sche	eet the goal edule).	s of this MC	'M durir	ıg
	nual cleanup events. tment of volunteer groups.					

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

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

Name of MS4/Coalition	Broome-Tioga Stormwater Coalition		$\left \mathbf{N} \right \mathbf{Y} \left \mathbf{R} \right 2$	2 0 0 0 2
7. Evaluating Prop	gress Toward Measurable Goals	MCM 2		
identified in your St	ort on your progress and project platormwater Management Program Pational pages as needed.	ans toward ac lan (SWMPP	hieving measurabl), including requir	e goals ements in Part
A. Briefly summar	rize the Measurable Goal identifi	ed in the SW	MPP in this repo	orting period.
Expand public invo	olvement in development of stormw	vater program	s and reporting of	stormwater
B. Briefly summar Goal.	rize the observations that indicat	ed the overa	ll effectiveness of	this Measurable
illicit discharge and	ting and Reporting Illicit Discharged who to call to report it. Distribute t anything they noticed during the continuation of	d to riverban	k cleanup participa	to recognize an ints who were
C. How many time	es was this observation measured	l or evaluate	d in this reporting	g period?
				: samples/participants/events
D. Has your MS4	made progress toward this meas	urable goal o		
_ ·	1 3	•	_	● Yes ○ No
E. Is your MS4 on	n schedule to meet the deadline se	et forth in th	e SWMPP?	● Yes O No
F. Briefly summa the next report	rize the stormwater activities pla ling cycle (including an implemen	nned to mee itation sched	t the goals of this lule).	
Establish clear pro	tocol for receipt of complaints. Fur	ther distribut	e fact sheet.	

This report is being submitted for the reporting period ending March 9, 2 0 1 4

Name of MS4/Coalition Broome-Tiogn Stormwater Coalition	N Y R 2 0 C 0 0 2
7. Evaluating Progress Toward Measurable Goals MCM 2	
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.	I achieving measurable goals IPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
Encourage public participation in stormwater education efforts t program.	hrough storm drain marking
B. Briefly summarize the observations that indicated the over Goal.	erall effectiveness of this Measurable
BTSC initially purchased 11,110 storm drain markers for all sto communities. Last year 6775 had installed them. In this reporting installed for a total of 7825.	orm drain inlets in the 15 MS4 ng year, an additional 1050 were
C. How many times was this observation measured or evaluation	ated in this reporting period?
3. 220 // 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	1 0 5 0
D. Has your MS4 made progress toward this measurable go	(ex.: samples/participants/events)
D. Has your M54 made progress toward this measurable go	● 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 me the next reporting cycle (including an implementation scl	neet the goals of this MCM during hedule).
Encourage/assist MS4 communities with installing remaining no Develop educational insert describing what markers are/what the kiosks.	narkers. ney are for. Distribute via events and

This report is being submitted for the reporting period ending March 9, 2 0 1 4

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Name of MS4/Coalition	Broome-Tioga Stormwater Coalition	N Y R 2	0 0 0 2
7. Evaluating Pro	gress Toward Measurable Goals MCM 2		
identified in your S	oort on your progress and project plans towa tormwater Management Program Plan (SW itional pages as needed.	rd achieving measurable g MPP), including requirem	goals ents in Part
A. Briefly summa	rize the Measurable Goal identified in th	e SWMPP in this report	ing period.
and electronics in I	on regarding the proper management and d Broome and Tioga Counties. Continued coll nerators of hazardous waste.	isposal of household haza lection from Conditionally	rdous waste Exempt
B. Briefly summa Goal.	rize the observations that indicated the o	verall effectiveness of th	is Measurable
households. There	olid Waste held 31 HHW & Electronics coll were 85 CESQGs from Broome and Tioga tons of household hazardous waste, 172.8 t	Together Broome and To	& 196 Tioga ioga County
C. How many tim	nes was this observation measured or eval	uated in this reporting p	period?
			amples/participants/events)
D. Has your MS4	made progress toward this measurable g	goal during this reporting	g period? ● Yes ○ No
E. Is your MS4 or	n schedule to meet the deadline set forth	in the SWMPP?	• Yes O No
F. Briefly summa	rrize the stormwater activities planned to ting cycle (including an implementation s	meet the goals of this M chedule).	CM during
Continue establish	ned programs.		

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

Name of MS4/Coalition BROOME COUNTY									Г	N		- 1	2	0 7	A	3	3 2	:]
Minimum Control Measure	3.	Ш	l <u>ic</u> it]	Dis	<u>cha</u>	rge	De	tec	etic	n :	an	<u>d 1</u>	<u>Eli</u>	mir	<u>121</u>	tio	<u>n</u>	
The information in this section is being report	rted	(cł	neck o	ne):														
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed 	l to	thi	s repo	ort?			1]											
1. Enter the number and approx. perc	ent	t of	outf	alls	ınap	ped	l;			4	8	0	#		1	0	0 9	%
2. How many of these outfalls have be reporting period (outfall reconnaiss						y we	eath	er (dis	cha	rge	es c	lur	ing	th [is	8 4	Į.
3.a. What types of generating sites/sewereporting period?	ersi	ied	ls wei	re t	arge	ed i	for i	insj	pec	tioı	n d	uri	ng	this	6			
O Auto Recyclers		•	• Lai	ndso	aping	(Ir	rigat	tion))									
O Building Maintenance			O Ma	rina	ıs													
O Churches			О Ме	tal	Platei	ng (Oper	atio	ns									
O Commercial Carwashes			Ou	tdo	or Flu	id S	tora	ge										
O Commercial Laundry/Dry Cleaners			● Paı	kin	g Lot	Ma	inte	nane	ee									
O Construction Vehicle Washouts			O Pri	ntin	g													
O Cross-Connections			O Re	side	ntial	Car	wasl	ing										
O Distribution Centers			O Re	stau	rants													
O Food Processing Facilities			O Scl	hool	s and	Un	iver	sitie	S									
O Garbage Truck Washouts			O Se _l	ptic	Mair	tena	mce											
O Hospitals			O Sw	/im/	ning	Pool	s											
O Improper RV Waste Disposal			• Ve	hicl	e Fu	ling												
O Industrial Process Water			• Ve	hicl	e Ma	int./	Repa	air S	Sho	ps								
• Other:			O <u>No</u>	ne														_
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O Sewersheds:	T		<u> </u>			1	<u> </u>				-							7

Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
	been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	O 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?	al illegal connections have been detected during this
5. How many illicit discharges have be	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 b	1 de a transcribir de la companio del companio de la companio dell
If No, approximately what percent was 8. Is the above information available in Is this information available on the VI If Yes, provide URL(s): Please provide specific address of page URL	s completed in this reporting period? O & O & O & O & O & O & O & O
If No, approximately what percent was 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	s completed in this reporting period? O & O & O & O & O & O & O & O
If No, approximately what percent was 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	s completed in this reporting period? O & O & O & O & O & O & O & O
If No, approximately what percent was 8. Is the above information available in Is this information available on the VI If Yes, provide URL(s): Please provide specific address of page URL WWWW.bcgiss.com	s completed in this reporting period? O & O & O & O & O & O & O & O
If No, approximately what percent was 8. Is the above information available in Is this information available on the VI If Yes, provide URL(s): Please provide specific address of page URL WWWW.bcgiss.com	s completed in this reporting period? O & O & O & O & O & O & O & O
If No, approximately what percent was 8. Is the above information available in Is this information available on the VI If Yes, provide URL(s): Please provide specific address of page URL W W W . b c g i s . c o m p a r c e 1 m a p p e r	s completed in this reporting period? O & O & O & O & O & O & O & O

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1. What perc	ent of sta	aff in relev	ant positi	ions and	l depart	ments has	receive	d IDDE	training?
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 5 & 1 \end{vmatrix}$

Name of MS4/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3 3 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 (SWMIII.C.1. Submit additional pages as needed.	_
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
MEASURABLE GOAL #3A is to verify that 100% of County and identified within the MS4 boundaries, including those locate SWMP includes schedule to confirm mapping and check outfalls	ed at all County-owned facilities.
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
All of the outfalls within the County roadways (and within the debeen verified and relocated using GPW equipment during the surfacility footprint is ongoing with the development of individual gmaps.	mmer fo 2013. Work within each
C. How many times was this observation measured or evalua	ted in this reporting period? 8 4 (ex.: samples/participants/evented)
D. Has your MS4 made progress toward this measurable goa	
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 the next reporting cycle (including an implementation scho	eet the goals of this MCM during
During the summer of 2015 DPW staff will screen approximately Additionally, facility outfalls will continue to be verified, mappe	

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

		SPDES ID	_
Name of MS4/Coalition BROOME COUNTY		N Y R 2 0 A 3 3	2
12. Evaluating Progress Toward M	leasurable Goals MCM 3		
Use this page to report on your progridentified in your Stormwater Manag III.C.1. Submit additional pages as n	gement Program Plan (SWM		
A. Briefly summarize the Measura	able Goal identified in the S	SWMPP in this reporting period.	
MEASURABLE GOAL #3B is to outfalls within the MS4 boundary as	_	ventory of 20% of County-owned	
B. Briefly summarize the observa Goal.	tions that indicated the ove	rall effectiveness of this Measura	ble
Goal objectives have been met during season, DPW staff conducted dry woutfalls.			
C. How many times was this obse	rvation measured or evalua	ated in this reporting period?]
		8	4
D. Has your MS4 made progress t	toward this measurable goa	ex.: samples/particing during this reporting period? ■ Yes ○	
E. Is your MS4 on schedule to me	et the deadline set forth in		ΝI
F. Briefly summarize the stormwathe next reporting cycle (include		eet the goals of this MCM during	No :
Continue with inspection program of (approximately 20%). Also will incorprogram is implemented.			

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

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SPDES ID

N Y R 2 0 A 3 3 2

Name of MS4/Coalition	BROOME COUNTY		N Y R 2	0 A 3 3 2
12. Evaluating Pro	gress Toward Measu	rable Goals MCM 3		
identified in your S	oort on your progress ar tormwater Managemen itional pages as needed	nt Program Plan (SWM		
A. Briefly summa	rize the Measurable C	Goal identified in the S	SWMPP in this repo	rting period.
	GOAL #3C is to deve e State's model IDDE I		DE law in Broome C	ounty in
B. Briefly summa Goal.	rize the observations	that indicated the ove	rall effectiveness of	this Measurable
Goal objectives ha	ve not been met in the	2014-2015 reporting pe	eriod.	
C. How many tim	es was this observatio	on measured or evalua	ated in this reporting	g period?
D 11 MO4	1	.d determinente		samples/participants/event
D. Has your MS4	made progress towar	d this measurable go	arduring this report	Mg period: ● Yes ○ No
E. Is your MS4 or	n schedule to meet the	e deadline set forth in	the SWMPP?	O Yes ● No
	rize the stormwater a ting cycle (including a			
draft of the IDDE	tifies that this local law local law has been deve 5-2016 reporting perio	eloped and is under rev		

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

Name of MS4/Coalition BROOME COUNTY SPDES N Y	
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward achieving measured in your Stormwater Management Program Plan (SWMPP), including re III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
MEASURABLE GOAL #3D is to install markers on 100% of the County-own and Dl's within the MS4 area.	ned storm drain CB's
B. Briefly summarize the observations that indicated the overall effectivenes Goal.	ss of this Measurable
This is a new goal and objectives have not been met in the 2014-2015 reporting p	period.
C. How many times was this observation measured or evaluated in this repo	orting period?
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this re	porting 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 the next reporting cycle (including an implementation schedule).	
County resources were not available to meet this goal during the 2014-2015 periods the goal to complete the effort during the 2015-2016 period.	od; however we will

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

Г			SPDES ID	
Name of MS4/Coalition	BROOME COUNTY		N Y R 2 0 A 3	3 2
12. Evalnating Progr	ress Toward Measurable Go	als MCM 3		
identified in your Sto	ort on your progress and project ormwater Management Program ional pages as needed.	_	-	Part
A. Briefly summari	ize the Measurable Goal iden	tified in the SWMPP	in this reporting per	iod.
and list it on the stor	OAL #3E is to establish a decay mater website. This goal also omplaints with information rel	so includes creating cer		
B. Briefly summari	ize the observations that indi	cated the overall effec	tiveness of this Meas	surable
	nd objectives have not been en tion for the new County storm			
C. How many times	s was this observation measu	red or evaluated in th		0
D. Has your MS4 m	nade progress toward this mo	easurable goal during	· · · · · · · · · · · · · · · · · · ·	-
E. Is your MS4 on s	schedule to meet the deadline	e set forth in the SWN	1PP? ○ Yes	• No
•	ize the stormwater activities paged including an implement	_		
New County storm v complaint form.	water webpage will be up and i	running by June 2015,	including the IDDE fi	illable

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

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Name of MS4/Coalition	BROOME COUNTY	N Y R 2 0 A 3 3 2
12. Evaluating Pro	gress Toward Measurable Goals MCM 3	
identified in your St	ort on your progress and project plans toward ormwater Management Program Plan (SWM) tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the S	WMPP in this reporting period.
- what they are, how	OAL #3F is to educate and inform 100% of v to report them, and how to address them. To related to public education, but will be directed.	his goal is cross referenced with
B. Briefly summar Goal.	ize the observations that indicated the over	rall effectiveness of this Measurable
	evelopment and implementation of facility spal continues to be advanced.	ecific good housekeeping
C. How many time	es was this observation measured or evalua	ted in this reporting period?
		2 0
D. Hag von MC4	and a suppress to search this manner his and	(ex.: samples/participants/even
D. Has your M54 i	made progress toward this measurable goa	aduring this reporting period? ■ Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in t	
		• Yes O No
	ize the stormwater activities planned to mo ng cycle (including an implementation scho	
	tation of the County stormwater webpage in rethe 2015-2016 reporting year.	nid-2015, this initiative will be

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

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Name of MS4/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3 3 2
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 (SWMP) 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 #3G is to inform and educate businessed environmental impacts of illegal dumping, as well as chemical and encourage the use of BMP's to prevent and control these. This is to review process, which is an advisory capacity only.	I hazardous waste spills, and to
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
Broome County Planning and Engineering staff continue to review reviews where BMP's were incorporated or included as advisory cappropriate. Additionally, Broome County Planning has been prove regarding stormwater issues and IDDE.	omments to municipalities as
C. How many times was this observation measured or evaluate	ed in this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in th	
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	et the goals of this MCM during
For this next reporting period we need to create a better tracking sy	ystem through County Planning to

count the number of times these educational issues are being addressed through the 239 review process. Besides this modification, the program goal is to continue these reviews as established, and

to continue the outreach to municipal officials.

Name of MS4/Coalition TIOGA COUNTY	SPDES ID N Y R 2 0 A 0 4 7										
Minimum Control Measure 3. 1	llicit 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 	nis report?										
1. Enter the number and approx. percent	of outfalls mapped: # %										
2. How many of these outfalls have been so reporting period (outfall reconnaissance	ereened 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	O Landscaping (Irrigation)										
O Building Maintenance	○ 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	O 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										
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:											

Name of MS4/Coalition TIOGA COUNTY	N Y R 2 0 A 0 4 7										
3.b. What types of illicit discharges have	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	O 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										
O Other:	None										
4. How many illicit discharges/potentia reporting period?	Il 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 GIS? Is this information available on the web? If Yes, provide URL(s): Please provide specific address of page where map(s) can be accessed - not home page.											
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This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition T	TIOGA COUNTY		N Y R 2	2 0 A 0 4 7
12. Evaluating Progr	ress Toward Measurable Goa	als MCM 3		
identified in your Stor	rt on your progress and project rmwater Management Progran onal pages as needed.			
A. Briefly summariz	ze the Measurable Goal iden	tified in the SV	MPP in this repo	orting period.
"Tioga County and T through April 31, 20.	c Works continues to follow th Town of Owego Stormwater M 15. s or outfalls have been constru	anagement Prog	gram Plan", which	is effective
B. Briefly summark Goal.	ze the observations that indic	cated the overa	ll effectiveness of	this Measurable
No illicit discharges	detected.			
C. How many times	s was this observation measur	red or evaluate	d in this reportin	g period?
•				3
D. Hag ways MC4 m	nade progress toward this me	osuroblo goal (: samples/participants/event:
D. Has your MIS4 III	iade progress toward this inc	asurable goar (turing this report	● Yes ○ No
E. Is your MS4 on s	schedule to meet the deadline	e set forth in th	e SWMPP?	• Yes O No
	ze the stormwater activities p ng cycle (including an implen			
-Town of Owego His	nd outfalls are inspected 2 time ghway Department performs a County's MS4 area of jurisdict	Il cleaning and	maintenance on the	e stormwater t.
			<u> </u>	

Name of MS4/Coalition City of Binghamton	SPDES ID N Y R 2 0 A 3 4 1											
Minimum Control Measure 3	8. Illicit Discharge Detection and Elimination											
The information in this section is being reporte	ed (check one):											
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed 	. ,											
1. Enter the number and approx. perce	nt of outfalls mapped: 2 0 0 # 9 9 %											
2. How many of these outfalls have been reporting period (outfall reconnaissa	n screened for dry weather discharges during this nee inventory)?											
3.a. What types of generating sites/sewer reporting period?	sheds 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											
Construction Vehicle Washouts	O Printing											
O Cross-Connections	O Residential Carwashing											
O Distribution Centers	O Restaurants											
O Food Processing Facilities	Schools and Universities											
● Garbage Truck Washouts	O Septic Maintenance											
Hospitals	Swimming Pools											
O Improper RV Waste Disposal	● Vehicle Fueling											
O Industrial Process Water	O Vehicle Maint./Repair Shops											
• Other: C i t y S t r e e t s	○ None											
O Sewersheds:												

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

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

Name of MS4/Coalition	City of Binghamion	SPDES ID N Y R 2 0 A 3 4 1
12. Evaluating Pro	gress Toward Measurable Goals MCM 3	
identified in your St	ort on your progress and project plans toward tormwater Management Program Plan (SWM itional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the S	SWMPP in this reporting period.
of SWPPPs, Review stromwater dischar- watershed map. Up	Reconnaissance Inventory. Updated outfall nowed IDDE Ordinance. Cleaned and inspected ges. Investigated and eliminated all reported polated a SWPPP review practical. Implemented bills. Continued to refine City URRP Programmers.	Catch basins. Updated list of non illicit discharges. Updated outfall ed educational measures through
B. Briefly summan	rize the observations that indicated the over	rall effectiveness of this Measurable
608 drain structures	in progress to make the inventory 100%. Reserver cleaned and inspected. Replaced 60 Castings. 60 "No Bumping Drains To River" m	tch Basins. Repaired 4 manholes.
C. How many time	es was this observation measured or evalua	ted in this reporting period?
D. Has your MS4	made progress toward this measurable goa	(ex.: samples/participants/olding this reporting period? ■ Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in t	the SWMPP?
		○ Yes ● No
•	rize the stormwater activities planned to mo ing cycle (including an implementation sch	-
		. 11 1 1 1 1 1 1 1 1 1

Continue outfall reconnaissance inventory. Review of ordinance, catchbasin cleaning, illicit discharge detection investigation, and installation of catchbaisn markers will be on going. Training in IDDE for all staff. Continued to implement BMPs. Establisher a phone number for citizens to report illegal dumping.

	SPDES ID
Name of MS4/Coalition Town of Binghamton	N Y R 2 0 A 0 0 9
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported (check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to t 	his report? 0 0 1
1. Enter the number and approx. percent	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 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
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	O 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
Other:	O None
O Sewersheds:	

 		
Name of MS4/Coalition Town of Binghamton	N	Y R 2 0 A 0 0 9
3.b. What types of illicit discharges have	been found during this reporting	g period?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	O 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	
O Other:	None	
4. How many illicit discharges/potentia reporting period?	l illegal connections have been de	tected during this
5. How many illicit discharges have been	en confirmed during this reportin	g period?
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated o	during this reporting
7. Has the storm sewershed mapping be If No, approximately what percent was		
8. Is the above information available in Is this information available on the v If Yes, provide URL(s): Please provide specific address of page URL	veb?	O Yes ● No O Yes ● No thome page.
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This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Tow	n of Binghamton	N Y R 2 0 A 0 0 9
12. Evaluating Progres	ss Toward Measurable Goals MCM 3	
	on your progress and project plans toward nwater Management Program Plan (SWMF nal pages as needed.	
A. Briefly summarize	the Measurable Goal identified in the S	WMPP in this reporting period.
	ections to assess potential for illicit discharacter basin markers. The Town conducter ented the activity.	
B. Briefly summarize Goal.	the observations that indicated the over	rall effectiveness of this Measurable
	ripleted in 2014. Designed and constructed designed and constructed a Vehicle Wash	
C. How many times w	as this observation measured or evaluat	ted in this reporting period? [
D. Has your MS4 mad	le progress toward this measurable goal	during this reporting period?
E. Is your MS4 on sch	nedule to meet the deadline set forth in t	● Yes ○ No he SWMPP? ● Yes ○ No
	the stormwater activities planned to me cycle (including an implementation sche	eet the goals of this MCM during
	DE law. observed incidences of illegal discharge. public through the coalition, Town websit	te and Town newsletter.

Name of MS4/Coalition Town of Chenengo	N Y R 2 0 A 1 2 7
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 	nis report?
1. Enter the number and approx. percent of	of outfalls mapped: 1 6 # 1 0 0 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	ereened 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	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	O 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
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
• Sewersheds: General Storm	Sewer Networks

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

	SPDES ID
Name of MS4/Coalition Town of Chenengo	N Y R 2 0 A 1 2 7
12. Evaluating Progress Toward Measurable Goals M	1CM 3
Use this page to report on your progress and project plan identified in your Stormwater Management Program Pla III.C.1. Submit additional pages as needed.	ns toward achieving measurable goals in (SWMPP), including requirements in Part
A. Briefly summarize the Measurable Goal identifie	d in the SWMPP in this reporting period.
Finding no illicit discharges. The Town website now in well as links to the NYSDEC for complaint reporting at Report Citizen Complaint Form".	
B. Briefly summarize the observations that indicates Goal.	d the overall effectiveness of this Measurable
No discharges found.	
C. How many times was this observation measured	or evaluated in this reporting period?
•	
D. Has your MS4 made progress toward this measu	(ex.: samples/participants/events rable goal during this reporting period? ■ Yes ○ No
E. Is your MS4 on schedule to meet the deadline set	
F. Briefly summarize the stormwater activities plan the next reporting cycle (including an implement	
Develop mapping areas investigated and a log. Possible Develop storm watershed map of areas contributing to	

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

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

Name of MS4/Coalition Town of Conklin	N Y R 2 0 A 2 5 5
Minimum Control Measure 3. II	licit Discharge Detection and Elimination
The information in this section is being reported (c	heck one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	is report?
1. Enter the number and approx. percent o	f outfalls mapped: 6 # 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/sewershed reporting period?	ds were targeted for inspection during this
O Auto Recyclers	● Landscaping (Irrigation)
● Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
● Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	 Parking Lot Maintenance
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	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:	

Name of MS4/Coalition Town of Conklin															_							- [PDI		$\neg T$	2	0 2	A	2	5	5
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												O 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																		
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4. How many illicit discharges/potential illegal connections have been detected during this reporting period?															0																
5. How many illicit discharges have been confirmed during this reporting period?															0																
6. How many illicit discharges/illegal connections have been eliminated during this reporting period?															0																
7. Has the storm sewershed mapping been completed in this reporting period? Yes O ? If No, approximately what percent was completed in this reporting period?															No %																
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This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

SPDES ID

Name of MS4/Coalition	Town of Conklin		N Y R	2 0 A 2 5 5
12. Evaluating Pro	gress Toward Measurable Goals	s MCM 3		
identified in your St	ort on your progress and project p tormwater Management Program I itional pages as needed.	lans toward a Plan (SWMP	achieving measural P), including requi	ble goals irements in Part
A. Briefly summar	rize the Measurable Goal identif	ied in the S	WMPP in this rep	oorting period.
Measurable goal is eliminate illicit disc	to routinely inspect the outfalls ducharges if found.	uring dry wea	ather conditions an	d identify and
B. Briefly summar Goal.	rize the observations that indica	ted the over	all effectiveness o	f this Measurable
Since the local IDI	DE Law was passed the Town has	not detected	any illicit discharg	ges.
C. How many tim	es was this observation measure	ed or evalua		ng period? 1 x.: samples/participants/events/
D. Has your MS4	made progress toward this mea	surable goal		rting period?
	n schedule to meet the deadline s			Yes ○ NoYes ○ No
F. Briefly summa	arize the stormwater activities pl ting cycle (including an impleme	anned to me	eet the goals of thi	is MCM during
conditions. Contin	nual outfall inspections to identify nue public outreach through the us w they can and should be avoided.	se of flyers a	rges especially durant nd pamphlets expla	ring dry weather aining illicit

Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2 0 A 1 4 3
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 	nis report?
1. Enter the number and approx. percent o	of outfalls mapped: 60# 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	O Landscaping (Irrigation)
■ Building Maintenance	O Marinas
Churches	O Metal Plateing Operations
O Commercial Carwashes	O Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	 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
Hospitals	O Swimming Pools
O Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
O Other:	O None
]]
O Sewersheds:	

Name of MS4/Coalition TOWN OF DICKINSON							PDE:	3 T	2	0	A	1 4	4 3	3
3.b. What types of illicit discharges have	been fo	ound d	uring	this	rep	orti	ng p	erio	d?					
O Broken Lines From Sanitary Sewer	O Indu	strial C	Connec	tions										
O Cross Connections	O Inflo	ow/Infil	tration	ı										
O Failing Septic Systems	O Pum	p Statio	on Fai	lure										
O Floor Drains Connected To Storm Sewers	O Sani	itary Se	wer O	verfic	ws									
O Illegal Dumping	O Stra	ight Pip	e Sew	er Di	scha	rges								
Other:														
4. How many illicit discharges/potentia reporting period?	ıl illega	l conne	ection	s hav	e be	een	dete	cted	l du	ırin	g tl	his	T	0
5. How many illicit discharges have been	en conf	ïrmed	durin	g thi	s rej	port	ing	per	iod'	?				0
6. How many illicit discharges/illegal c period?	onnecti	ons ha	ve be	en eli	imin	ate	d du	ırinş	g th	is r	epo [orti 	- 1	0
7. Has the storm sewershed mapping b If No, approximately what percent was	een cor s compl	npleted eted in	d in tl this r	nis re eporti	por ing p	ting perio	pei od?	'iod'	?	•	Ye	s 1	0	No &
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If submitting this form as part of a joint report or	SPDES ID Grank.
Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2 0 A 1 4 3
12. Evaluating Progress Toward Measurable Goals	MCM 3
Use this page to report on your progress and project plidentified in your Stormwater Management Program Plll.C.1. Submit additional pages as needed.	ans toward achieving measurable goals lan (SWMPP), including requirements in Part
A. Briefly summarize the Measurable Goal identifi	ied in the SWMPP in this reporting period.
ILLICIT DISCHARGES FOUND. Measurable goal weather conditions and identify and eliminate illicit d	is to routinely inspect the outfalls during dry ischarges if found.
B. Briefly summarize the observations that indicate Goal.	ed the overall effectiveness of this Measurable
FOUND ILLICIT DISCHARGES ARE TARGETD I AS SOON AS POSIBLE. None were found	FOR ENFORCEMENT AND ELIMINATED
C. How many times was this observation measured	d or evaluated in this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this meas	surable goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline s	et forth in the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities plate the next reporting cycle (including an implementation)	nned to meet the goals of this MCM during ntation schedule).
ALL PUBLIC WORKS EMPLOYEES WILL BE DI ALL ILLLICIT DISCHARGES	RECTED TO LOOK FOR AND REPORT
WE HAVE A DECIDATED WEB SITE AND WILL MATERIAL ON IT.	L BE PUTTING ALL MS4 RELATED

O Construction Vehicle Washouts

O Cross-Connections

O Distribution Centers

O Hospitals

O Food Processing Facilities

O Garbage Truck Washouts

MS4 Annual Report Form

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

Name of MS4/Coalition Village of Endicott	N Y R 2 0 A 1 4 9
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported ((check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to t 	this report?
1. Enter the number and approx. percent	of outfalls mapped: 21# 100%
2. How many of these outfalls have been sereporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershore 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 Printing

O Restaurants

O Residential Carwashing

O Schools and Universities

O Septic Maintenance

O Swimming Pools

O Vehicle Fueling

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

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

Name of MS4/Coalition Village of Endicott	N Y R 2 0 A 1 4 9
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans towa identified in your Stormwater Management Program Plan (SWIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
Two Storm Water Studies were completed by Woidt Engineer looked at the Brixius Creek area including Robble Avenue / Engineer The Second Storm Water Study looked at the Loder Avenue at	ast Franklin Street Intersection.
B. Briefly summarize the observations that indicated the ov	verall effectiveness of this Measurable
Based upon the Storm Water Studies, Woldt Engineering's rece	ommendations are being pursued.
C. How many times was this observation measured or evalu	usted in this reporting period?
C. HOW many times was this observation measured of evaluation	2
D. Has your MS4 made progress toward this measurable go	(ex.: samples/participants/e oal during this reporting period? ■ Yes ○ No
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	
The implementation of the recommendations all depends upon recommendations will have to be let out for Final Engineering	funding sources. The Design.
The implementation of the recommendations all depends upon	funding sources. The

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

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

SPDES ID

Name of MS4/Coalition Town of Fenton	N Y R 2 0 A 0 7 8
Minimum Control Measure 3. I	Ilicit Discharge Detection and Elimination
The information in this section is being reported (o	check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	nis report?
1. Enter the number and approx. percent of	of outfalls mapped: 3 6 # 1 0 0 %
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	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	O 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
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
Those not yet	mapped and survey
O Sewersheds:	

Name of MS4/Coalition Town of Fenton	_								Г	N		ID R	2	0	A	0	7	8
3.b. What types of illicit discharges have	beer	ı fo	und	dur	iug	th	is r	epe	orti	ing	pe	rio	d?					
O Broken Lines From Sanitary Sewer	O Ir	ndus	strial	Con	nec	tion	ıs											
O Cross Connections	O It	ıflo	w/Infi	ltra	tion	l												
O Failing Septic Systems	O P	umj	Stat	ion :	Fail	lure												
O Floor Drains Connected To Storm Sewers	\circ s	anit	ary S	ewe	r O	veri	flov	/S										
O Illegal Dumping	0 S	trai	ght P	pe S	Sew	er I	Disc	har	ges	;								
4. How many illicit discharges/potential illegal connections have been detected du reporting period?															g t	his		0
reporting period? 5. How many illicit discharges have been confirmed during this reporting period?															[0
6. How many illicit discharges/illegal c period?	onne	etic	ons h	ave	be	en «	elin	nin	ate	d d	lur	ing	tlı	is r	epe [orti		0.
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11	11. What percent of staff in relevant positions and departments has received IDDE training?																																					

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

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

SPDES ID
Name of MS4/Coalition Town of Fenton Name of MS4/Coalition Town of Fenton
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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.
Via inspection of Outfalls Identified within the MS4 as a result of contacts and inquiries.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Surveying each identified outfall increases confidence that Illicit Discharges are not an issue within the MS4.
Not finding evidence of illicit discharges.
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 plauned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Develop an ongoing Inspection/Survey program that reviews at least a third of the outfalls within the MS4 annually.

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 5 \end{bmatrix}$ 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 3. I	llicit Discharge Detection and Elimination
The information in this section is being reported (c	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	uis report? 0 0 1
1. Enter the number and approx. percent of	f outfalls mapped: 18# 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	recned 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	O Outdoor Fluid Storage
O 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	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 V	O None e h i c 1 e M a i n t e n a n c e
O Sewersheds:	

<u></u>	SPDES ID
Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
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	O 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?	al illegal connections have been detected during this
5. How many illicit discharges have be	en confirmed during this reporting period?
6. How many illicit discharges/illegal c period?	onnections have been eliminated during this reporting
7. Has the storm sewershed mapping b If No, approximately what percent was	een completed in this reporting period? • Yes O No secompleted in this reporting period?
8. Is the above information available in Is this information available on the If Yes, provide URL(s):	
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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 5$

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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 achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
With the training of the Village's Refuse, Street, Sanitary Sewer & Water Departments the employees are on the streets daily and are aware to notify their supervisors of any Illicit Discharges. The Code Enforcement works closely with the DPW in identifying and enforcing the Village Code regarding illicit discharges.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
During the reporting year zero illicit discharges were documented.
a zz
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 ○ 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 train employees to be aware of illicit discharges during their daily activities and to notify their supervisors as necessary.

Name of MS4/Coalition Town of Kirkwood	SPDES ID N Y R 2 0 A 0 7 2
Minimum Control Measure 3. II	licit Discharge Detection and Elimination
The information in this section is being reported (cl	neck one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	s report?
1. Enter the number and approx. percent of	foutfalls mapped: 91# 100%
reporting period (outfall reconnaissance	
3.a. What types of generating sites/sewershed reporting period?	Is were targeted for inspection during this
● Auto Recyclers	Landscaping (Irrigation)
● Building Maintenance	O Marinas
Churches	Metal Plateing Operations
 Commercial Carwashes 	 Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
 Construction Vehicle Washouts 	O Printing
O Cross-Connections	O Residential Carwashing
 Distribution Centers 	O Restaurants
● Food Processing Facilities	 Schools and Universities
O Garbage Truck Washouts	• Septic Maintenance
O Hospitals	Swimming Pools
O Improper RV Waste Disposal	• Vehicle Fueling
Industrial Process Water	● Vehicle Maint./Repair Shops
O Other:	O None
O Sewersheds:	

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

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

SPDES ID

Name of MS4/Coalition Town of Kirkwood					1	4 X	R	2	0 7	A (0 .	7 2	2
3.b. What types of illicit discharges have	been f	ound du	ring th	is re	porti	ng p	erio	d?					
O Broken Lines From Sanitary Sewer	O Indu	ustrial Co	nnectio	18									
O Cross Connections	O Inflo	ow/Infiltra	ation										
O Failing Septic Systems	O Pun	np Station	Failure	:									
O Floor Drains Connected To Storm Sewers	O San	itary Sew	er Over	flows									
O Illegal Dumping	O Stra	aight Pipe	Sewer	Disch	arges								
O Other:	● Nor										<u> </u>		
4. How many illicit discharges/potential reporting period?	l illega	ıl connec	ctions b	ave J	een	dete	cted	đu	rin	g ti	AIS		0
5. How many illicit discharges have be	en conf	firmed d	uring 1	his r	epor	ting	peri	od?	•				0
6. How many illicit discharges/illegal c period?	onnect	ions hav	e been	elini	inate	d dv	ring	g th:	is r	epo [orti	ng	0
7. Has the storm sewershed mapping be If No, approximately what percent was	een con s compl	mpleted leted in tl	in this his repo	repo orting	rting peri	g per od?	iod?	•	•	Ye	S	0]	No &
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This report is being submitted for the reporting period ending March 9, 2 0 1 5

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Name of MS4/Coalition Town of Kirkwood	N Y R 2 0 A 0 7 2
12. Evaluating Progress Toward Measurable Goals MCM	13
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.	ward achieving measurable goals WMPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in	the SWMPP in this reporting period.
Measurable goal is to routinely inspect the outfalls during d eliminate illicit discharges if found.	ry weather conditions and identify and
B. Briefly summarize the observations that indicated the Goal.	e overall effectiveness of this Measurable
Since the local IDDE Law was passed the Town has not det	tected any illicit discharges.
C. How many times was this observation measured or ev	
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurabl	
E. Is your MS4 on schedule to meet the deadline set fort	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 n schedule).
Continue to do annual outfall inspections to identify illicit of conditions. Continue public outreach through the use of fly discharges and how they can and should be avoided.	discharges especially during dry weather yers and pamphlets explaining illicit

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Name of MS4/Coalition Town of Owego	N	Y	R	2	0	Α	0	7	9

Minimum Control Measure 3	3. Illicit Discharge Detection and Elimination
The information in this section is being reporte	ed (check one):
On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed (
1. Enter the number and approx. perce	nt of outfalls mapped: 22# 100%
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/sewer reporting period?	sheds 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	O 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
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
O Other:	• None
O Sewersheds:	

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

Name of MS4/Coalition Town of Owego	SPDES ID N Y R 2 0 A 0 7 9													
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	O 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?	al illegal connections have been detected during this													
5. How many illicit discharges have been confirmed during this reporting period? 6. How many illicit discharges/illegal connections have been eliminated during this reporting														
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	s completed in this reporting period? Yes O No reporting period?													
8. Is the above information available in														
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This report is being submitted for the reporting period ending March 9, 2 0 1 5

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

The Town of Owego Highway Department is currently modifying the EPA Outfall Reconnaissance Inventory/Sample Collection Field Sheet for more effective record keeping.

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

Work is continuing on modification of the field sheet.

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).

The Town of Owego will inspect and clean 280 catch basins per year on a rotating basis.

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Name of MS4/Coalition	VILLAGE OF PORT DICKINSON		N	Y	R	2	0	Α	0	8	0
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<u> Minimum Control Measure 3.</u>	Illicit Discharge Detection and Elimination
The information in this section is being reported	(check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to 	this report?
1. Enter the number and approx. percent	of outfalls mapped: 3 0 # 1 0 0 %
2. How many of these outfalls have been reporting period (outfall reconnaissand	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	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	O 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
 Industrial Process Water 	O Vehicle Maint./Repair Shops
O Other:	O None
O Sewersheds:	

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

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3.b. What types of illicit discharges have	been f	ound	duri	ng t	his r	epo	orti	ng p	er	iod	l ?				
O Broken Lines From Sanitary Sewer	O Ind	ustrial	Con	nectio	ns										
O Cross Connections	O Infl	ow/Infi	ltrati	ion											
O Failing Septic Systems	O Pur	np Stat	ion F	ailur	e										
O Floor Drains Connected To Storm Sewers	O Sar	itary S	ewer	Ove	rflov	VS									
O Illegal Dumping	O Stra	aight Pi	ipe S	ewer	Disc	char	ges								
Other:	● No	ne]_	
4. How many illicit discharges/potentia reporting period?	ıl illega	al conr	iecti	ons]	have	e be	en	dete	ecte	ed (dur	ing	g th	is	0
 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 															0
6. How many illicit discharges/illegal c period?	onnect	ions h	ave	been	eliı	nin	ate	d dı	ıri	ng	this	s re	epoi	rtin	g
7. Has the storm sewershed mapping b If No, approximately what percent was	een co s comp	mplete leted in	ed in this	this s rep	s rep ortin	ort ng p	ing eric	per od?	rio	d?		•	Yes		No 0 %
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SPDES ID

Name of MS4/Coalition VILLAGE OF PORT DICKINSON N Y R 2 0 A 0 8 0
12. Evaluating Progress Toward Measurable Goals MCM 3
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
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 TARGETED FOR ENFORCEMENT AND ELIMINATED AS SOON AS POSSIBLE.
C. XI
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 • No
 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).
BOTH 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 flyer's and pamphlets explaining illicit

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

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Name of MS4/Coalition Town of Union	SPDES ID
Minimum Control Measure 3. I	Ilicit Discharge Detection and Elimination
The information in this section is being reported (o	check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	is report? 1
1. Enter the number and approx. percent of	of outfalls mapped: 15# 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/sewershereporting period?	ds 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	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
 Food Processing Facilities 	O Schools and Universities
O Garbage Truck Washouts	Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
O Other:	O None
O Sewersheds:	

	SPDES ID	
Name of MS4/Coalition Town of Union	N Y R 2	0 A 0 5 0
3.b. What types of illicit discharges have	been found during this reporting period?	?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	O 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: GRASS CLIPPIN	O None G S I N S T R E E T	ļ
4. How many illicit discharges/potentia reporting period?	d illegal connections have been detected d	uring this
5. How many illicit discharges have been	en confirmed during this reporting period	1? 7
6. How many illicit discharges/illegal c period?	onnections have been eliminated during t	his reporting
7. Has the storm sewershed mapping b If No, approximately what percent was		O Yes ● No
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Name of MS4/Coalition Town of Union SPDES ID N Y R 2 0 A 0 5 0
12. Evaluating Progress Toward Measurable Goals MCM 3
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.I. 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 has increase fire safety inspections for businesses and look 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/events)
D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes • O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Need to install more storm drain markers to make public aware that illegal dumping not permitted.

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 the 	ais report?	
1. Enter the number and approx. percent	of outfalls mapped: 192# 99%	
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?	ds 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	O Printing	
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:	O None	
O Sewersheds:		

_	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	e been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	O Inflow/Infiltration
O Failing Septic Systems	O Punp Station Failure
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
O Other:	● None
4. How many illicit discharges/potentia reporting period?	al illegal connections have been detected during this
5. How many illicit discharges have be	en confirmed during this reporting period?
6. How many illicit discharges/illegal operiod?	connections have been eliminated during this reporting
7. Has the storm sewershed mapping by If No, approximately what percent was	oeen completed in this reporting period? O Yes No s completed in this reporting period? 9 9 9
8. Is the above information available in	n GIS? ○ Yes • No
Is this information available on the	web? O Yes ● No
If Yes, provide URL(s): Please provide specific address of page URL	e where map(s) can be accessed - not home page.
URL	

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

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

Name of MS4/Coalition Town of Vestal	SPDES ID N Y R 2 0 A 0 6 4
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 (SWMP III.C.1, Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
map, prioritize and inspect outfalls investigate and confirm source pollution clean catch basins	
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
mapping of storm outfalls near completion	
numerous catch basins cleaned	
C. How many times was this observation measured or evaluat	red in this reporting period?
	0
D. Has your MS4 made progress toward this measurable goal	tex.: samples/participants/even during this reporting period?
,	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the $f r$	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	● Yes ○ No et the goals of tbis MCM during dule).
complete sanitary smoke testing reinspect 25% outfalls for 2nd time	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} = 1$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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Name of MS4/Coalition BROOME COUNTY	N	Y	R	2	0	Α	3	3	2

	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?	• 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	and
	Analysis Workbook? O Yes O No	O NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. O 09/2004 O 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 (SWPPs) have been reviewed in this reporting period?	1
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No	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	l 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	#		No Authority
O Termination of Contracts	#	0	O No Authority
O Administrative Fines	#		No Authority
O Civil Penalties	#		No Authority
O Administrative Orders	#		No Authority
O Enforcement Actions or Sanctions	#	0	
O Other	#		O No Authority

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

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Name of MS4/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3 3 2
Minimum Control Measure 4. Construction Site Stor	<u>mwater Runoff Control</u>
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1 	
1. How many construction projects have been authorized for distributing this reporting period?	arbances of one acre or more
2. How many construction projects disturbing at least one acre we during this reporting period?	ere active in your jurisdiction
3. What percent of active construction sites were inspected during	g this reporting period? \bigcirc NT $\boxed{100}$ %
4. What percent of active construction sites were inspected more	than once? O NT 1 0 0 %
5. Do all inspectors working on hehalf of the MS4s contributing to Construction Stormwater Inspection Manual?	o this report use the NYS ● Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Stormwater (SWPPPs) of construction projects that are subject to MS4 revi	Pollution Prevention Plans iew and approval? • Yes O No O NT
If your MS4 is Non-Traditional, are SWPPPs of construction p public review?	rojects made available for O Yes O No
If Yes, use the following page to identify location(s) where SWPPI	es can be accessed.

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

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Name (of MS4/	Coali	ition	BRO	ОМЕ	COI	UNT	Y							_						N	Y	R	2	0	A	3	3	2
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• MS	4/Coal	ition	Offi	ce																									
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This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix}$

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Name of MS4/Coalition	BROOME COUNTY	N Y R 2 0 A 3 3 2
7. Evaluating Pro	ogress Toward Measurable Goals MCM 4	
identified in your S	port on your progress and project plans toward tormwater Management Program Plan (SWMI litional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summa	rize the Measurable Goal identified in the S	SWMPP in this reporting period.
and with contracto considerations from SWPPP's and other	GOAL #4A is to assure that 100% of County or include appropriate erosion control language means that consultants or construction considerations for environmental permits included in the bid do hage which allows inspectors to stop work if presented the control of the county of th	e - either requiring design rom contractors. This includes ocuments as part of the legal
B. Briefly summa Goal.	arize the observations that indicated the over	rall effectiveness of this Measurable
County has adopte	was let that required a SWPPP during this reported a policy of including this language in all corfor erosion and sedimentation.	orting period. Additionally, the intracts that involve earth disturbance
C. How many tim	nes was this observation measured or evalua	ited in this reporting period?
		(ex.: samples/participants/eve
D. Has your MS4	made progress toward this measurable goa	
E. Is your MS4 or	n schedule to meet the deadline set forth in	the SWMPP? ● Yes ○ No
F. Briefly summa the next repor	arize the stormwater activities planned to m ting cycle (including an implementation sch	eet the goals of this MCM during
Continue as develo	oped and implemented.	

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

Name of MS4/Coalition BROOME COUNTY	SPDES ID 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 identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed.	IPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
MEASURABLE GOAL #4B is to assure that 100% of County contractor with appropriately trained staff (NYSDEC Erosion Countification be provided prior to start of work, and that this train moving operations.	ontrol Certified), that a copy of the
B. Briefly summarize the observations that indicated the ove	erall effectiveness of this Measurable
Appropriate contract language is inserted into contract documen a SWPPP this reporting period did have an appropriately trained	nts. The one County project requiring la person on the contractor's staff.

C. How many times was this observation measured or evaluated in t	this reporting period?	
	(ex.: samples/pa	
D. Has your MS4 made progress toward this measurable goal durin		
	• Yes	O No
E. Is your MS4 on schedule to meet the deadline set forth in the SW	MPP?	
•	• Yes	O No
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule).	● Yes goals of this MCM du	
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule).	● Yes goals of this MCM du	
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule).	● Yes goals of this MCM du	
F. Briefly summarize the stormwater activities planned to meet the	● Yes goals of this MCM du	
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule).	● Yes goals of this MCM du	

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SPDES ID

N Y R 2 0 A 3 3 2

Na	me of MS4/Coalition BROOME COUNTY NY R 2 0 A 3 3 2
7.	Evaluating Progress Toward Measurable Goals MCM 4
id	se this page to report on your progress and project plans toward achieving measurable goals entified in your Stormwater Management Program Plan (SWMPP), including requirements in Part I.C.1. Submit additional pages as needed.
A	Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
N e	IEASURABLE GOAL #4C is to assure that 100% of inspectors on 100% of County projects are ther P.E.'s, CPESC's or trained and certified in erosion and sediment control.
	Briefly summarize the observations that indicated the overall effectiveness of this Measurable oal.
(Totices were sent to all consulting engineers that provide construction consulting services to the county that this would be a County requirement in 2014. Additionally, all County DPW engineering raff are NYDEC trained and certified.
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 • 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 as developed and implemented.
L	

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

Name of MS4/Coalition BROOME COUNTY SPDES ID 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 #4D is to have 100% of County staff who are involved with earth moving and construction types of projects for the County complete the 4-hour erosion and sediment control training for contractors. This includes (at a minimum), County Highway Superintendents and Field Crew chiefs who are responsible for directing construction activities.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
All applicable DPW staff members are now certified (engineering, highways, and solid waste management). No one required recertification during this reporting period.
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
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 make sure that all new staff members are trained and certified, and make sure that all certified staff members are renewed every 3 years as needed.

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

	SPDES ID
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 pl identified in your Stormwater Management Program P III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identifi	ed in the SWMPP in this reporting period.
MEASURABLE GOAL #4E is to track and inspect erosion and sediment control compliance at least once SWPPP.	•
B. Briefly summarize the observations that indicat Goal.	ed the overall effectiveness of this Measurable
100% of County sponsored projects are/were inspecte	d and tracked during the past reporting period.
C. How many times was this observation measured	
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this meas	
·	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline se	
F. Briefly summarize the stormwater activities pla the next reporting cycle (including an implement	_
Continue as developed and implemented.	

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

Name of MS4/Coalition BROOME COUNTY SPDES ID 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 #4F is to log and track 100% of complaints / reports coming into the County related to erosion and/or sedimentation issues, and tracking actions taken and/or follow-up.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
There were no specific calls / complaints related to erosion and/or sediment related issues during this reporting period. A fillable reporting form has been developed for the County's stormwater webpage.
C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/ever
D. Has your MS4 made progress toward this measurable goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue as developed and implemented Implement new County webpage with fillable stormwater reporting form effective June 2015.

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

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Name of MS4/Coalition	BROOME COUNTY		N	Y	R	2	o	Α	3	3	2
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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

MEASURABLE GOAL #4G -- is 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.

161 total 239 reviews were completed by County Planning during this reporting period, and 56 of these were also reviewed by the Engineering Division for potential impacts to County properties and/or infrastructure. Any 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?

(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).

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.

HAZARD

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

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Name of MS4/Coalition	BROOME COUNTY	,		SPDES ID N Y R	2 0 A 3 3 2
<u>Minimum</u>	Control Mea	sure 5. Post-	<u>Construction</u>	on Stormwater N	<u> Ianagement</u>
The information in th		ng reported (chec	k one):		
On behalf of an incOn behalf of a coa					
How m	any MS4s cont	ributed to this r	eport?	1	
				anagement practices reporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	es				
O Filter Systems					
O Infiltration Basins					
Open Channels		3	3	1	
Ponds		1		1	
O Wetlands					
O Other					
2. Do you use an BMPs, inspecti			abase, spreads	sheet) to track post-	• construction ● Yes ○ No
3. What types of Development/E		_		implement Low Ir inciples?	npact
O Building Codes	Municipal C	Comprehensive P	lans		
O Overlay Districts	O Open Space	Preservation Pro	ogram		
O Zoning	O Local Law o	or Ordinance			
O None	O Land Use R	egulation/Zoning	2		
Watershed Plans	O Other Comp	orehensive Plan			
Other:					

PLAN

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

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		SPI	DE <u>S</u>	ID						
Nan	ne of MS4/Coalition BROOME COUNTY	N	Y	R	2	0	A	3	3	2
	. Are the MS4s contributing to this report involved in a regional/waters	hed v	vide	pl	ann		effo Ye:		0]	No
4b.	. Does the MS4 have a banking and credit system for stormwater mana	geme	nt p	rac	etic	es?				
						0	Ye	S	•	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 stormwat									
						О	Yes	5		No
4d	. How many stormwater management practices have been implemented	l as p	art	of t	his	sysi	tem	in	thi	s
	reporting period?								0	
5.	What percent of municipal officials/MS4 staff responsible for program						itte	nde	d	
	training on Low Impace Development (LID), Better Site Design (BSD) Infrastructure principles in this reporting period?	and	om	er (31 .6	E11			0	%

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

Name of MS4/Coalition BROOME COUNTY SPDES ID 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 measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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 is to maintain an inventory of 100% of the County's 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, and new practices will be added as constructed (none were added in the 2014-2015 reporting year).
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 • 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).
During the next reporting period activities to meet this gaol include adding any new measures to the inventory that may be constructed during each reporting year.

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

Name of MS4/Coalition BROOME COUNTY	SPDES ID 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 measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.								
A. Briefly summarize the Measurable Goal identified in the Sy	WMPP in this reporting period.							
MEASURABLE GOAL #5B is to inspect 100% of the County's Practices annually.	s Stormwater Management							
B. Briefly summarize the observations that indicated the overa	all effectiveness of this Measurable							
100% of the County's Stormwater Management Practices were in period. Closed system mapping within County-owned MS4 right.								
C. How many times was this observation measured or evaluat	ted in this reporting period? (ex.: samples/participants/event							
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								
Continue inspections as established and for any new measures adnext 3 reporting periods are to update and confirm 100% of the C mapping within MS4 boundaries and establish inspection criteria	ounty-owned closed system							

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

Name of MS4/Coalition BROOME COUNTY SPDES ID 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 measurable goals dentified in your Stormwater Management Program Plan (SWMPP), including requirements 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 is to maintain 100% of the County's 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 Stormwater Management Practices were maintained in accordance with the O&M guideleines during this reporting period.
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 • 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. Planned activities over the next 3 reporting periods are to update and confirm 100% of the County-owned closed system mapping within MS4 boundaries and establish inspection criteria for these systems.

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

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

SPDES ID

	<u>,</u>			SPDES ID	
Name of MS4/Coalitio	BROOME COUNTY			N Y R 2 0	A 3 3 2
6. Evaluating Pr	ogress Toward Me	asurable Goals M	CM 5		
identified in your S	port on your progres Stormwater Manage ditional pages as nee	ment Program Plar			
A. Briefly summa	arize the Measurab	ole Goal identified	in the SWMPF	in this reporting	period.
O&M of the Counappropriately trai	GOAL #5D is to haty's Stormwater Manned with respect to in ousekeeping measur	nnagement Practice inspections, record	s, as well as the	closed drainage sy	/stem,
B. Briefly summa Goal.	arize the observation	ons that indicated	the overall effe	ectiveness of this I	Measurable
	of this new goal is of training is being c			d as the good hou	sekeeping
C. How many tin	nes was this observ	vation measured o	r evaluated in t	his reporting per	iod?
D. Has your MS/	4 made progress to	ward this measur	able goal during		les/participants/ev period?
D. 1143 JUHI 1110-	made progress to	THE GETTING THE MINES	nor Bon anni		Yes O No
E. Is your MS4 o	on schedule to meet	t the deadline set f	orth in the SW		Yes O No
	arize the stormwat ting cycle (includin				
	staff is providing the				

Although existing staff is providing these functions currently, this new 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 is trained to follow the same (and correct) procedures. This is an ongoing process tied into the good housekeeping documents.

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

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

	if buointing the form to part of a John report on contain of a contained
Man	sPDES ID N Y R 2 0 A 0 4 7
เพลเเ	te of 191547 Coantion
	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? O Yes O No
1b	.Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook? O Yes NO NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. O 09/2004 O 03/2006 • NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes • No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No • NT
	If Yes, how many public comments were received during this reporting period?
5.	Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? • Yes • No

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

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, $\begin{bmatrix} 2 & 0 \end{bmatrix} 1 & 5$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

N. TIOGA COUNTY	SPDES ID N Y R 2 0 A 0 4 7							
Name of MS4/Coalition IIOGA COUNTY								
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? 	7							
How many Mis4s contributed to this report:	_1							
1. How many construction projects have been authorized for during this reporting period?	r disturbances of one acre or more							
2. How many construction projects disturbing at least one a during this reporting period?	cre were active in your jurisdiction							
3. What percent of active construction sites were inspected of	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 contribu	iting to this report use the NYS							
Construction Stormwater Inspection Manual?	○ Yes ○ No ● NT							
6. Does your MS4/Coalition provide public access to Storm (SWPPPs) of construction projects that are subject to MS	water Pollution Prevention Plans 54 review and approval? ○ Yes ○ No ● NT							
If your MS4 is Non-Traditional, are SWPPPs of construct public review?	etion projects made available for ● Yes ○ No							
If Yes, use the following page to identify location(s) where S	SWPPPs can be accessed.							

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix}$ 5 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		NY	R	2 0	A (4	7
6. con't.:							
Submit additional pages as needed.							
MS4/Coalition Office							
Department							
TIOGACOUNTY Planni	n g						
Address	, , , , , , , , , , , , , , , , , , , 					(1	-7
56 Main Street							
City OWEGO NY	Zip 7 1		2	7 -			1
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O Web Page URL(s): Please provide specific address where SWPP	Ps can be	access	ed -	not ho	me p	age.	
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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 5$

SI	PDES ID
Name of MS4/Coalition TIOGA COUNTY	N Y R 2 0 A 0 4 7
7. Evaluating Progress Toward Measurable Goals MCM 4	
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.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in	this reporting period.
B. Briefly summarize the observations that indicated the overall effective Goal.	veness of this Measurable
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 the	nis reporting period? ○ Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMI	
E. 18 your MIS4 on schedule to meet the deadline set for them the S WMI	○ Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goat the next reporting cycle (including an implementation schedule).	ls of this MCM during

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

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

SPDES ID

Name of MS4/Coalition	TIOGA COUNTY			N Y R	2 0 A 0 4 7
Minimum (Control Mea	sure 5. Post	-Constructio	n Stormwater N	<u> Management</u>
1. How many and w	fividual MS4 lition lany MS4s cont what type of pos	ributed to this a	report?		has your
MS4/Coalition in	nventoried, insp			-	
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	es				
O Filter Systems					
O Infiltration Basins					
O Open Channels					
O Ponds					
O Wetlands					
O Other					
2. Do you use an BMPs, inspecti			abase, spreads	heet) to track post	-construction O Yes O No
3. What types of Development/E		•		-	npact
O Building Codes	O Municipal C	Comprehensive F	lans		
O Overlay Districts	O Open Space	Preservation Preservation	ogram		
O Zoning	O Local Law o	or Ordinance			
O None	O Land Use R	egulation/Zoning	g		
Watershed Plans	O Other Comp	rehensive Plan			
O Other:					

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

	SFI	7E2 H	,				
Name of MS4/Coalition BROOME TIOGA STORMWATER COALITION	N	YF	2	0	A C	4	7
4a. Are the MS4s contributing to this report involved in a regional/wate	rshed v	vide p	lanı	_	effor Yes) No
4b. Does the MS4 have a banking and credit system for stormwater man	ageme	nt pra	ıetie	es?			
				Ο	Yes		No
4c. Do the SWMP Plans for each MS4 contributing to this report includ and approval of banking and credit of alternative siting of a stormwing and credit of alternative siting of a stormwing stormwing and credit of alternative siting of a stormwing stormwin				t pr		e?) No
4d. How many stormwater management practices have been implemented reporting period?	ed as pa	art of	this	sys	tem i	n th	is]
5. What percent of municipal officials/MS4 staff responsible for progratraining on Low Impace Development (LID), Better Site Design (BSI Infrastructure principles in this reporting period?					ittend	led] %

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

Name of MS4/Coalition TIOGA COUNTY	SPDES ID N Y R 2 0 A 0 4 7
, mile of the modern of the mo	
6. Evaluating Progress Toward Measurable Goals MCM 5	
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.	
A. Briefly summarize the Measurable Goal identified in the SWM	PP in this reporting period.
B. Briefly summarize the observations that indicated the overall e	ffectiveness of this Measurable
C. How many times was this observation measured or evaluated i	
D. Has your MS4 made progress toward this measurable goal dur	<pre>(ex.: samples/participants/events ring this reporting period?</pre>
2. 2. no jour 1. no program or more management of	O Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the S	WMPP? O Yes O No
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule	

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

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

SPDES ID

City of Binghamton

City of Binghamton

Name of MS4/Coalition City of Binghamton		N Y	R .	2 (0 A	3	4 1							
Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control														
The information in this section is being reported (check one):														
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	1													
1a. Has each MS4 contributing to this report adopted a law, o mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?	ordinance S SPDES	or ot Gene	her ral I	Peri	ulate mit f • Ye	or	○ No							
1b. Has each Town, City and/or Village contributing to this re equivalent to a NYSDEC Sample Local Law for Stormway Sediment Control through either an attorney certification	ter Mana	geme	nt aı	nd l	Eros	ion	v is and							
Analysis Workbook?			9 Y€		O N		ONT							

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

○ 09/2004 ○ 03/2006 ● NT

2. Does your MS4/Coalition have a SWPPP review procedure in place?

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

O No

Yes

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

 Yes O No O NT

 If Yes, how many public comments were received during this reporting period?
- 5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes ▶ No

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

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

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

			SPDE	S ID		
Nan	ne of MS4/Coalition City of Binghamton		И	7 R 2	0 A 3	4 1
	Minimum Control Measure 4. Construction Site	<u>Stormy</u>	<u>wate</u>	r Run	off Con	<u>trol</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				
1.	How many construction projects have been authorized for during this reporting period?	r disturba	ances	of one	acre or	more 3
2.	How many construction projects disturbing at least one a during this reporting period?	cre were	activ	e in ya	ur jurisd	liction 1
3.	What percent of active construction sites were inspected of	luring th	is rej	porting	period?	
4.	What percent of active construction sites were inspected r	nore tha	n onc	e?	1 0	O NT
5.	Do all inspectors working on behalf of the MS4s contribu Construction Stormwater Inspection Manual?	ting to th	nis re	port us ● Yes		'S O NT
6.	Does your MS4/Coalition provide public access to Stormy (SWPPPs) of construction projects that are subject to MS				/al?	ans O NT
	If your MS4 is Non-Traditional, are SWPPPs of construct public review?	tion proj	ects 1			
	If Yes, use the following page to identify location(s) where S	WPPPs c	an be	access	ed.	

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

				•		•		•							SPD	ES	ĺD					
Name of MS4/Co	alition	City of Bi	inghan	nton	_					_					N		R	2	0 1	A .	3 4	1
6. con't.:																						
Submit ad	ditiona	l page	s as	need	ed.																	
MS4/Coalitie		e																				
Departme E n g	T .	ее	r	in	g		DΕ	p	a	r	t	m e	e n	t						$\underline{\mathbb{I}}$	\perp	
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 5 \end{vmatrix}$

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 4	
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.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Continue SWPPP inventory. Continue review of all SWPPs. De for the public to access SWPPPs and comment on the content. R	<u> </u>
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
NYSDEC SWPPP review checklist is utilized for all SWPPP revieweloped SWPPP review practical. Development and Associate presented at public meetings.	
C. How many times was this observation measured or evalua	ted in this reporting period? (ex.: samples/participants/event.
D. Has your MS4 made progress toward this measurable goa	l during this reporting period? ● 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 the next reporting cycle (including an implementation scho	eet the goals of this MCM during
SWPPP review and database documentation will continue. deve presented at public meetings. inspections of all active projects for Pre-development meetings are held to meet with developers to dispersion of the projects of the project of t	or SWPPP compliance will continue.

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

Name of MS4/Coalition	City of Binghamton			SPDES III N Y R	
Minimum (Control Meas	sure 5. Post-	-Constructio	on Stormwater	<u>Management</u>
The information in thi On behalf of an ind	ividual MS4	g reported (chec	k one):		
On behalf of a coal How ma	ition any MS4s conti	ibuted to this r	report?	1	
How many and v MS4/Coalition in	vhat type of pos wentoried, inspe	t-construction ected and main	stormwater ma tained in this r	nagement practices eporting period?	s has your
		# Inventoried	# Inspections	# Times Maintained	
Alternative Practice	es	5	3	3	
O Filter Systems					
O Infiltration Basins					
Open Channels					
O Ponds					
O Wetlands					
O Other					
2. Do you use an e BMPs, inspection			ıbase, spreads	heet) to track pos	t-construction ● Yes ○ No
3. What types of a Development/B					mpact
Building Codes	• Municipal Co	omprehensive P	lans		
Overlay Districts	O Open Space	Preservation Pro	ogram		
● Zoning	• Local Law of	r Ordinance			
O None	● Land Use Re	egulation/Zoning	3		
O Watershed Plans	Other Comp	rehensive Plan			
Other:					

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

		SPDES ID											
Nan	ne of MS4/Coalition City of Binghamton	N	Y	R	2	0	Α	3	4	1			
					I								
4a.	Are the MS4s contributing to this report involved in a regional/watershe	ed w	ide	pl	ann								
						•	Ye	S	О	No			
4b.	Does the MS4 have a banking and credit system for stormwater manage	mei	nt p	rac	tice	es?							
						О	Ye	S		No			
4c.	Do the SWMP Plans for each MS4 contributing to this report include a jand approval of banking and credit of alternative siting of a stormwater								•				
				-			Yes			No			
4d.	How many stormwater management practices have been implemented a	s pa	ırt (of t	his	sys	tem	in	thi	s			
	reporting period?								1				
5.	What percent of municipal officials/MS4 staff responsible for program i training on Low Impace Development (LID), Better Site Design (BSD) as	_					ıtteı	nde	d				
	Infrastructure principles in this reporting period?			•			Т	8	0	%			

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

Name of MS4/Coalition City of Binghamton	SPDES ID N Y R 2 0 A 3 4 1
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 (SWMF III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Train inspection / enforcement personnel on post construction rur procedures. Perform inspections to ensure conformance with spe inventory of post construction storm-water practices.	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
SWPPP inventory is used to track post construction stormwater p construction stormwater practices has been created. provide train	
C. How many times was this observation measured or evaluat	ted in this reporting period?
·	1
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/event during 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 me the next reporting cycle (including an implementation sche	
train inspection personnel. perform inspections when appropriate projects and post construction storm-water practices. Continue to for inspection, maintenance, and tracking of activities related to p	develop and implement procedures

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

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

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

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 5

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

Nan	ne of MS4/Coalition Town of Binghamton SPDES ID N Y R 2	0	A	0	0	9
	Minimum Control Measure 4. Construction Site Stormwater Run	<u>of</u> f	<u> C</u>	<u>ont</u>	tro	<u>1</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?					
	How many construction projects have been authorized for disturbances of one during this reporting period?	ac	re c	or n	101	e 0
	How many construction projects disturbing at least one acre were active in you during this reporting period?	ur.	juri	sdi	ctio	on O
3.	What percent of active construction sites were inspected during this reporting	pe	rio	1?	• 1	
4.	What percent of active construction sites were inspected more than once?				• 1	% nt %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual?		ie N		 О	
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preve (SWPPPs) of construction projects that are subject to MS4 review and approv	al?	•			
	• Yes If your MS4 is Non-Traditional, are SWPPPs of construction projects made as public review?	ail	⊃ N labl Ye	e fo		NT No

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

Name of MS4/Coalition Town of Binghamton 6. con't.: Submit additional pages as needed. ■ MS4/Coalition Office Department Town of Binghamton NYR20 A Address 279 Park Avenue	
Submit additional pages as needed. MS4/Coalition Office Department TownofBinghamton Address	
● MS4/Coalition Office Department TownofBinghamton Address	
Town of Binghamton Address	
Town of Binghamton Address	
Address	
	T
City	
B i n g h a m t o n N Y 1 3 9 0 3 -	
Phone (6 0 7) 7 7 2 - 0 3 5 7	
O Library	
Address	
City Zip	
City Zip - [
Phone	
() - - - - - - - -	
O Other	
Address	
City	
City Zip - [
Phone	
O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home	ie page.
URL	
URL	
	1 1

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

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

SPDES ID

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

II addimin	ig tins totti to þi	ar or a joint rope	,,, on outline of t						
Name of MS4/Coalition	Town of Binghamton	<u> </u>		SPDES ID N Y R	7 1 1 1 1 1				
Minimum (Minimum Control Measure 5. Post-Construction Stormwater Management								
On behalf of an inc	The information in this section is being reported (check one): On behalf of an individual MS4								
On behalf of a coal		ributed to this r	report?	1					
	•		орогет [-				
1. How many and w MS4/Coalition in	what type of pos eventoried, insp	st-construction : pected and main	stormwater ma tained in this r	magement practice eporting period?	s has your				
		# Inventoried	# Inspections	# Times Maintained					
O Alternative Practic	es	0	0	0					
O Filter Systems		0	0	0					
O Infiltration Basins		0	0	0					
O Open Channels		0	0	0					
O Ponds		0	0	0					
O Wetlands		0	0	0					
O Other		0	0	0					
2. Do you use an BMPs, inspecti	electronic tool ons and maint	(e.g. GIS, data tanance?	abase, spreads	heet) to track pos	t-construction ○ Yes • No				
3. What types of Development/F	non-structural Better Site Des	l practices have ign/Green Infr	e been used to astructure pri	implement Low ! inciples?	Impact				
 Building Codes 	• Municipal C	Comprehensive P	lans						
Overlay Districts	O Open Space	Preservation Pre	ogram						
● Zoning	• Local Law	or Ordinance							
O None	Land Use R	tegulation/Zoning	3						
O Watershed Plans	O Other Comp	orehensive Plan							
O Others									

			OLI	<i>,</i> , , , , , , , , , , , , , , , , , ,	,				
Nan	ne of MS4/Coalition Town of Binghamton]	N	YF	2 2	0 A	0	0	9
4a.	Are the MS4s contributing to this report involved in a regional	l/watershe	ed v	vide p	lanr				\ I _
4b.	Does the MS4 have a banking and credit system for stormwate	er manage	me	nt pra	etic		'es	O,	ИO
						▼ Y	es	0]	Vo
4c,	Do the SWMP Plans for each MS4 contributing to this report is and approval of banking and credit of alternative siting of a st					t prac		?	۷o
4d.	How many stormwater management practices have been implereporting period?	emented a	s p	art of	'this	syste	nı in	this	ł
5.	What percent of municipal officials/MS4 staff responsible for paraining on Low Impace Development (LID), Better Site Desig Infrastructure principles in this reporting period?						tend		%

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

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

SPDES ID ______

Name of MS4/Coalition Town of Binghamton N Y	R 2 0 A 0 0 9
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achieving meast identified in your Stormwater Management Program Plan (SWMPP), including re III.C.1. Submit additional pages as needed.	urable goals equirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
Continue to utilize stormwater ordinance. Perform inspections on qualifying project sites.	
B. Briefly summarize the observations that indicated the overall effectivenes	s of this Measurable
Stormwater ordinance allows enforcement. Inspections ensure compliance with regulations.	
C. How many times was this observation measured or evaluated in this repo	rting period? O (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this re	
D. Has your Most made progress toward this members game was my	● 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 the next reporting cycle (including an implementation schedule).	
Continue to improve review and inspection procedures.	

	SPDES	ID .				
Name of MS4/Coalition Town of Chencugo	N Y	R 2	o į	A 1	2	7

	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 regulator 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 latequivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosio Sediment Control through either an attorney cerfification or using the NYSDEC Gap	n and
	Analysis Workbook? • Yes • No	O NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. O 09/2004 O 03/2006	O N T
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No	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 loc SWPPP process? • Yes	

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

	SPDES ID							
Name of MS4/Coalition Town of Chenengo	N Y R 2 0 A 1 2 7							
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 disturbances of one acre or more during this reporting period?								
2. How many construction projects disturbing at least one acre we during this reporting period?	vere active in your jurisdiction							
3. What percent of active construction sites were inspected during	ig this reporting period? \bigcirc NT $\boxed{1 \ 0 \ 0}$ %							
4. What percent of active construction sites were inspected more	than once? O NT 1 0 0 %							
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 Stormwater (SWPPPs) of construction projects that are subject to MS4 re-								
If your MS4 is Non-Traditional, are SWPPPs of construction public review?	projects made available for O Yes O No							
If Yes, use the following page to identify location(s) where SWPF	Ps can be accessed.							

	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	
Building Ordinance an	d Planning
Address	
	7:-
City B i n g h a m t o n N Y	Zip 1 3 9 0 1 -
Phone	
(6 0 7) 6 4 8 - 4 8 0 9	
O Library	
Address	
City	Zip
	-
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	, , , , , , , , , , , , , , , , , , ,
URL	, , , , , , , , , , , , , , , , , , ,

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

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

T	PDES ID N Y R 2 0 A 1 2 7
Name of MS4/Coalition Town of Chenengo	. - - - - - -
7. Evaluating Progress Toward Measurable Goals MCM 4	
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.
Continue to to develop and implement spreadsheet checklist of projects revenforcement actions.	iewed, inspected, and/or
B. Briefly summarize the observations that indicated the overall effecti	iveness of this Measurable
Inspections ongoing and reviews are conducted and logged. Staff are trained	ed.
G TY (1) and the share the second or evaluated in this	reporting pariod?
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 t	(ex.: samples/participants/eve his reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWM	PP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the got the next reporting cycle (including an implementation schedule).	
Continue training staff on permit updates: continue to review, inspect, and	document.

O Other:

MS4 Annual Report Form

II Submittin	ig this form as pa	iri oi a joini repi	ort on benan of a	SPDES ID	is in blank,
Name of MS4/Coalition	Town of Chenengo			N Y R 2	2 0 A 1 2 7
Minimum (Control Mea	sure <u>5. Post</u>	-Constructio	n Stormwater M	<u>lanagement</u>
The information in thi	is section is bein	g reported (chec	k one):		
On behalf of an indOn behalf of a coalHow m		ributed to this 1	eport?		
1. How many and w MS4/Coalition in				nagement practices leporting period?	nas your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
O Filter Systems					
O Infiltration Basins					
Open Channels		1		1	
Ponds		2	2	1	
O Wetlands					
O Other					
2. Do you use an o			abase, spreads	heet) to track post-	construction ○ Yes ● No
3. What types of a Development/B	non-structural Better Site Desi	practices hav gn/Green Infr	e been used to astructure pri	implement Low In nciples?	ipact
● Building Codes	• Municipal C	Comprehensive P	lans		
O Overlay Districts	O Open Space	Preservation Preservation	ogram		
O Zoning	O Local Law o	or Ordinance			
O None	O Land Use R	egulation/Zoning	g		
O Watershed Plans	O Other Comp	rehensive Plan			

Name of MS4/Coalition Town of Chenengo	SPDES ID N Y R 2 0 A 1 2 7
4a. Are the MS4s contributing to this report involved in a regional/w	atershed wide planning effort? ○ Yes ● No
4b. Does the MS4 have a banking and credit system for stormwater r	nanagement practices? ○ 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 story	lude a protocol for evaluation nwater management practice? • Yes • No
4d. How many stormwater management practices have been implem reporting period?	ented as part of this system in this
5. What percent of municipal officials/MS4 staff responsible for protraining on Low Impace Development (LID), Better Site Design (Infrastructure principles in this reporting period?	ogram implementation attended BSD) and other Green

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

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

SPDES ID

Name of MS4/Coalition	Town of Chenengo		N Y R 2 0 A 1 2	7
6. Evaluating Prog	gress Toward Measurable Goals	MCM 5		
identified in your Sto	ort on your progress and project pla ormwater Management Program Pl tional pages as needed.	ns toward achieving an (SWMPP), includ	; measurable goals ding requirements in Pa	ırt
A. Briefly summar	ize the Measurable Goal identific	ed in the SWMPP in	n this reporting period	d
Staff continued to t	rain and improve inspection and m	aintenance skills.		
B. Briefly summar Goal.	rize the observations that indicate	ed the overall effect	iveness of this Measur	rable
Limited or no proble	ems annually.			
C. How many time	es was this observation measured	or evaluated in thi	s reporting period?	
				1
D. Has vour MS4 r	made progress toward this measu	ırable goal during (ex.: samples/partithis renorting period?	_
D. Has your Movie	made progress toward this meast	inabio goai auring (O No
E. Is your MS4 on	schedule to meet the deadline se	t forth in the SWM		O No
	rize the stormwater activities planing cycle (including an implement		als of this MCM duri	ng
Continue to train en	mployees. Develop GIS and/or spre	adsheet to track mai	ntenance, practices, etc	;.

	S	PDE	22 IT)					
Name of MS4/Coalition Town of Conklin	Į į	1 7	Z 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?	O No
1b.	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?	w is and O NT
	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 loc SWPPP process? • Yes	al O No

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

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	#	O No Authority
O Administrative Orders	#	● No Authority
O Enforcement Actions or Sanctions	#	
O Other	#	No Authority

Name of MS4/Coalition Town of Conklin	DES ID Y R 2 0 A 2 5 5
Minimum Control Measure 4. Construction Site Stormway	ter 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 disturbance during this reporting period?	ces of one acre or more
2. How many construction projects disturbing at least one acre were ac during this reporting period?	tive in your jurisdiction
3. What percent of active construction sites were inspected during this	reporting period? ONT
4. What percent of active construction sites were inspected more than o	once? ONT
5. Do all inspectors working on behalf of the MS4s contributing to this Construction Stormwater Inspection Manual?	report use the NYS ● Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Stormwater Pollut (SWPPPs) of construction projects that are subject to MS4 review and	tion Prevention Plans and approval? • Yes O No O NT
If your MS4 is Non-Traditional, are SWPPPs of construction project public review?	ts 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 Conklin	N Y R 2 0 A 2 5 5
6. con't.:	
Submit additional pages as needed.	
● MS4/Coalition Office	
Department	, , , , , , , , , , , , , , , , , , ,
T o w n H a 1 1 1	
Address	
1271 Conklin Road	
City	Zip
$C \circ n k \mid 1 \mid i \mid n \mid \mid \mid \mid N \mid Y \mid$	1 3 7 4 8 -
Phone	
(6 0 7) 7 7 5 - 3 4 5 6	
O Library	
Address	
	<u> </u>
City	Zip
	1
Phone	
O Other	
Address	
	Zip
City	
Phone	
(
O Web Page URL(s): Please provide specific address where SWPPPs can	be accessed - not home page.
URL	
	 <u> </u>
URL	
	<u> </u>

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

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

Name of MS4/Coalition	Town of Conklin			N Y R 2 0	A 2	5 5
7. Evaluating Prop	gress Toward Meas	urable Goals MC	M 4			
identified in your St	ort on your progress ormwater Manageme tional pages as neede	ent Program Plan (toward achieving (SWMPP), inclu	g measurable g iding requireme	oals ents in P	art
A. Briefly summar	ize the Measurable	Goal identified i	n the SWMPP i	in this reporti	ng perio	od.
Measurable goal is the number and am	to inventory the num ount of times constru	aber of SWPPP's raction projects are	eceived and revi inspected.	ewed. Also to	docume	ent
B. Briefly summar Goal.	rize the observation	s that indicated t	he overall effec	tiveness of thi	s Measu	ırable
All construction pro	ojects with disturbandion projects were ins	ces of one or more spected multiple ti	e acres had an ap mes during this	pproved SWPP reporting perio	P in plac od.	ce.
C. How many time	es was this observat	ion measured or	evaluated in th			1 ticipants/events
D. Has your MS4	made progress towa	ard this measura	ble goal during		g period	
E. Is your MS4 or	schedule to meet th	he deadline set fo	rth in the SWM	ЛРР?	● Yes	O No
F. Briefly summa the next report	rize the stormwater ing cycle (including	activities planne an implementat	ed to meet the go ion schedule).	oals of this Mo	CM dur	ring
Continue to verify in place and inspec	that all construction t every active constr	projects disturbing uction project at le	g I or more acre east once a week	s have an approx during constr	oved SW uction.	/PPP

Other:

MS4 Annual Report Form

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

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

Name of MIS4/Coantion	s section is being			SPDES ID N Y R 2 n Stormwater M	
	any MS4s contr		-		as vous
1. How many and v MS4/Coalition in	what type of pos eventoried, insp	t-construction : ected and main	stormwater ma tained in this r	nagement practices h eporting period?	as your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
● Filter Systems		1	1	0	
Infiltration Basins		1	1	0	
Open Channels		1			
Ponds		3	3		
O Wetlands					
O Other					
2. Do you use an o BMPs, inspecti			abase, spreads	heet) to track post-c	onstruction ● Yes ○ No
3. What types of a Development/B	non-structural Better Site Desi	practices hav gn/Green Infr	e been used to astructure pr	implement Low Im inciples?	pact
O Building Codes	• Municipal C	omprehensive P	lans		
O Overlay Districts	O Open Space	Preservation Pro	ogram		
O Zoning	O Local Law o	r Ordinance			
O None	O Land Use R	egulation/Zonin	g		
O Watershed Plans	O Other Comp	rehensive Plan			

B o a r d

i|n|g

|R|e|c|o|m|m|e|n|d|a|t|i|o|n

SPDES ID	2 0 A 2 5 5
Name of MS4/Coalition Town of Conklin N Y R	2 0 A 2 5 5
4a. Are the MS4s contributing to this report involved in a regional/watershed wide pl	anning effort? ● Yes ○ No
4b. Does the MS4 have a banking and credit system for stormwater management practice.	- 100
	O Yes No
4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol fe and approval of banking and credit of alternative siting of a stormwater management.	
and approvat of danking and credit of afternative string of a stormwater managen	O Yes ● No
	0 100 0 110
4d. How many stormwater management practices have been implemented as part of	100
4d. How many stormwater management practices have been implemented as part of reporting period?	100
·	this system in this 0 tation attended

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

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		NYR2	0 A 2 5 5
6. Evaluating Prog	ress Toward Measurabl	le Goals MCM 5		
identified in your Sto	ort on your progress and pormwater Management Prional pages as needed.			
A. Briefly summari	ize the Measurable Goal	identified in the S	WMPP in this report	ting period.
Measurable goal is to that the owner has co	to document the number of onducted and documented	of post construction d maintenance of the	BMP's inspected. Als e post construction BM	o to verify fP's.
B. Briefly summari Goal.	ize the observations that	indicated the over	all effectiveuess of th	is Measurable
	ruction BMP's were in pla age or migration of Silt/S	_		ll events and
C. How many times	s was this observation m	neasured or evalua	ted in this reporting	period?
			(ex.: s	amples/participants/events
D. Has your MS4 n	nade progress toward th	is measurable goa	l during this reportin	g period? ● Yes ○ No
E. Is your MS4 on	schedule to meet the dea	adline set forth in t	he SWMPP?	• Yes O No
	ize the stormwater activ ng cycle (including an in	_		
	post construction BMP's est and file annual mainter			

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

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

		SPI	DES	ID:						
Name of MS4/Coalition TOWN OF DICKINSON]	N	Y	R	2	0	A	1	4	3
Tradic of 1410 to Countries	_			_						

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

	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 reg 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 that 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 C Gap	v is and O NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La	aw. 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) ha reviewed in this reporting period?	ve been	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of prominents related to construction SWPPPs? • Yes	ublic O No	O NT
	If Yes, how many public comments were received during this reporting period?	L	0
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	t the loca Yes	al O No

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

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	#	
O Other	#	O No Authority

	DES ID
Name of MS4/Coalition TOWN OF DICKINSON	Y R 2 0 A 1 4 3
Minimum Control Measure 4. Construction Site Stormwat	er 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 disturbance during this reporting period?	es of one acre or more
2. How many construction projects disturbing at least one acre were act during this reporting period?	ive in your jurisdiction
3. What percent of active construction sites were inspected during this r	reporting period? • NT
4. What percent of active construction sites were inspected more than or	nce? ● NT
5. Do all inspectors working on behalf of the MS4s contributing to this a Construction Stormwater Inspection Manual?	report use the NYS ● Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Stormwater Pollut (SWPPs) of construction projects that are subject to MS4 review an	ion Prevention Plans d approval? ● Yes ○ No ○ NT
If your MS4 is Non-Traditional, are SWPPPs of construction projects public review?	s made available for O Yes O No
If Vescuse the following page to identify location(s) where SWPPPs can	be accessed.

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	, , , , , , , , , , , , , , , , , , ,
TOWNHALL	
Address	,
5 3 1 OLD FRONT STREET	
City	
DICKINSON NY 13	9 0 5 -
Phone (6 0 7) 7 2 3 - 5 9 5 4	
O Library	
Address	
City Zip	
	<u> </u>
Phone	
(_ _) _ _ _ _ _	
O Other	
Address	
	<u> </u>
City	
	<u> </u>
Phone	
()	
O Web Page URL(s): Please provide specific address where SWPPPs can be acc	essed - not home page.
URL	
URL	

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

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

Name of MS4/Coalition TOWN OF DICKINSON SPDES ID 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 PROJECTS. 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.
NA
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 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).
REVIEW ANY SWPPP'S AND MAKE AVAILABLE FOR PUBLIC COMMENT PLACE ACTIVITY ON WEB SITE WHENE OPERATIONAL

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

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

				SPDES ID	
Name of MS4/Coalition	TOWN OF DICKINS	ON		NYR20A	1 4 3
<u>Minimum (</u>	Control Mea	sure 5. Post-	-Constructio	on Stormwater Managen	<u>nent</u>
The information in thi	is section is bein	g reported (chec	k one):		
On behalf of an indOn behalf of a coalHow ma		ributed to this t	report?		
1. How many and w MS4/Coalition in	what type of pos wentoried, insp	st-construction ected and main	stormwater ma tained in this r	nagement practices has your eporting period?	
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
O Filter Systems					
O Infiltration Basins					
O Open Channels					
O Ponds					
O Wetlands					
O Other					
2. Do you use an o BMPs, inspecti			abase, spreads	heet) to track post-construc • Ye	
3. What types of a Development/E	non-structural Better Site Desi	practices hav gn/Green Infi	e been used to astructure pr	implement Low Impact inciples?	
O Building Codes	Municipal C	Comprehensive F	lans		
O Overlay Districts	O Open Space	Preservation Pr	ograin		
O Zoning	O Local Law o	or Ordinance			
O None	O Land Use R	egulation/Zonin	g		
O Watershed Plans	O Other Comp	orehensive Plan			
Other:					

B o a r d

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|R|e|c|o|m|m|e|n|d|a|t|i|o|n

Name of MS4/Coalition TOWN OF DICKINSON N	ES ID Y R 2 0 A 1 4 3
4a. Are the MS4s contributing to this report involved in a regional/watershed w	ride planning effort? ● Yes ○ No
4b. Does the MS4 have a banking and credit system for stormwater management	nt practices? • Yes • No
4c. Do the SWMP Plans for each MS4 contributing to this report include a protand approval of banking and credit of alternative siting of a stormwater ma	tocol for evaluation magement practice? O Yes • No
4d. How many stormwater management practices have been implemented as pare- reporting period?	ort of this system in this
5. What percent of municipal officials/MS4 staff responsible for program imp training on Low Impace Development (LID), Better Site Design (BSD) and Infrastructure principles in this reporting period?	lementation attended other Green

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

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

SPDES ID

Name of MS4/Coalition TOWN	OF DICKINSON		N Y R 2 0 A 1	4 3
6. Evaluating Progress	Toward Measurable Goals	MCM 5		
	your progress and project pl vater Management Program I pages as needed.			Part
A. Briefly summarize tl	ne Measurable Goal identif	ied in the SWM	PP in this reporting per	riod.
Measurable goal is to do that the owner has condu	cument the number of post content and documented mainte	onstruction BNP'	's inspected. Also to ver construction BMP'S.	ify
B. Briefly summarize tl Goal.	ne observations that indicat	ted the overall ef	fectiveness of this Meas	surable
NA				į.
C. How many times wa	s this observation measure	d or evaluated in	this reporting period?	
			(ov. 1. camples/ea	0 rticipants/events)
D. Has your MS4 made	progress toward this meas	urable goal dur		d?
E. Is your MS4 on sche	dule to meet the deadline s	et forth in the S		O No
	he stormwater activities pla ycle (including an implemen		e goals of this MCM du	
YEAR Continue to inspect post	AT THERE WILL BE ANY construction BMP's and hole annual maintenance re	d owner's /operate	ors accountable to mainta	ļ

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

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

Name of MS4/Coalition Village of Endicott	SPDES ID N Y R 2 0 A 1 4 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. Has each MS4 contributing to this report adopted a law, of mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?	ordinance or other regulatory S SPDES General Permit for Yes O No						
1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap							
Analysis Workbook?	● 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 procedur	re in place? ● Yes ○ No						
3. How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	n Plans (SWPPPs) have been						
4. Does your MS4/Coalition have a mechanism for receipt an comments related to construction SWPPPs?	nd consideration of public ● Yes ○ No ○ NT						
If Yes, how many public comments were received during this	reporting period?						
5. Does your MS4/Coalition provide education and training SWPPP process?	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:

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	#		O No Authority

Nan	me of MS4/Coalition Village of Endicott SPDES ID N Y R 2 C	A1	4 9
	Minimum Control Measure 4. Construction Site Stormwater Runof	f Cont	<u>trol</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 adduring this reporting period?	cre or n	nore
2.	How many construction projects disturbing at least one acre were active in your during this reporting period?	jurisd	ction 0
3.	What percent of active construction sites were inspected during this reporting p	eriod?	0 NT
4.	What percent of active construction sites were inspected more than once?		0 NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use to Construction Stormwater Inspection Manual? • Yes		S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevent (SWPPPs) of construction projects that are subject to MS4 review and approval • Yes	tion Pla ? O No	ins O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made ava public review?	ilable fe ● Yes	or O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	•	

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

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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Name of MS4/Coalition Village of Endicott	l I	1 X	R 2	0 A	1	4 9
6. con't.:						
Submit additional pages as needed.						
Subjint additional pages as needed.						
O MS4/Coalition Office						
Department	- 	 -		1 1	- 1	$\overline{}$
	e n t					
Address 1009 East Main Stre	e t				TT	
City	Zip					
Endicott NY	7 1 7	3 7	6 0]-[
Phone						
(607)757-2425						
O Library						
Address				1 1		
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Phone						
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O Other						
Address			····			
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City	Zip					
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Phone						
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O Web Page URL(s): Please provide specific address where SWPPF	es can be ac	cesse	d - no	home	page).
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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 5

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

		SPDES ID	
Name of MS4/Coalition Village of Endicott	,	N Y R 2 0	A 1 4 9
7. Evaluating Progress Toward Measurable (Goals MCM 4		
Use this page to report on your progress and projidentified in your Stormwater Management Prog III.C.1. Submit additional pages as needed.	ect plans toward ram Plan (SWMF	achieving measurable gos PP), including requiremen	ds ts in Part
A. Briefly summarize the Measurable Goal id	lentified in the S	WMPP in this reporting	period.
The New Developer for Skye View Heights had of Parks, Recreation and Historic Preservation. planned project will have No Impact on cultural National Register of Historic Places. The Development	The letter dated C resources listed (otober 22, 2014 stated the Or eligible for listing on th	at the he State or
B. Briefly summarize the observations that in Goal.	idicated the over	all effectiveness of this l	Measurable
The Developer has submitted all necessary pape	rwork.		
C. How many times was this observation mea	sured or evalua	L	iod? 2 es/participants/event
D. Has your MS4 made progress toward this	measurable goal	during this reporting p	eriod? Yes O No
E. Is your MS4 on schedule to meet the deadl	line set forth in t	he SWMPP?	Yes O No
F. Briefly summarize the stormwater activities the next reporting cycle (including an impl	es planned to me lementation scho	eet the goals of this MCN edule).	A during
Inspections will take place once construction be	gins on Skye Vie	ew Heights.	

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

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

Name of MS4/Coalition	Village of Endicott			SPDES ID N Y R 2	0 A 1 4 9					
<u>Minimum</u>	Control Mes	asure 5. Post	-Constructio	on Stormwater Ma	nagement					
The information in th	is section is bei	ng reported (che	ck one):							
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 										
 How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period? 										
		# Inventori e d	# Inspections	# Times Maintained						
O Alternative Practic	es		0							
Filter Systems			1							
• Infiltration Basins			100							
O Open Channels			0							
O Ponds			0							
O Wetlands			0							
O Other										
2. Do you use an BMPs, inspecti			abase, spreads	heet) to track post-co	nstruction ○ Yes • No					
3. What types of Development/E				implement Low Imp nciples?	net					
O Building Codes	O Municipal C	Comprehensive P	Plans							
O Overlay Districts	O Open Space	Preservation Pro	ogram							
Zoning	Local Law o	or Ordinance								
O None	● Land Use R	tegulation/Zoning	g							
O Watershed Plans	O Other Comp	orehensive Plan								
O Other:										

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

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

_ ~	Village of Endicott	· · · · · · · · · · · · · · · · · · ·		SPDE:	7 7	0 A	1	4	9
Nan	me of MS4/Coalition Village of Endeou	<u>-</u>		<u> </u>	<u>.l </u>		1 -		_
4a.	. Are the MS4s contributing to this	report involved in a	regional/wa	atershed wid	e plann	ing ef	fort	?	
	·					ΟY			Ю
4b.	. Does the MS4 have a banking and	credit system for sto	rmwater n	nanagement	practic	es?			
	•	·				OY	es	• 1	Ф
4c.	Do the SWMP Plans for each MS4 and approval of banking and credi	contributing to this t of alternative sitin	report incl g of a storn	lude a protoc nwater mans	ol for e gemen	valua t prac	tice	?	Jn
4d,	. How many stormwater manageme	nt practices have be	en impleme	ented as part	of this	-	•		
	reporting period?							1	
5.	What percent of municipal official training on Low Impace Developm	s/MS4 staff responsi ent (LID), Better Si	ble for pro te Design (1	gram impler BSD) and oth	nentatio ier Gre	on att en	end	ed	
	Infrastructure principles in this re						1	0	%

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

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

Name of MSA/Condition Village of Endicott	SPDES ID NYR20A149
Name of MS4/Coalition Village of Endicott	
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 (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.
The NYS DEC needed the Village of Endicott's help in cleaning of goes under the Flood Wall. 4 Village of Endicott Departments partners the pipe was cleaned so that it could be video inspected and the The Village of Endicott has 2 buyouts from the 2011 flood that no	rticipated in the 5 day procedure. results sent to Army Corp.
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
The Storm Water that travels through the River Terrace Pumping discharged into the river. The garbage was removed by a VAC Travels through the River Terrace Pumping	Station is filtered before its ruck.
C. How many times was this observation measured or evaluat	ted in this reporting period?
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	ne Swindr? ● 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).
Once Construction begins at Skye View Heights, Inspections will the project is completed.	take place on a regular basis until

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

N Y R 2 0 A Name of MS4/Coalition Town of Fenton

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?		
	Has each MS4 contributing to this report adopted a law, ordinance or other reg mechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?	gulatory mit for • Yes	O No
	.Has each Town, City and/or Village contributing to this report documented tha equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSDE	Erosion C Gap	and
	Analysis Workbook? • Yes	O No	ONT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La O 09/2004 O 0	aw. 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 reviewed in this reporting period?	ve bcen	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	al O No

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

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 5

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

	SPDES ID
Name of MS4/Coalition Town of Fenton	N Y R 2 0 A 0 7 8
Minimum Control Measure 4. Construction Site	e 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 during this reporting period?	or disturbances of one acre or more
2. How many construction projects disturbing at least one during this reporting period?	acre were active in your jurisdiction
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 iuspectors working on behalf of the MS4s contrib Construction Stormwater Inspection Manual?	uting to this report use the NYS • Yes O No O NT
6. Does your MS4/Coalition provide public access to Storm (SWPPPs) of construction projects that are subject to M	nwater Pollution Prevention Plans IS4 review and approval? • Yes O No O NT
If your MS4 is Non-Traditional, are SWPPPs of construpublic review?	ction projects made available for 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, $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix}$ 5 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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Name of	fMS	34/C	oal	itio	n To	own (of Fe	nton														L	N	Y	R	2	0	A	0	7	8
6. co	n't.	:																													
	bm		ddi	itio	nal	pa	ges	as	nee	de	d.																				
• MS4	I/Co	alit	ion	O	ffic	е																									
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This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Name of MS4/Coalition Town of Fenton	N Y R 2 0 A 0 7 8
7. Evaluatiug 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.
The Town is prepared to provide Owners/Designers/Developers within the MS4. A Site Plan Review process is in place.	the requirements for construction
B. Briefly summarize the observations that indicated the ove	erall effectiveness of this Measurable
No projects to date have impacted and acre or more. The Town application is received.	is prepared for one when an
C. How many times was this observation measured or evalu	ated in this reporting period? (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable go	al during this reporting period?
E. Is your MS4 on schedule to meet the deadline set forth in	● Yes ○ No the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to not the next reporting cycle (including an implementation set	neet the goals of this MCM during hedule).
Address the MS4 needs of a project triggering the MS4 criteria requirements and assuring that they are properly managed and l	that is proposed by implementing the handled.

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

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

SPDES ID

Name of MS4/Coalition	Town of Fenton			NY	R 2 0 A 0	7 8
<u>Minimum (</u>	Control Meas	sure 5. Post	-Constructio	n Stormwater	Managemer	<u>1t</u>
The information in thi	s section is being	g reported (chec	ck one):			
On behalf of an indOn behalf of a coaliHow ma		ributed to this i	report?			
1. How many and w MS4/Coalition in					es has your	
		# Inventoried	#	# Times Maintained		
O Alternative Practice	ès	Inventoried	Inspections	Maintained		
O Filter Systems						
O Infiltration Basins						
O Open Channels						
O Ponds						
O Wetlands						
O Other						
2. Do you use an e BMPs, inspection			abase, spreads	heet) to track po	st-construction O Yes	n ● No
3. What types of a Development/B					Impact	
O Building Codes	• Municipal C	omprehensive F	lans			
O Overlay Districts	Open Space	Preservation Pr	ogram			
Zoning	• Local Law o	r Ordinance				
O None	Land Use Re	egulation/Zonin	g			
O Watershed Plans	• Other Comp	rehensive Plan				
O Other:						

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

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

Name of	MS4/Coalition Town of Fenton	SPDES ID N Y R 2	0 A 0	7 8
4a. Are	the MS4s contributing to this report involved in a regional/v	vatershed wide planı	ning effort O Yes	t? ● No
4b. Doe	s the MS4 have a bankiug and credit system for stormwater	management practic	es? O Yes	• No
4c. Do and	the SWMP Plans for each MS4 contributing to this report inc approval of banking and credit of alternative siting of a stor	clude a protocol for or mwater managemen	it practice	n e? ● No
	w many stormwater management practices have been implen orting period?	nented as part of this	system in	this
trai	at percent of municipal officials/MS4 staff responsible for puning on Low Impace Development (LID), Better Site Design rastructure principles in this reporting period?	rogram implementat (BSD) and other Gr	ion attend	led 0 %

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

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

Name of MS4/Coalition Town of Fenton	N Y R 2 0 A 0 7 8
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achievin identified in your Stormwater Management Program Plan (SWMPP), inclu III.C.1. Submit additional pages as needed.	g measurable goals Iding requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP	in this reporting period.
No activity occurred. No projects have been completed requiring Post Completed Requiring Post Co	nstruction effort.
B. Briefly summarize the observations that indicated the overall effections.	tiveness of this Measurable
None to date	
C. How many times was this observation measured or evaluated in th	uic reporting period?
C. How many times was this observation measured or evaluated in the	
	(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 SWM	
E. 13 your MIST on Schedule to Meet the delidance set to the 200 and	• Yes O No
F. Briefly summarize the stormwater activities planned to meet the g the next reporting cycle (including an implementation schedule).	oals of this MCM during
Inspect and approve or correct any post construction activity on projects Nothing is currently under construction.	that may be completed.

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

	SP:	DES	3 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	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 regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?	O No
	.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?	is and 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?	1
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	l 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	#		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 5

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

Name of MS4/Coalition	Village of Johnson City		N Y R 2) A 1	0 1
<u>Minimum C</u>	ontrol Measure 4. Cons	struction Site Storn	nwater Runol	ff Cont	<u>rol</u>
The information in thi	s section is being reported (che	ck one):			
On behalf of an indOn behalf of a coalHow ma	ividual MS4 ition any MS4s contributed to this	report?			
1. How many conducting this rep	struction projects have been orting period?	authorized for distur	bances of one a	cre or n	1ore
2. How many conduring this rep	struction projects disturbin orting period?	g at least one acre we	re active in you	r jurisdi	ction 1
3. What percent of	of active construction sites v	vere inspected during	this reporting p	period?	O NT
4. What percent	of active construction sites v	vere inspected more tl	ian ouce?	1 0	O NT
5. Do all iuspecto Construction S	rs working on behalf of the Stormwater Iuspection Mat	MS4s contributing to ual?	this report use • Yes	the NYS	S ONT
6. Does your MS- (SWPPPs) of c	4/Coalition provide public a onstruction projects that a	e subject to MS4 revi	Pollution Preven ew and approva • Yes	ntion Pla 1? O No	ous Ont
If your MS4 is public review?	Non-Traditioual, are SWP	PPs of construction pr	ojects made av	ailable f O Yes	or O No
If Yes, use the	following page to identify loo	ation(s) where SWPPP	s can be accesse	d.	

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 5 \end{bmatrix}$ 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
6. con't.:	
Submit additional pages as needed.	
MS4/Coalition Office	
Department Johnson City Public	Works
Address	
2 4 3 Main Street	
City	Zip
Johnson City NY	Y 13790-
Phone (607)797-3031	
O Library Address	
City	Zip
	_}
Phone () -	
O Other	
Address	
City	Zip
City	
Phone Thomas The Phone Thomas The Phone Thomas The Phone Thomas The Phone Thomas The Phone Thomas The Phone Thomas The Phone T	
(_ _) _ _ _ _	
O Web Page URL(s): Please provide specific address where SWPI	PPs can be accessed - not home page.
URL	
	
	<u> </u>
URL	
	<u> </u>

Lot Rehabilitation project.

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.			
Name of MS4/Coalition Village of Johnson City	SPDES ID N Y R 2 0 A 1 0 1		
7 Evaluating Progress Toward Massurable Coals	s MCM 4		

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 one project required a SWPPP, this was the Johnson City Senior Center Parking

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

The project and weekly SWPPP inspections by a NYS licensed Engineer and periodically 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?

(ex.: samples/participants/events)

- D. Has your MS4 made progress toward this measurable goal during this reporting period?
 - **Yes** O No
- E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

O No Yes

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

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.

Site

P 1 a n

MS4 Annual Report Form

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

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

				SPDES ID	
Name of MS4/Coalition	Village of Johnson Cit	ty		N Y R	2 0 A 1 0 1
<u>Minimum (</u>	Control Mea	sure 5. Post-	<u>Constructio</u>	<u>n Stormwater N</u>	<u>Management</u>
The information in thi	s section is bein	g reported (chec	k one):		
On behalf of an indOn behalf of a coalHow ma		ributed to this I	report?		
1. How many and w MS4/Coalition in	what type of pos wentoried, insp	st-construction ected and main	stormwater ma tained in this r	magement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
● Filter Systems		1 2	1 2		
O Infiltration Basins		3	3	0	
O Open Channels		0	0		
O Ponds		4	4	0	
○ Wetlands			0		
O Other		0	0	0	
2. Do you use an o BMPs, inspecti			abase, spreads	sheet) to track pos	t-construction ● Yes ○ No
3. What types of a Development/E	nou-structural Better Site Desi	l practices hav ign/Green Infi	e been used to rastructure pr	implement Low I iuciples?	mpact
● Building Codes	• Municipal C	Comprehensive I	Plans		
O Overlay Districts O Open Space Preservation Program					
Zoning	• Local Law	or Ordinance			
O None	O Land Use R	Regulation/Zonin	g		
O Watershed Plans	O Other Comp	orehensive Plan			
Other:				-, , , , , , , , , , , , , , , , , , , 	

Reviews

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

Nam	te of MS4/Coalition Village of Johnson City SPDES ID N Y R 2	0 A	1	0 1	
4a.	Are the MS4s contributing to this report involved in a regional/watershed wide planni	ng e	ffort Yes	? ○ No	
4b.	Does the MS4 bave a banking and credit system for stormwater management practice	s?	Yes	• No	ı
4c.	Do the SWMP Plans for each MS4 contributing to this report include a protocol for evand approval of banking and credit of alternative siting of a stormwater management	pra	ation ctice Yes	')
4d.	How many stormwater management practices have been implemented as part of this reporting period?	syste	em ir	this	
5.	What percent of municipal officials/MS4 staff responsible for program implementation training on Low Impace Development (LID), Better Site Design (BSD) and other Great Infrastructure principles in this reporting period?	n a en	ttend	ed 0 %	

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

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

SPDES ID

Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
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.	l achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
The Village has a data base established for Post-Construction W inspections. The property owner is responsible for maintenance Village does not maintain the systems.	ater Management annual of their storm system, therefore the
B. Briefly summarize the observations that indicated the ove	erall effectiveness of this Measurable
The annual inspections conclude that the implemented systems	are maintained and operable.
C. How many times was this observation measured or evaluation	ated in this reporting period? [1 9] (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable go	al during this reporting period?
E. Is your MS4 on schedule to meet the deadline set forth in	● Yes ○ No 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).
The MCC goal will continue to be met by continuing the annual inspections to include any new systems that may be installed du	l inspections and expanding the pring future reporting periods.

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

Name of MS4/Coalition Town of Kirkwood SPDES ID

N Y R 2 0 A 0 7 2

	<u>Minimum Control Measures 4 and 5.</u> <u>Construction Site and Post-Construction Control</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?		
1a.	Has each MS4 contributing to this report adopted a law, ordinance or other reg mechanism that provides equivalent protection to the NYS SPDES General Peri Stormwater Discharges from Construction Activities?	ulatory mit for • Yes	O No
1b	.Has each Town, City and/or Village contributiug to this report documented that equivalent to a NYSDEC Sample Local Law for Stormwater Management and l Sediment Control through either an attorney cerfification or usiug the NYSDEC	Erosion	v is and
	Analysis Workbook? • Yes	O No	ONT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La • 09/2004 • O 09	w. 3/2006	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?	e been	
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs? • Yes	ıblic O No	O NT
	If Yes, how many public comments were received during this reporting period?	L	0
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	the loca Yes	al O No

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

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	#		No Authority
O Enforcement Actions or Sanctions	#		
O Other	#		No Authority

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

	CN 10.4/C-ptisting Town of Kirkwood	SPDES ID N Y R 2 0 A 0 7 2
Name	e of MS4/Coalition Town of Kirkwood	[11] 2 [21] 2 [2] 2 [2] 2 [2]
	Minimum Control Measure 4. Construction Site Sto	ermwater 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?	
	How many construction projects have been authorized for dis during this reporting period?	turbances of one acre or more
	How many construction projects disturbing at least one acreduring this reporting period?	were active in your jurisdiction
3.	What percent of active construction sites were inspected duri	ng this reporting period? ONT
4.	What percent of active construction sites were inspected more	e than once? ONT 100%
5.	Do all inspectors working on behalf of the MS4s contributing Construction Stormwater Inspection Manual?	to this report use the NYS Yes ONO ONT
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 O Yes O No
	If Yes, use the following page to identify location(s) where SWP	PPs can be accessed.

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

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

SPDES ID

Name of MS4/Coalition Town of Kirkwood	N Y R 2 0 A 0 7 2
6. con't.: Submit additional pages as needed.	
● MS4/Coalition Office	
Department	
Building & Code	Enforcement
Address 4 1 Francis Stree	t
City	Zip
Kirkwood	N Y 1 3 7 9 5 -
Phone	
(6 0 7) 7 7 5 - 4 3 1 3	
O Library	
Address	
City	Zip
] []
Phone	
() -	
O Other	
Address	
City	¬ [¬¬ [¬¬ [¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬
Dt	
Phone	
O Web Page URL(s): Please provide specific address when the specific a	here SWPPPs can be accessed - not home page.
URL	
URL	

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

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

Name of MS4/Coalition Town of Kirkwood		N Y R 2	0 A 0	7 2
7. Evaluating Progress Toward Measurable Goals Me	CM 4			
Use this page to report on your progress and project plans identified in your Stormwater Management Program Plan III.C.1. Submit additional pages as needed.	s toward achiev n (SWMPP), in	ring measurable cluding require	e goals ments in P	art
A. Briefly summarize the Measurable Goal identified	in the SWMP	P in this repo	rting perio	od.
Measurable goal is to inventory the number of SWPPP's the number and amount of times construction projects are	received and ree inspected.	eviewed. Also	to docume	ent
B. Briefly summarize the observations that indicated Goal.	the overall ef	fectiveuess of t	his Measu	rable
All construction projects with disturbances of one or mo All active construction projects were inspected multiple	re acres had an times during th	approved SWI	PPP in plac riod.	ce.
C. How many times was this observation measured of	r evaluated in			1 ticipants/events)
D. Has your MS4 made progress toward this measure	able goal duri			
E. Is your MS4 on schedule to meet the deadline set f	forth in the SV	WMPP?	• Yes	O No
F. Briefly summarize the stormwater activities plaum the next reporting cycle (including an implementa	ned to meet the tion schedule)	e goals of this l	MCM dur	ing ——
Continue to verify that all construction projects disturbing in place and inspect every active construction project at	ng I or more a	cres have an ap eek during cons	proved SW struction.	/РРР

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

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

				SPDE2 ID	
Name of MS4/Coalition	Town of Kirkwood			N Y R	2 0 A 0 7 2
<u>Minimum (</u>	Control Mea	<u>sure 5. Post-</u>	<u>Constructio</u>	n Stormwater N	<u>Ianagement</u>
The information in thi	s section is bein	g reported (check	k one):		
On behalf of an indOn behalf of a coalHow ma	ition	ributed to this r	eport?		
1. How many and v MS4/Coalition in	what type of pos eventoried, insp	st-construction s sected and main	stormwater ma tained in this ro	nagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
O Alta di Davidia		Inventoried	Inspections		
O Alternative Practice	es	<u> </u>			
O Filter Systems					
O Infiltration Basins					
O Open Channels					
Ponds		2			
O Wetlands					
O Other					
2. Do you use an o BMPs, iuspecti			ıbase, spreads	heet) to track post	e-constructiou ● Yes ○ No
3. What types of a Development/E	non-structura Better Site Des	l practices have ign/Green Infr	e been used to astructure pri	implement Low I inciples?	mpact
Building Codes	O Municipal (Comprehensive P	lans		
O Overlay Districts	O Open Space	Preservation Pro	ogram		
O Zoning	O Local Law	or Ordinance			
O None	O Land Use I	Regulation/Zoning	2		
O Watershed Plans	O Other Comp	prehensive Plan			
● Other:	i n g B	o a r d	R e c o m	m e n d a t	ion

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

		S	PDES	S ID						
Nan	ne of MS4/Coalition Town of Kirkwood		N Y	R	2	0	A	0	7	2
4a.	Are the MS4s contributing to this report involved in a regional/wat	ershed	l wid	e pl	ann	ing	eff	ort?	•	
	- -						Yes		O I	νo
4b.	. Does the MS4 have a banking and credit system for stormwater ma	nager	nent	pra	etic	es?				
						О	Yes	S	•]	Νo
4c.	Do the SWMP Plans for each MS4 contributing to this report incluand approval of banking and credit of alternative siting of a storm	de a p water	rotoc mana	ol f iger	nen or e	t pr	uati acti Ye:	ice?	•]	No
4d.	. How many stormwater management practices have been implemen	ited as	part	of	this	sys	tem	in	this	s
reporting period?								0		
5.	What percent of municipal officials/MS4 staff responsible for prog training on Low Impace Development (LID), Better Site Design (B)	ram ii SD) ai	npler id otl	nen nen	tati Gre	ou a en	tte	nde	d	
	Infrastructure principles in this reporting period?	•				ſ			0	%

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

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

Name of MS4/Coalition Town of Kirkwood	SPDES ID N Y R 2 0 A 0 7 2
Name of MS4/Coalition[
6. Evaluating Progress Toward Measurable Goal	s MCM 5
Use this page to report on your progress and project pridentified in your Stormwater Management Program III.C.1. Submit additional pages as needed.	plans toward achieving measurable goals Plan (SWMPP), including requirements in Part
A. Briefly summarize the Measurable Goal identi	fied in the SWMPP in this reporting period.
Measurable goal is the number of post construction I that the owner has conducted and documented maint	BMP's inspected and maintained. Also to verify tenance of the post construction BMP's.
B. Briefly summarize the observations that indica	ated the overall effectiveness of this Measurable
After the post construction BMP's were in place staffound no flood or migration of Silt/Sediment surrou	f inspected them after heavy rainfall events and nding the sites.
C. How many times was this observation measure	ed or evaluated in this reporting period? (ex.: samples/participants/event
D. Has your MS4 made progress toward this mea	surable goal during this reporting period?
E. Is your MS4 on schedule to meet the deadline	● Yes ○ No set forth in the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities p the next reporting cycle (including an implement	lanned to meet the goals of this MCM during entation schedule).
Continue to inspect post construction BMP's and ho them. Also, to request and file annual maintenance	ld owner's/operators accountable to maintain records from each post construction BMP.

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

	SF	DES	S ID					_	
Name of MS4/Coalition Town of Owego	N	Y	R	2	0	Α	0	7	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?		
	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?	ılatory ıit 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	Crosion CGap	and
	Analysis Workbook? • Yes	O No	ONT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Lav ○ 09/2004 ● 03.	v. /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?	e been	2
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of pul comments related to construction SWPPPs? • Yes	blic 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 to SWPPP process?	the loca ● Yes	al O No

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

O Notices of Violation	#	O No Authority
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, $\begin{bmatrix} 2 & 0 & 1 & 5 \end{bmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of Owego N Y	R 2 0 A 0 7 9						
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 during this reporting period?	of one acre or more						
2. How many construction projects disturbing at least one acre were active during this reporting period?	in your jurisdiction						
3. What percent of active construction sites were inspected during this repo							
4. What percent of active construction sites were inspected more than once	1 0 0 % ONT 1 0 0 %						
5. Do all inspectors working on behalf of the MS4s contributing to this repo	ort use the NYS 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 mapublic review?	ade available for O Yes O No						
If Yes, use the following page to identify location(s) where SWPPPs can be a	accessed.						

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 5 \end{bmatrix}$ 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	N Y R 2 0 A 0 7 9
6. con't.:	
Submit additional pages as needed.	
MS4/Coalition Office	
Department	
Town of Owego Planning	g & Zoning
Address	
2 3 5 4 S t a t e R o u t e 4 3 4	
	ip 1 3 7 3 2 - 1 0 1 0
	1 3 7 3 2 - 1 0 1 0
Phone (6 0 7) 6 8 7 - 0 1 2 3	
O Library Address	
Address	
CityZ	ip
	<u> </u>
Phone	
(
O Other	
Address	
City	ip
Phone	
() -	
O Web Page URL(s): Please provide specific address where SWPPPs can be	e accessed - not home page.
URL	
URL	

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

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

Name of MS4/Coalition Town of Owego	SPDES ID N Y R 2 0 A 0 7 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 (SWMIIII.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.
Update municipal staff education pertaining to local inspection p	rocedures.
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Town of Owego Planning Board members receive annual trainin regulations is included in this training.	g. Overview of stormwater
C. How many times was this observation measured or evalua	ited in this reporting period? 10 (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goa	ol 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 duriug edule).
The Town of Owego will continue to provide notice to the publi review and comment by posting agendas for Planning Board and on the Town of Owego website as well as the bulletin board at the	l Zoning Board of Appeals meetings

O Other:

MS4 Annual Report Form

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

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

If submitting	ig this form as p	art of a joint rep	off on benan or a	a coantion leave of DES	iD Claik.
				SPDES ID	
Name of MS4/Coalition	Town of Owego			N Y R 2	0 A 0 7 9
<u>Minimum</u>	Control Mea	asure 5. Post	-Construc <u>tio</u>	on Stormwater Ma	<u>nagement</u>
The information in th	is section is bei	ng reported (che	ck one):		
On behalf of an incOn behalf of a coaHow m	lition	tributed to this	report?		
1. How many and MS4/Coalition is	what type of ponventoried, ins	st-construction pected and mair	stormwater ma ntained in this r	nagement practices has eporting period?	s your
		# Inventoricd	# Inspections	# Times Maintained	
Alternative Practice	es	1	1	0	
O Filter Systems					
Infiltration Basins		1	1	0	
O Open Channels					
Ponds		4	4		
O Wetlands					
Other					
2. Do you use an BMPs, inspect			abase, spreads	heet) to track post-co	n struction ○ Yes • No
3. What types of Development/H				implement Low Impainciples?	act
O Building Codes	O Municipal	Comprehensive I	Plans		
O Overlay Districts	O Open Space	e Preservation Pr	ogram		
O Zoning	O Local Law	or Ordinance			
None	O Land Use I	Regulation/Zonin	g		
O Watershed Plans	O Other Com	prehensive Plan			

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix}$ 5 lf submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		SPDES ID			_
Nar	ne of MS4/Coalition Town of Owego	N Y R 2	0 A 0	7] 9	9
4a.	Are the MS4s contributing to this report involved in a regional/waters	shed wide planı		i? ○ N	Vo
4b	. Does the MS4 have a banking and credit system for stormwater mana	igement practic	es? O Yes	• 1	Vо
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 e ter managemen	evaluation at practice O Yes	1 ? ● N	Vо
4d	. How many stormwater management practices have been implemented reporting period?	d as part of this	s system in	this	j
5.	What percent of municipal officials/MS4 staff responsible for programment on Low Impace Development (LID), Better Site Design (BSD Infrastructure principles in this reporting period?	m implementat) and other Gr	ion attend een	ed	%

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

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

SPDES ID

SPDES ID

Name of MS4/Coalition	Town of Owego			N Y R 2 0	A 0 7 9	
6. Evaluating Prop	gress Toward Measu	rable Goals MC	М 5			
identified in your St	ort on your progress a ormwater Manageme tional pages as neede	nt Program Plan (oward achiev SWMPP), inc	ing measurable go cluding requireme	oals ents in Part	
A. Briefly summar	rize the Measurable	Goal identified in	n the SWMP	P in this reporti	ng period.	able in the state of the state
The Town of Oweg inspection schedule	go will develop invent es.	ory, including typ	pes of post con	nstruction practic	es and	
B. Briefly summar Goal.	rize the observations	that indicated tl	ne overall eff	ectiveness of this	s Measurable	
Work is continuing	on creation of the inv	ventory.				
C. Have many tim	es was this observati	on mossured or		this reporting n	eriod?	
C. How many time	es was this observati	on measured or	evaluated iii	mis reporting po		
					ples/participants/ev	ents)
D. Has your MS4	made progress towa	rd this measurat)le goal durit		period? Yes ○ No	
E. Is your MS4 on	schedule to meet th	e deadline set for	rth in the SV	/MPP?	● Yes ○ No	
F. Briefly summar the next report	rize the stormwater a	activities planne an implementati	d to meet the on schedule).	goals of this MC	CM during	
The Town of Oweg	go will review its Stor s defined by the curre	mwater ordinance ent permit pertaini	e to maintain ing to stormw	NYS Stormwater ater management	standards activities.	

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

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

DI DEG 1D	SPDES ID				
Name of MS4/Coalition VILLAGE OF PORT DICKINSON NYRZ	2 0) A	0	8	0

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

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

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

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	#	
O Other	#	O No Authority

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

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

N Y R	ES ID	,					
Name of MS4/Coalition VILLAGE OF PORT DICKINSON N Y R	7 R 2	2	0	Α	0	8	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?		
	The many trie to commonte to the repeat.		
1.	How many construction projects have been authorized for disturbances of one during this reporting period?	acre or I	more 0
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	ır 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
_	Do all inspectors working on behalf of the MS4s contributing to this report use	the NV	
Э,	Construction Stormwater Inspection Manual? • Yes	O No	ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preve (SWPPPs) of construction projects that are subject to MS4 review and approved to MS4.		ans O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made as		
	public review?	O Yes	
	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, $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix}$ 5 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition VILLAGE OF PORT DICKINSON	N Y R 2 0 A 0 8 0
6. con't.: Submit additional pages as needed.	
O MS4/Coalition Office	
Department	, , , , , , , , , , , , , , , , , , ,
VILLAGE HALL	
Address 7 8 6 C H E N A N G O S T R E E T	
City	Zip
BINGHAMTON	-
Phone (6 0 7) 7 7 1 - 8 2 2 3	
O Library Address	
Address	
City	Zip
Phone	
(_	
O Other	
Address	
	7:-
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, $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix}$ 5

Name of MS4/Coalition VILLAGE OF PORT DICKINSON N Y R 2 0 A 0 8 0
7. Evaluating Progress Toward Measurable Goals MCM 4
7. Evaluating 110gress 10 ward Measurable Coals Ment
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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 HAS BEEN NO PROJECTS. 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.
NA. 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/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).
REVIEW ANY SWPPP'S AND MAKE AVAILABLE FOR PUBLIC COMMENT. PLACE ACTIVITY ON WEB SITE WHEN AVAILABLE Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place and inspect every active construction project at least one a week during construction,

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

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

Name of MS4/Coalition	VILLAGE OF PORT	DICKINSON		SPDES ID N Y R 2 0 A	0 8 0
Minimum (Control Meas	sure 5. Post-	-Construction	n Stormwater Manage	<u>ment</u>
The information in th	is section is being	g reported (chec	k one):		
On behalf of an indOn behalf of a coalHow m		ributed to this r	report?		
1. How many and w	what type of pos aventoried, insp	t-construction ected and main	stormwater ma tained in this re	nagement practices has your porting period?	
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	es				
O Filter Systems					
O Infiltration Basins					
O Open Channels					
O Ponds					
O Wetlands					
O Other					
2. Do you use an o BMPs, inspecti			abase, spreadsl	neet) to track post-constru ● Y	
3. What types of a Development/E		_		implement Low Impact nciples?	
O Building Codes	• Municipal C	omprehensive P	lans		
O Overlay Districts	O Open Space	Preservation Pro	ogram		
O Zoning	O Local Law o	r Ordinance			
O None	O Land Use Re	egulation/Zoning	3		
O Watershed Plans	Other Comp	rehensive Plan			
Other:					

 $R \mid E \mid C \mid O \mid M \mid M \mid E \mid N \mid D \mid A \mid T \mid I \mid O \mid N \mid S \mid$

BOARD

PLANNING

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

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

	- 5P.	DE	ענכ					
Name of MS4/Coalition VILLAGE OF PORTDICKINSON	N	Y	R	2	0	0	8	0
4a. Are the MS4s contributing to this report involved in a regional/waters					•	effo Yes		O No
4b. Does the MS4 have a banking and credit system for stormwater mana	geme	ent	pra	etic		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 stormwat					t pr		ce?	● No
4d. How many stormwater management practices have been implemented reporting period?	as p	art	of	this	sys	tem	$\overline{}$	his
5. What percent of municipal officials/MS4 staff responsible for program training on Low Impace Development (L1D), Better Site Design (BSD) Infrastructure principles in this reporting period?						tten	dec	i 0] %

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

Name of MS4/Coalition VILLAGE OF PORT DICKINSON	SPDES ID N Y R 2 0 A 0 8 0
6. Evaluating Progress Toward Measurable Goals MCM 5	
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.	
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
NO ACTIVITY Measurable goal is to document the number of post construction E that the owner has conducted and documented maintenance of the	
B. Briefly summarize the observations that indicated the overa	all effectiveness of this Measurable
NA After the post construction BMP;S were in place staff inspected the found no flood damage or migration of silt/sediment surrounding required.	<u> </u>
C. How many times was this observation measured or evaluate	0
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events) during this reporting period?
	● Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the	ne SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheen	-
IT IS NOT LIKELY THAT THERE WILL BE ANY POST CON REPORTING PERIOD	STRUCTION ACTIVITIES THIS

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

	SP	DES	<u>ui </u>						
Name of MS4/Coalition Town of Union	N	Y	R	2	0	Α	0	5	0

	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 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 Yes • No	ONT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. O 09/2004 O 03/2006	• NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	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?	
5.	Does your MS4/Coalition provide education and training for contractors about the loca SWPPP process? • Yes	l 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:

Notices of Violation	#	1	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, $\begin{bmatrix} 2 & 0 & 1 & 5 \end{bmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of Union	N Y R 2 0 A 0 5 0
Minimum Control Measure 4. Construction Site Story	mwater 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 distuduring this reporting period?	rbances of one acre or more
2. How many construction projects disturbing at least one acre we during this reporting period?	ere active in your jurisdiction
3. What percent of active construction sites were inspected during	this reporting period? ONT
4. What percent of active construction sites were inspected more t	han ouce? O NT
5. Do all inspectors working on behalf of the MS4s contributing to Construction Stormwater Inspection Manual?	o this report use the NYS ● Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Stormwater (SWPPPs) of construction projects that are subject to MS4 revi	
If your MS4 is Non-Traditional, are SWPPPs of construction public review?	rojects made available for O Yes O No
If Yes, use the following page to identify location(s) where SWPPP	's can be accessed.

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

	SPDES ID
Name of MS4/Coalition Town of Union	N Y R 2 0 A 0 5 0
6. con't.:	
Submit additional pages as needed.	
● MS4/Coalition Office	
Department	
Code Enforcement	
Address	
3 1 1 1 E Main Street	Zip
City E n d w e 1 1	1 3 7 6 0 -
Phone	
(6 0 7) 7 8 6 - 2 9 2 0	
O Library	
Address	
City	Zip
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	
URL	
	}

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

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 NYR20A050
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 Measnrable Goal identified in the SWMPP in this reporting period.
There were no new projects this year- 3 projects are ongoing from last year. Town enacted fill and grading permit requirements so that we can track size of disturbances and require some BMP for small projects.
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?
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).
Staff received training on inspection procedures. Promote contractor training availability on website.

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

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

SPDES ID

Name of MS4/Coalition	Town of Union			N Y R 2	2 0 A 0 5 0	
Minimum Control Measure 5. Post-Construction Stormwater Management						
The information in thi	is section is bein	g reported (chec	ck one):			
On behalf of an indOn behalf of a coalHow me		ributed to this	report?	_		
	what type of pos	st-construction	stormwater ma	—' nagement practices h eporting period?	as your	
	· · · · · · · · · · · · · · · · · · ·	#	#	# Times		
		Inventoried	Inspections	Maintained		
O Alternative Practice	es					
O Filter Systems						
O Infiltration Basins						
O Open Channels						
Ponds		10	1 0			
O Wetlands						
O Other						
2. Do you use an o BMPs, inspecti			abase, spreads	heet) to track post-c	eonstruction ● Yes ○ No	
3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?						
Building Codes	• Municipal C	omprehensive F	lans			
Overlay Districts	O Open Space	Preservation Preservation	ogram			
O Zoning	O Local Law o	or Ordinance				
O None	Land Use R	egulation/Zoning	g			
O Watershed Plans	O Other Comp	rehensive Plan				
O Other:					<u> </u>	

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

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

Nan	ne 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/watershed wide plann	ing	effor	·t?	
		•	Yes	0	No
4b.	Does the MS4 have a banking and credit system for stormwater management practice.		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	pra		e?	No
4d.	. How many stormwater management practices have been implemented as part of this reporting period?	syst	em i	n thi	is
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?		tten	ded 0	%

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

Name of MS4/Coalition Town of Union	SPDES ID N Y R 2 0 A 0 5 0
Name of M34/Coandon	
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achidentified in your Stormwater Management Program Plan (SWMPP), III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWM	IPP in this reporting period.
Code enforcement software is used to track SWPPP inspections. The maintaining one system.	e Town is only responsible for
B. Briefly summarize the observations that indicated the overall Goal.	effectiveness of this Measurable
Yearly inspections made to make sure systems are performing proper	rly.
C. How many times was this observation measured or evaluated	in this reporting period?
	1 2
The Man I would be a later to the second by	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal du	ring this reporting period: ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the S	SWMPP?
21 20 your 125 , on concentre to make the accuracy of the second	● Yes O No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedul	
Train additional staff to inspect systems.	
	

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

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

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

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

O Notices of Violation	#	O No Authority
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, $\begin{bmatrix} 2 & 0 & 1 & 5 \end{bmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Nan	ne of MS4/Coalition Town of Vestal N Y R 2	0 A 0	6 4
	Minimum Control Measure 4. Construction Site Stormwater Runo	ff Con	<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?		
ı.	How many construction projects have been authorized for disturbances of one a during this reporting period?	cre or 1	more 2
2.	How many construction projects disturbing at least one acre were active in your during this reporting period?	r jurisd	iction 2
3.	What percent of active construction sites were inspected during this reporting p	eriod?	1 1
4.	What percent of active construction sites were inspected more than once?	1 0	○ NT 0 %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? • Yes	the NY ○ No	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		ans ONT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?		
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	i.	

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

Name of MS4/Coalition Town of Vestal		N Y R 2 0 A 0 6 4
6. con't.: Submit additional pages as needed.		
MS4/Coalition Office		
Department		
Engineering		
Address 1 3 3 Font Street		
City		Zip
V e s t a l	N Y	1 3 8 5 0 -
Phone (6 0 7) 7 8 6 - 0 9 8 0		
O Library		
Address		
City		Zip
Phone		
() -		
O Other		
Address		
City	,	Zip
		<u> </u>
Phone		
() -		
O Web Page URL(s): Please provide specific address	where SWPPPs can l	be accessed - not home page.
URL		
URL		

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

Name of MS4/Coalition Town of Vestal	SPDES ID NYR20A064
rame of 1435-7 Courselon	
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.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
all construction sites had SWPPP review and approvals	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
confirm weekly inspections by outside company and periodically	inspected by IOV
C. How many times was this observation measured or evaluation	ted in this reporting period?
	1 0
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/event 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 scho	2
keep reviewing SWPPP as needed	

P l a n n i n g

MS4 Annual Report Form

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

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

11 0001111111	ag and form do pe	are or a joint rop	or on oonan or		
Name of MS4/Coalition	Town of Vestal			SPDES ID N Y R 2	0 A 0 6 4
<u>Minimum</u>	Control Mea	sure 5. Post	-Constructio	on Stormwater Man	agement
1. How many and	dividual MS4 lition nany MS4s cont what type of pos	ributed to this i	report?	nnagement practices has reporting period?	your
		# Inventoried	# Inspections	# Times Maintained	
BMPs, inspecti	electronic tool ions and maint non-structural	anance? practices hav	1 4 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	heet) to track post-consimplement Low Impacinciples?	● Yes ○ No
O Building Codes	O Municipal C	Comprehensive P	Plans		
O Overlay Districts	O Open Space	Preservation Preservation	ogram		
O Zoning	O Local Law o	or Ordinance			
O None	O Land Use R	egulation/Zoning	g		
O Watershed Plans	Other Comp	rehensive Plan			
Other:					

r e v i e w

Board

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

Naı	me of MS4/Coalition Town of Vestal SPDES ID N Y R 2	0	A C	6	4
4a	. Are the MS4s contributing to this report involved in a regional/watershed wide plann	ng	effor	t?	
		•	Yes	0	No
4b	. Does the MS4 have a banking and credit system for stormwater management practice	s?			
		О	Yes		No
4c.	. Do the SWMP Plans for each MS4 contributing to this report include a protocol for each and approval of banking and credit of alternative siting of a stormwater management	pra		e?	No
4d	. How many stormwater management practices have been implemented as part of this reporting period?	syst	em i	n thi	is
5.	What percent of municipal officials/MS4 staff responsible for program implementation training on Low Impace Development (LID), Better Site Design (BSD) and other Gree Infrastructure principles in this reporting period?		ttene	led	%

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

			SPDES ID
Name of MS4/Coalition	Town of Vestal		N Y R 2 0 A 0 6 4
6. Evaluating Pro	ogress Toward Measurable Goa	als MCM 5	
identified in your S	port on your progress and project tormwater Management Program litional pages as needed.		
A. Briefly summa	rize the Measurable Goal ident	ified in the SWM	IPP in this reporting period.
all past constructio	on sites are inspected yearly		:
B. Briefly summa Goal.	rize the observations that indic	ated the overall e	effectiveness of this Measurable
few minor deficien	nt items found and property owne	rs are correcting	
C. How many tim	es was this observation measur	ed or evaluated i	n this reporting period?
			2 7
D. Has your MS4	made progress toward this me	asurable goal du	ex.: samples/participants/even ring this reporting period? ■ Yes ○ No
E. Is your MS4 or	n schedule to meet the deadline	set forth in the S	
F Rriefly summa	rize the stormwater activities p	Januar to meet t	● Yes ○ No
	ting cycle (including an implem		
continue yearly ins	spections		

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

			SPL	DES	ID						
Name of MS4/Coalition	BROOME COUNTY		N	Y	R	2	0	Α	3	თ	2
•		_									

Minimum Control Measure 6. Stormwater Management for Municipal Operations

1

 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

		<u>perform</u>	<u>ed within</u>	the past 3
Operation/Activity/Facility	Addressed in	n SWMP?	<u>years?</u>	ı
Street Maintenance	• Yes	O No	Yes	O No
Bridge Maintenance	• Yes	O No	Yes	O No
Winter Road Maintenance		O No	Yes	O No
Salt Storage	• Yes	O No	Yes	O No
Solid Waste Management		O No	Yes	$O N_0$
New Municipal Construction and Land Disturba	ınce 🖲 Yes	O No		$O N_0$
Right of Way Maintenance		O No		O No
Marine Operations	O Yes	• No	O Yes	\bigcirc No
Hydrologic Habitat Modification	• Yes	O No	Yes	O No
Parks and Open Space		O No	Yes	O No
Municipal Building	• Yes	O No	Yes	O No
Stormwater System Maintenance		O No	Yes	O No
Vehicle and Fleet Maintenance		O No	Yes	O No
Other	A 17	O No	Yes	\bigcirc No

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix}$ 5 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
2. Provide the following information about municipal operat	ions good housekeep	ing prog	rams:
O Parking Lots Swept (Number of acres X Number of times swep	t) # Acres		1 3
O Streets Swept (Number of miles X Number of times swept)	# Miles	3	4 0
O Catch Basins Inspected and Cleaned Where Necessary	#	1	1 2
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#		4
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		8 8
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	3 3	0 0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	# Acres Umber of	4 8	1.
3. How many stormwater management trainings have been p	provided to municips	ıl employ	yees
during this reporting period?			4
4. What was the date of the last training?	0 2 / 0 4	/ 2 0	1 5
5. How many municipal employees have been trained in this	reporting period?		0
6. What percent of municipal employees in relevant position stormwater management training?	s and departments r	eceive	0 %

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

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 identified in your Stormwater Management Program Plan (SWMPP), including require III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this repo	rting period.
MEASURABLE GOAL #6A is to complete a self-assessment every 3 years by each building/facility identified under goal #6G and then to use these assessments to evaluate good housekeeping and implement changes as needed.	
B. Briefly summarize the observations that indicated the overall effectiveness of Goal.	this Measurable
As the good housekeeping documents have been developed, these self-assessments har reviewed and updated, 16 were updated in the 2013-2014 reporting year, and the final updated in the 2014-2015 reporting year. The target will be to complete all of them as 2016-2017 reporting year.	5 were
C. How many times was this observation measured or evaluated in this reporting	g period?
	samples/participants/event.
D. Has your MS4 made progress toward this measurable goal during this reporti	ing 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 I the next reporting cycle (including an implementation schedule).	MCM during
None during the next cycle as this is due again in the 2016-2107 reporting year.	Ì

Name of MS4/Coalition BROOME COUNTY

MS4 Annual Report Form

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

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

SPDES ID

NYR2

0 A 3 3 2

7. Evaluating Progress Toward Measurable Goals MCM 6
Jse 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 II.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
MEASURABLE GOAL #6B is to sweep 100% of County Roads and Parking Lots within the MS4 boundaries at least once annually in accordance with Good Housekeeping measures.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
The County is working on this goal by better defining the MS4 road boundaries and better infrastructure mapping, and the development of good housekeeping records.
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 this reporting period?
● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
● Yes ○ No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue program as established. Additional fine tuning of process will be continued and implemented as noted in Goal #6I.
150165

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

it submitting this form as part of a joint report on behalf of a	
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 identified in your Stormwater Management Program Plan (SWMIIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
MEASUREABLE GOAL #6C is to clean and inspect 50% of control the MS4 boundary annually.	catch basins and drop inlets within
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Cleaning / inspection is occurring by County Highway Division of confirmation whether 50% of structures as denoted in this goal are inspected due to the lack of good mapping. The mapping issue is worked on. We are still in the process of analyzing field data and drainage.	re actually being cleaned and set out in goal #5B and is being
C. How many times was this observation measured or evalua	ted in this reporting period? 1 1 2 (ex.: samples/participants/eve
D. Has your MS4 made progress toward this measurable goal	
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 the next reporting cycle (including an implementation sch	eet the goals of this MCM during
Continue program as established. Additional fine tuning of proceed Goal #6I, and confirmation of system mapping will be done as no	

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

SPDES	
Name of MS4/Coalition BROOME COUNTY Name of MS4/Coalition	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 measidentified in your Stormwater Management Program Plan (SWMPP), including Pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
MEASUREABLE GOAL #6D is to reduce the amount of phosphorus and nitr chemical fertilizers.	ogen applied in
B. Briefly summarize the observations that indicated the overall effectivened Goal.	ss of this Measurable
Chemical fertilizers are only being used / applied at the En Joie golf course.	
	:
C. How many times was this observation measured or evaluated in this repo	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?	● 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
Review products being used / applied for further reductions.	

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

			SPDES ID	
Name of MS4/Coalition BRC	OME COUNTY		N Y R 2 0 A 3	3 2
7. Evaluating Progres	s Toward Measurable Goals	MCM 6		
	on your progress and project pl water Management Program P al pages as needed.			Part
A. Briefly summarize	the Measurable Goal identifi	ied in the SWMPP	in this reporting per	iod.
MEASUREABLE GOAMS4 boundaries.	AL #6E is to reduce the acre	age of herbicide/pes	ticide usage within the	e
B. Briefly summarize Goal.	the observations that indicat	ed the overall effec	tiveness of this Meas	surable
Herbicides only being u at En Joie golf course.	used along County roadways a	t guide rail locations	s, and products being u	ısed
C. How many times w	as this observation measured	l or evaluated in th	is reporting period?	
·				1
D. Has your MS4 mad	e progress toward this meas	urable goal during		rticipants/even t s) d?
D. T	- 1-1- 4 4 41- Jos JR	.4 fa4h ! 4h a CINA		O No
E. Is your M54 on sch	edule to meet the deadline so	et forth in the S wiv	✓ Yes	O No
•	the stormwater activities pla cycle (including an implemen	_	oals of this MCM du	ring
Review minimization to	o the greatest extent possible.			
				

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

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

	SPDES ID
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 (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
MEASUREABLE GOAL #6F is to develop staff training relate IDDE, and good housekeeping measures, and to have 100% of C with this goal. This goal will be accomplished in part by the BT they will assist in the creation of applicable training materials and	ounty staff educated in accordance SC as part of MCM-1 and MCM-2,
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
This goal within MCM-6 of the County's SWMPP is related direct the general public. Facility managers/staff training with respect techniques is ongoing as good housekeeping documents continue	to IDDE and good housekeeping
C. How many times was this observation measured or evalua	0
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events I during this reporting period?
To the hour rise i mine brod-one south and money make Bon	• Yes O 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 the next reporting cycle (including an implementation scho	

Reaching 100% compliance as noted above will take some time and be accomplished in a number of steps. The first step which has been started and will be completed during the next reporting period includes setting up a County based stormwater management link on our web site for employee use and education, and sending out broadcast e-mail notices to make employees aware of it's location and content. Additional steps will be taken by the coalition as part of MCM-1 &2.

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

Name of MS4/Coalition BROOME COUNTY		N Y R 2	0 A 3 3 2
7. Evaluating Progress Toward Measu	irable Goals MCM 6		
Use this page to report on your progress a identified in your Stormwater Manageme III.C.1. Submit additional pages as needed	nt Program Plan (SWMI		
A. Briefly summarize the Measurable	Goal identified in the S	WMPP in this repo	rting period.
MEASUREABLE GOAL #6G is to take training to new County employees upon BTSC as part of MCM-1 and MCM-2, the and opportunities.	orientation. This goal w	ill be accomplished	in part by the
B. Briefly summarize the observations Goal.	that indicated the over	rall effectiveness of	this Measurable
This is a newly defined goal within MCM County staff as opposed to the general puperiod.			
C. How many times was this observation	on measured or evalua	-	g period? 0 samples/participants/events)
D. Has your MS4 made progress towar	rd this measurable goa		
E. Is your MS4 on schedule to meet the	e deadline set forth in t	he SWMPP?	O Yes • No
F. Briefly summarize the stormwater at the next reporting cycle (including a			_
Accomplishment of this goal is tied to G materials. The first step will be to create familiarize new employees with what the	and utilize and introduc	ctory power point pre	creating training sentation to

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

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

SPDES ID

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 a identified in your Stormwater Management Program Plan (SWMPIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
MEASUREABLE GOAL #6H is to maintain the County's exist as established and to keep these plans current with any changes in	
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
Existing SPCC plans have been reviewed for compliance with cur and all staff training at each facility has been completed during this the SPCC reports. During this reporting period 30 staff members	is reporting period as specified in
C. How many times was this observation measured or evaluate	ed in this reporting period? [
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in the	ne SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation schee	et the goals of this MCM during
Continue program as established tracking that 100% of staff traini within the SPCC plan documents. During this next reporting period all staff members at each facility or within each department that re-	od the County will develop a list of

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

_		SPDES ID
Name of MS4/Coalition	BROOME COUNTY	N Y R 2 0 A 3 3 2
7. Evaluating Progr	ress Toward Measurable Goals MCM (6
identified in your Sto	rt on your progress and project plans towarmwater Management Program Plan (SW ional pages as needed.	
A. Briefly summari	ze the Measurable Goal identified in th	e SWMPP in this reporting period.
and facilities within and to update good h	OAL #6I is to complete an updated and the MS4 boundaries, to develop facility spousekeeping criteria and develop specific ons within the County Government struct	pecific good housekeeping programs, programs for various departments
B. Briefly summari Goal.	ze the observations that indicated the o	overall effectiveness of this Measurable
boundary. The Cour	facilities, 4 County parks, and 1 County on the has developed and finalized good housegun specific facility mapping. Mapping	sekeeping documents for all of these
C. How many times	s was this observation measured or eval	1 9
D. Has your MS4 m	nade progress toward this measurable g	ex.: samples/participants/even goal during this reporting period?
E. Is your MS4 on s	schedule to meet the deadline set forth i	
•	ze the stormwater activities planned to ag cycle (including an implementation s	
	of the good housekeeping plans and reporting period, and facility mapping/survey	

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

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

SPDES ID

Name of MS4/Coalition 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 achieving measidentified in your Stormwater Management Program Plan (SWMPP), including r III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
MEASUREABLE GOAL #6J is to implements program tracking and record k accordance with the NYSDEC tracking system and forms so that the County will transition to this annual reporting method once it is implemented by the DEC.	
B. Briefly summarize the observations that indicated the overall effectivene Goal.	ss of this Measurable
This is a new program goal that has been established in the latest SWMPP update been implemented.	te and has not yet
C. How many times was this observation measured or evaluated in this repo	orting period? (ex.: samples/part1cipants/events)
D. Has your MS4 made progress toward this measurable goal during this re	
	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 the next reporting cycle (including an implementation schedule).	
This goal will be progressed in coordination with Goal #6I.	

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

	SPI	DES	ID						
Name of MS4/Coalition TIOGA COUNTY	N	Y	R	2	0	Α	0	4	7

Minimum Control Measure 6. Stormwater Management for Municipal Operations

 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

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

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.

Solf_Accessment

		Sen-Assessment			
			Operation/Activ	ity/Facilit	Y
]	<u>performed withi</u>	n the past	3
Operation/Activity/Facility	Addressed i	n SWMP?	years'	2	
Street Maintenance	• Yes	O No	Yes	O No	
Bridge Maintenance	• Yes	O No	• Yes	\circ No	
Winter Road Maintenance	• Yes	O No	• Yes	O No	
Salt Storage	• Yes	○ No	• Yes	O No	
Solid Waste Management		O No	• Yes	O No	
New Municipal Construction and Land Disturba	ince • Yes	O No	• Yes	O No	
Right of Way Maintenance	• Yes	O No	• Yes	O No	
Marine Operations	O Yes	● No	O Yes	No	
Hydrologic Habitat Modification	O Yes	● No	O Yes	No	
Parks and Open Space	O Yes	No	O Yes	No	
Municipal Building		O No	• Yes	O No	
Stormwater System Maintenance		O No	• Yes	O No	
Vehicle and Fleet Maintenance		O No	• Yes	O No	
Other	$\sim v$	● No	O Yes	No	

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

	SPDES ID	
Name of MS4/Coalition TIOGA COUNTY	NYR2	0 A 0 4 7
2. Provide the following information about municipal operations	good housekeep	ing programs:
O Parking Lots Swept (Number of acres X Number of times swept)	# 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.	
O Pesticide/Herbicide Applied	# Acres	
(Number of acres to which pesticide/herbicide was applied X Numb times applied to the nearest tenth.)	er of _	•
		-1mloruosa
3. How many stormwater management trainings have been providuring this reporting period?	aea to municipa	ar employees
autong was a Personal Learning		
4. What was the date of the last training?]/
5. How many municipal employees have been trained in this repo	orting period?	
6. What percent of municipal employees in relevant positions and stormwater management training?	d departments r	eceive %

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

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 7
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.	
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
-Received a Satisfactory rating NYS DEC on the MS4 Stormwal but notification and report was not received until 7/26/2013Tioga County Public Works continues to follow the best manage "Tioga County and Town of Owego Stormwater Management Puthrough April 31, 2015.	ement practices as defined in the rogram Plan", which is effective
B. Briefly summarize the observations that indicated the ove Goal.	rall effectiveness of this Measurable
No illicit discharges detected.	
C. How many times was this observation measured or evaluation	ited in this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goa	of 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
Continue to follow OSHA self audit recommendations conducte The NYS DEC Audit Report recommended conducting this audit	• •

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

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
On behalf of an individual MS4On 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

			dei tot mich within	the past 5
Operation/Activity/Facility	Addressed in	n SWMP?	<u>years?</u>	•
Street Maintenance	• Yes	O No	• Yes	O No
Bridge Maintenance	O Yes	● No	O Yes	No
Winter Road Maintenance		○ No	• Yes	O No
Salt Storage	• Yes	○ No	• Yes	\bigcirc No
Solid Waste Management		● No	O Yes	No
New Municipal Construction and Land Disturba	nce • Yes	○ No	• Yes	O No
Right of Way Maintenance	O Yes	● No	O Yes	No
Marine Operations		● No	○ Yes	No
Hydrologic Habitat Modification	○ Yes	● No	O Yes	No
Parks and Open Space	-	○ No	● Yes	O No
Municipal Building		○ No	● Yes	O No
Stormwater System Maintenance	• Yes	O No	• Yes	O No
Vehicle and Fleet Maintenance		O No	• Yes	O No
Other	$\cap x_{-}$	● No	O Yes	No

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

	SPDES ID					
Name of MS4/Coalition City of Binghamton	N Y R	2 0	A	3	4	1
2. Provide the following information about municipal operations	good housekee	ping	g pr	ogr	'an	ıs:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres					1
• Streets Swept (Number of miles X Number of times swept)	# Miles			8	0	0
● Catch Basins Inspected and Cleaned Where Necessary	#			6	0	8
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#			\Box		4
	# T L a			$\overline{}$	1	
Phosphorus Applied In Chemical Fertilizer	# Lbs.				1	0
● Nitrogen Applied In Chemical Fertilizer	# Lbs.				3	0
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Numb 	# Acres			0].[0
times applied to the nearest tenth.)	CI 01					
3. How many stormwater management trainings have been provi	ded to municip	al e	mpl	oye	es	
during this reporting period?						3
4. What was the date of the last training?]/		\neg		
_		_' '			J	
5. How many municipal employees have been trained in this repo	rting period?				1	2
6. What percent of municipal employees in relevant positions and	l departments :	·ecei	ve			
stormwater management training?	•			6	9	%

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

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 NYR20A341
7. Evaluating Prop	gress Toward Measurable Goals MCM 6
identified in your St	ort on your progress and project plans toward achieving measurable goals tormwater Management Program Plan (SWMPP), including requirements in Part itional pages as needed.
A. Briefly summar	rize the Measurable Goal identified in the SWMPP in this reporting period.
impact of mowing/l equipment maintena hazardous / waste m	all municipal employees whose operations impact storm-water. Reduce the landscaping through the use of best management practices. Perform vehicle and ance / washing according to paln, to reduce impact of stormwater. Prevent naterial from impaction stormwater through proper use / storage / disposal estreet sweeping and catchbasin cleaning operations.
B. Briefly summar Goal.	rize the observations that indicated the overall effectiveness of this Measurable
800 miles of streets	swept, and 608 catch basins cleaned during reporting period.
C. How many time	es was this observation measured or evaluated in this reporting period?
D. Has your MS4 n	ex.: samples/participants/ev made progress toward this measurable goal during this reporting period?
E. Is your MS4 on	● Yes ○ No schedule to meet the deadline set forth in the SWMPP? ● Yes ○ No
•	rize the stormwater activities planned to meet the goals of this MCM during ng cycle (including an implementation schedule).
	s available. Continue the use of BMPs in mowing/landscaping operations. od house keeping procedures to reduce the impact of vehicle/equipment ashing.

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

		SPI	DES	ID						
Name of MS4/Coalition	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

Operation/Activity/FacilityAddressed in SWMP?years?Street Maintenance• YesO No• YesO NoBridge Maintenance• YesO No• YesO NoWinter Road Maintenance• YesO No• YesO NoSalt Storage• YesO No• YesO NoSolid Waste Management• YesO No• YesO NoNew Municipal Construction and Land Disturbance• YesO No• YesO NoRight of Way MaintenanceO YesO NoO YesO NoMarine OperationsO YesO NoO YesO NoHydrologic Habitat Modification• YesO No• YesO NoParks and Open Space• YesO No• YesO NoMunicipal Building• YesO No• YesO NoStormwater System Maintenance• YesO No• YesO NoVehicle and Fleet Maintenance• YesO No• YesO NoOtherO YesO NoO YesO No				periorinea within	THE DASE 2
Bridge Maintenance	Operation/Activity/Facility	Addressed in	SWMP?	<u>years?</u>	
Winter Road Maintenance. Ves ONo Salt Storage. Ves ONo Yes ONo Solid Waste Management. Ves ONo Yes ONo New Municipal Construction and Land Disturbance. Right of Way Maintenance. OYes ONo Marine Operations. OYes ONo Yes ONo Yes ONo Yes ONo Yes ONo Yes ONo Mydrologic Habitat Modification. Parks and Open Space. Yes ONo	Street Maintenance	• Yes	O No	• Yes	O No
Winter Road Maintenance. Yes O No Yes O No Salt Storage. Solid Waste Management. Yes O No Yes O No Yes O No New Municipal Construction and Land Disturbance. Right of Way Maintenance. O Yes O No O O Yes O No O O Yes O No O O Yes O No O O Yes O No O O O O O O O O O O O O O O O O O	Bridge Maintenance	• Yes	O No	• Yes	O No
Solid Waste Management. Solid Waste Management. Wes ONo New Municipal Construction and Land Disturbance. Right of Way Maintenance. OYes ONo OYes ONo Marine Operations. Hydrologic Habitat Modification. Parks and Open Space. Wes ONo Yes ONo			O No	• Yes	O No
Solid Waste Management.	Salt Storage	• Yes	O No	• Yes	O No
Right of Way Maintenance			O No	• Yes	O No
Marine Operations Hydrologic Habitat Modification Parks and Open Space Municipal Building Yes O No O No	New Municipal Construction and Land Disturbar	ice 🛡 Yes	O No	Yes	O No
Marine Operations. O Yes O No O Yes O No Hydrologic Habitat Modification. Parks and Open Space. Municipal Building. Yes O No Yes O No Municipal Building. Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No	Right of Way Maintenance	O Yes	O No	O Yes	O No
Hydrologic Habitat Modification. Parks and Open Space. Municipal Building. Yes O No Yes O			O No	O Yes	$O N_0$
Parks and Open Space Municipal Building Yes O No			O No	✓ Yes	O No
Municipal Building Stormwater System Maintenance Yes O No Yes O No Yes O No Yes O No Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O No O Yes O Yes O No O Yes O Yes O No O Yes O Yes O No O Yes O	•		O No	Yes	O No
Stormwater System Maintenance	• -	4	O No	• Yes	O No
Vehicle and Fleet Maintenance • Yes O No • Yes O No			O No ,	• Yes	O No
OV ON ON	•		O No	• Yes	O No
	•	O 17	O No	O Yes	O No

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

_ 	SPDES ID
Name of MS4/Coalition Town of Binghamton	N Y R 2 0 A 0 0 9
· —	
2. Provide the following information about municipal operation	ns good housekeeping programs:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres 2
• Streets Swept (Number of miles X Number of times swept)	# Miles 3 0
Catch Basins Inspected and Cleaned Where Necessary	# 2 0 0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	# 0
hisported and Cicaned where recessary	
Phosphorus Applied In Chemical Fertilizer	# Lbs. 0
Nitrogen Applied In Chemical Fertilizer	# Lbs. 0
Pesticide/Herbicide Applied Obserbage Secure to which posticide/herbicide was emplied V Num	# Acres 0.
(Number of acres to which pesticide/herbicide was applied X Nun times applied to the nearest tenth.)	loct of
2. Have many stars and the many general trainings have been ave	wided to municipal amployees
3. How many stormwater management trainings have been produring this reporting period?	vided to indincipal employees
4. What was the date of the last training?	0 1 / 2 1 / 2 0 1 5
5. How many municipal employees have been trained in this re	porting period?
6. What percent of municipal employees in relevant positions a	nd departments receive
stormwater management training?	$\begin{bmatrix} 1 & 0 & 0 \end{bmatrix}$ %

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

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

Name of MS4/Coalition Town of Binghamton	SPDES ID 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 (SWMIII.C.1. Submit additional pages as needed.	
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 hat Eight additional training elements were covered. Town Board reviewed film on Stormwater Management in December 1.	
C. How many times was this observation measured or evaluate	ted in this reporting period?
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/event during this reporting period?
2. Mas John Mas I made progress to that a measurable game	● 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	_
Continue training and proper procedures. Implement capital improvement projects.	

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

O No

O No • Yes

Name of MS4/Coalition Town of Chenengo		N	Y R 2 0 1	A 1 2 7
Minimum Control Measure 6. Stor	rmwater Mana	ngement for	Municipal (Operati <u>ons</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/f 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.	em. For each open the MS4's/Coaself-assessment performed to: 1) is operations and d 3) identify the best open to the second of t	eration/facility dition's Storm has been perfo determine the I facilities; 2) o municipal ope	vindicate whe water Managormed during e sources of po evaluate the rations and fa	ther the ement the ollutants
		<u>O</u> 1	<u>Self-Assessi</u> peration/ <u>Activi</u>	
			rformed within	
Operation/Activity/Facility	<u>Addressed i</u>		<u>years?</u>	•
Street Maintenance		O No		O No
Bridge Maintenance		• No		• No
Winter Road Maintenance	• Yes	O No	• Yes	O No

Winter Road Maintenance..... • Yes

Salt Storage.....

Yes

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

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

	SPDES ID			
Name of MS4/Coalition Town of Chenengo	N Y R 2	0 A 1	2	7
2. Provide the following information about municipal operation	ons good housekeep	oing pro	grai	ns:
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	#		L O	0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#			2
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		1	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.			
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Nu times applied to the nearest tenth.)	# Acres []],	
3. How many stormwater management trainings have been pr	ovided to municipa	al empl	ovee	S
during this reporting period?	*			1
4. What was the date of the last training?	0 3 / 0 3	/ 2	0 1	5
5. How many municipal employees have been trained in this r	eporting period?			0
6. What percent of municipal employees in relevant positions stormwater management training?	and departments r	eceive	0 0]%

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

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

Name of MS4/Coalition Town of 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 toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.	
Continue to maintain a clean fleet, hydroseed exposed ares and ditches, control wasteful salt and sand application, as well as chemical applications (fertilizers, etc.). Staff training ongoing.	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.	
No noticeable runoff problems noted or reported associated within municipal facilities.	
C. How many times was this observation measured or evaluated in this reporting period?	
(ex.: samples/participants/eventure) D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes • O No	s)
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 improve on staff training and log of impovements. Possible IPM programs for parks and recreation.	

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

				SPL	JF2	Ш						
Name of MS4/Coalition	Town of Conklin			N	Y	R	2	0	Α	2	5	5

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
Dellatents of Concern to the MCA system. For each energtian/facility indicate whether the

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

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

		<u> 170</u>	eriormed within the past 3
Operation/Activity/Facility	Addressed i	n SWMP?	<u>years?</u>
Street Maintenance	• Yes	O No	• Yes O No
Bridge Maintenance	• Yes	O No	● Yes ○ No
Winter Road Maintenance		O No	● Yes O No
Salt Storage	• Yes	O No	• Yes O No
Solid Waste Management		● No	O Yes • No
New Municipal Construction and Land Disturba		O No	Yes O No
Right of Way Maintenance	• Yes	O No	● Yes ○ No
Marine Operations		• No	○ Yes • No
Hydrologic Habitat Modification	O Yes	• No	○ Yes • No
Parks and Open Space	• Yes	O No	● Yes O No
Municipal Building		O No	Yes ○ No
Stormwater System Maintenance		O No	● Yes O No
Vehicle and Fleet Maintenance		O No	• Yes O No
Other	A 17		● Yes ○ No

This report is being submitted for the reporting period ending March 9, 2015 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID			
Name of MS4/Coalition Town of Conklin	NYR2	0 A	2	5 5
2. Provide the following information about municipal operations	good housekeep	ing pr	ogra	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			4 1
Catch Basins Inspected and Cleaned Where Necessary	#			3 9
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#			6
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 [per of].[_
3. How many stormwater management trainings have been provi	ided to municipa	al emp	loye	es
during this reporting period?				2
4. What was the date of the last training?	11/06] / [2	0	1 4
5. How many municipal employees have been trained in this repo	orting period?			3
6. What percent of municipal employees in relevant positions and stormwater management training?	d departments r	eceive	0 (0]%

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

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

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

			2LT	<u>JES</u>	ענ		_					_
Name of MS4/Coalition T	IJOWN OF DICKINSON		N	Y	R	2	0	Α	1	4	3	
Tunio of Mo ir countries.		•										

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported	d (check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed t 	o this report?
Pollutants of Concern to the MS4 sys operation/facility has been addressed Program(SWMP) Plan and whether reporting period. A self-assessment is potentially generated by the permittee effectiveness of existing programs as	facility that contributes or may potentially contribute tem. For each operation/facility indicate whether the in the MS4's/Coalition's Stormwater Management a self-assessment has been performed during the s performed to: 1) determine the sources of pollutants e's operations and facilities; 2) evaluate the ad 3) identify the municipal operations and facilities in prevention and good housekeeping program, if it's
	Self-Assessment
	Operation/Activity/Facility performed within the past 3
0 " " " " " " " " " " " " " " " " " " "	-
Operation/Activity/Facility	Addressed in SWMP? years?
Street Maintenance	● Yes ○ No ● Yes ○ No
Bridge Maintenance	○ Yes • No ○ Yes • No
Winter Road Maintenance	

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

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

	SPDES ID		
Name of MS4/Coalition TOWN OF 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.		
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 er of		
3. How many stormwater management trainings have been providuring this reporting period?	ided to municipa	al employ	ees 6
4. What was the date of the last training?	12/00	/ 2 0	1 4
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?	d departments r	eceive	0 %

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

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

ame of MS4/Coalition TJOWN OF DICKINSON NYR20A143
. Evaluating Progress Toward Measurable Goals MCM 6
Ise 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 II.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.
3. 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 eatch basin and culvert cleaning.
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
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.

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

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

SPDES ID

O No

No

No

O_{No}

O No

O No

O_{No}

O No

O No ■ Yes

● No ○ Yes
● No ○ Yes

O No

■ Yes

○ No • Yes

O No ● Yes

O No O Yes

ATT. 1714			N Y R 2 0 A 1 4 9
Name of MS4/Coalition Village of Endicots			A 1 A 2 0 A 1 2 3
Minimum Control Measure 6. Stormwa	nter Mana	<u>gement f</u>	or Municipal Operations
The information in this section is being reported (check	k one):		
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this remains the contributed to the contr	eport?		
1. Choose/list each municipal operation/facility Pollutants of Concern to the MS4 system. For operation/facility has been addressed in the Program(SWMP) Plan and whether a self-are porting period. A self-assessment is perfor potentially generated by the permittee's operated effectiveness of existing programs and 3) id that will be addressed by the pollution prevent done already.	or each ope MS4's/Coal ssessment h rmed to: 1) rations and lentify the n	ration/faci ition's Sto as been po determine facilities; tunicipal (ility indicate whether the crimwater Management erformed during the the sources of pollutants 2) evaluate the operations and facilities ekeeping program, if it's
			Self-Assessment
			Operation/Activity/Facility performed within the past 3
O 11 14 11 14 17 17 1114 1	Addressed in	. COMMD?	years?
		O No	
Street Maintenance			O Yes ● No
Bridge Maintenance	-		Yes O No
Winter Road Maintenance	— —		• Yes O No
Salt Storage			Yes O No
Solid Waste Management New Municipal Construction and Land Disturbance			Yes O No

Right of Way Maintenance.....

Marine Operations..... O Yes

Hydrologic Habitat Modification..... ○ Yes
Parks and Open Space..... ❤ Yes

Municipal Building..... • Yes

Stormwater System Maintenance.....

Vehicle and Fleet Maintenance.....

■ Yes

Other..... O Yes

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

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

Name of MS4/Coalition Village of Endicott	N Y R 2 0 A 1 4 9
2. Provide the following information about municipal operat	ions good housekeeping programs:
Parking Lots Swept (Number of acres X Number of times swep	t) # Acres 1 0
• Streets Swept (Number of miles X Number of times swept)	# Miles 8 5
 Catch Basins Inspected and Cleaned Where Necessary 	# 100
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.
O 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 p	
during this reporting period?	
4. What was the date of the last training?	02/ / 2014
5. How many municipal employees have been trained in this	reporting period?
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments receive

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

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

<u>-</u>	SPDES ID
Name of MS4/Coalition Village of Endicott	N Y R 2 0 A 1 4 9
7. Evaluating Progress Toward Measurable Goals MCM 6	
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 S	WMPP in this reporting period.
Street Sweeping starts in April and continues until November or untemperatures prevail. Yard Waste is picked up once a week starting in April on Fridays.	1
B. Briefly summarize the observations that indicated the overa	all effectiveness of this Measurable
The Streets and Catch Basins are cleaner. Residents like the compost that is made from the leaves, wood ch	ip and solid mixture.
C. How many times was this observation measured or evaluat	20
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events
D. Has your MS4 made progress toward this incasurable goal	• Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the	• Yes O 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).
The Street Department is busy repairing, fixing and in some cases. Catch Basins were installed in areas that needed them. The Endicott Performing Arts building has a roof drain that was I System to stop their basement from flooding.	

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

Name of MS4/Coalition Town of Fenton		SPDES ID N Y R	2 0 A	0 7 8
Minimum Control Measure 6. Storm	water Manage	<u>ment for Muni</u>	<u>cipal O</u>	<u>perations</u>
The information in this section is being reported (cl	eck one):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to thi 	s report?			
1. Choose/list each municipal operation/faci Pollutants of Coucern to the MS4 system. operation/facility has been addressed in the Program(SWMP) Plan and whether a self-eporting period. A self-assessment is perpotentially generated by the permittee's of effectiveness of existing programs and 3 that will be addressed by the pollution pranot done already.	For each operate MS4's/Coalitical of the MS4's/Coalitical of the MS4's/Coalitical of the MS4's/Coalitical of the MS4's of	tion/facility indication/facility indication to been performed etermine the source cilities; 2) evaluations	ate whet Manage during t ces of po te the s and fac	her the ment he llutants cilities
			-Assessu	
				y/Facility the past 3
Operation/Activity/Facility	Addressed in S		years?	vite biles
Street Maintenance		No	Yes	O No
Bridge Maintenance	O Yes •	No	O Yes	No
Winter Road Maintenance	• Yes C	No	Yes	O No
Salt Storage	🖲 Yes - C	No		O No
Solid Waste Management	• Yes C	No	• Yes	O No

New Municipal Construction and Land Disturbance..

Yes

Right of Way Maintenance.

Yes

Marine Operations..... O Yes

Hydrologic Habitat Modification..... O Yes

Parks and Open Space..... • Yes

Municipal Building.....

Yes

Stormwater System Maintenance.....

Yes

Vehicle and Fleet Maintenance.....

Yes

Other..... O Yes

O No O Yes

O No ● Yes

• No O Yes
• No O Yes

O No _____ • Yes

O No • Yes

O No • Yes

O No • Yes

● No O Yes

No

O No

No

No

O No

O No

O No

O No

No

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

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

	SPDES ID		_
Name of MS4/Coalition Town of Fenton	NYR2	0 A 0	7 8
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		4 9
● Catch Basins Inspected and Cleaned Where Necessary	#		5 0
O 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 Numb times applied to the nearest tenth.)	# Acres er of	0	0.0
3. How many stormwater management trainings have been providuring this reporting period?	ded to municipa	l employ	ees
4. What was the date of the last training?	12/02	/ 4 0	1 4
5. How many municipal employees have been trained in this repo	orting period?		1 5
6. What percent of municipal employees in relevant positions and stormwater management training?	l departments r	eceive	4 %

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

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 Fenton		NYR2	0 A 0 7 8
7. Evaluating Prop	gress Toward Measurable Goal	s MCM 6		
identified in your St	ort on your progress and project pormwater Management Program tional pages as needed.	olans toward ach Plan (SWMPP)	hieving measurable , including require	goals nents in Part
A. Briefly summan	ize the Measurable Goal identi	fied in the SW	MPP in this repor	ting period.
Annual Training of	appropriate staff			
B. Briefly summan	rize the observations that indica	nted the overall	l effectiveness of t	his Measurable
TBD				
C. How many time	es was this observation measure	ed or evaluated		period? 0 samples/participants/events)
D. Has your MS4	made progress toward this mea	isurable goal d	luring this reporti	ng period? ● Yes ○ No
	schedule to meet the deadline			• Yes O No
F. Briefly summa the next report	rize the stormwater activities ping cycle (including an implem	lanned to meet entation sched	t the goals of this I ule).	MCM during
Training associated Elimination	d with Good Housekeeping Pract	ices and Illicit I	Discharge Detection	n and

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

SPDES ID

O No • Yes

O No • Yes

O No • Yes

O No O Yes

O No

O No

O No

O No

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 Operation/Activity/Facility Addressed in SWMP? Street Maintenance. Yes ONo Yes ONo Yes ONo Winter Road Maintenance. Yes ONo Yes ONo Salt Storage. Yes ONO Yes ONO New Municipal Construction and Land Disturbance. Yes ONO New Municipal Construction and Land Disturbance. Yes ONO New Municipal Construction and Land Disturbance. Yes ONO New Maintenance. Yes ONO Yes ONO New Maintenance. Yes ONO Yes ONO New Maintenance. Yes ONO Yes ONO New Maintenance. Yes ONO Yes ONO New Maintenance. Yes ONO Yes ONO New Maintenance. Yes ONO Yes ONO New Maintenance. Yes ONO Yes ONO New Maintenance. Yes ONO Yes ONO New Yes ONO Yes ONO New Yes ONO Yes ONO New Yes ONO Yes ONO New Yes ONO Yes ONO New Yes ONO Yes ONO New Yes ONO New Yes ONO Yes ONO New Yes ONO Yes ONO Yes ONO Yes ONO Yes ONO Yes ONO	Village of Johnson City		Į.	$ \mathbf{N} \mathbf{Y} \mathbf{R} 2 0 $	A 1 0 1
The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 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 Stornwater 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. Scif-Assessment Operation/Activity/Facility Addressed in SWMP? Street Maintenance. Oyes No Oyes Oyes Oyes No Oyes Oyes Oyes Oyes Oyes Oyes Oyes Oyes	Name of MS4/Coantion			N Y R Z O	AITOIT
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 housekceping program, if it's not done already. Self-Assessment Operation/Activity/Facility Addressed in SWMP? Street Maintenance. Yes O No Yes O No Winter Road Maintenance. Yes O No Salt Storage. Yes O No Yes O No Solid Waste Management. Yes O No Yes O No Yes O No New Municipal Construction and Land Disturbance. Yes O No O Yes O No O Yes O No New Municipal Construction and Land Disturbance. Yes O No O Yes O No Marine Operations. O Yes O No	Minimum Control Measure 6. Stormw	<u>ater Mana</u>	gement f	or Municipal (<u>Operations</u>
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	The information in this section is being reported (chec	ck one):			
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	O On behalf of a coalition	report?			
Operation/Activity/FacilityOperation/Activity/FacilityAddressed in SWMP?years?Street Maintenance• Yes • No • Yes • No	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 perf potentially generated by the permittee's operfectiveness of existing programs and 3) if that will be addressed by the pollution presents.	For each ope MS4's/Coal assessment l ormed to: 1) erations and dentify the r	eration/faci lition's Sto has been po determine facilities; nunicipal o	lity indicate who rmwater Manag erformed during the sources of p 2) evaluate the operations and fa	ement the ollutants
Operation/Activity/FacilityOperation/Activity/FacilityAddressed in SWMP?years?Street Maintenance• Yes • No• Yes • NoBridge Maintenance• Yes • No• Yes • NoWinter Road Maintenance• Yes • No• Yes • NoSalt Storage• Yes • No• Yes • NoSolid Waste Management• Yes • No• Yes • NoNew Municipal Construction and Land Disturbance• Yes • No• Yes • NoRight of Way Maintenance• Yes • No• Yes • NoMarine Operations• Yes • No• Yes • NoHydrologic Habitat Modification• Yes • No• Yes • No	·				
Operation/Activity/FacilityAddressed in SWMP?years?Street Maintenance• Yes				Self-Assess	ment
Street Maintenance	-			Operation/Activ	ity/Facility
Street Maintenance				Operation/Activ	ity/Facility u the past 3
Bridge Maintenance	Operation/Activity/Facility	Addressed i		Operation/Active performed within years?	ity/Facility u the past 3 ?
Winter Road Maintenance. Salt Storage. Solid Waste Management. New Municipal Construction and Land Disturbance. Right of Way Maintenance. Marine Operations. Hydrologic Habitat Modification.			O No	Operation/Active performed within years?	ity/Facility u the past 3 O No
Salt Storage	Street Maintenance	Yes	O No ● No	Operation/Active performed within years? • Yes O Yes	ity/Facility u the past 3 O No No
Solid Waste Management	Street MaintenanceBridge Maintenance	Yes O Yes	O No ● No O No	Operation/Active performed within years? • Yes • Yes • Yes • Yes	ity/Facility Ithe past 3 O No No No No
New Municipal Construction and Land Disturbance. Right of Way Maintenance. Marine Operations. Hydrologic Habitat Modification. New Municipal Construction and Land Disturbance. Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No	Street Maintenance Bridge Maintenance Winter Road Maintenance	• Yes • O Yes • Yes	O No ● No O No	Operation/Active performed within years? • Yes • Yes • Yes • Yes	ity/Facility u the past 3 O No No No O No O No
Right of Way Maintenance	Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage	Yes Yes Yes Yes Yes	O No O No O No O No	Operation/Active performed within years? • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No No No No No No No No No No No No No
Marine Operations	Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management	• Yes	O No ● No O No O No O No	Operation/Active performed within years? • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	ity/Facility In the past 3 O No No No No No No No No No No No No
Hydrologic Habitat Modification ○ Yes • No ○ Yes • No	Street Maintenance	Yes O Yes Yes Yes Yes Yes Yes Yes	O No	Operation/Active performed within years? • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	ity/Facility It the past 3 O No No No No No No No No No No No No No N
Parks and Open Space • Yes O No • Yes O No	Street Maintenance	• Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No	Operation/Active performed within years? • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No No No No No No No No No No No No No N
	Street Maintenance	• Yes • Yes • Yes • Yes • Yes • Yes nce. • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No O No	Operation/Active performed within years? O Yes O Yes O Yes Yes Yes Yes Yes Yes O Yes O Yes O Yes O Yes O Yes	ity/Facility In the past 3 O No No No No No No No No No No No No No N

Municipal Building....

Yes

Stormwater System Maintenance.

• Yes Vehicle and Fleet Maintenance.....

Yes

Other O Yes

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

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

	SPDES ID
Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
2. Provide the following information about municipal operati	ons good housekeeping programs:
• Parking Lots Swept (Number of acres X Number of times swept	# Acres 3
• Streets Swept (Number of miles X Number of times swept)	# Miles
 Catch Basins Inspected and Cleaned Where Necessary 	# 500
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	# 1 9
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 N times applied to the nearest tenth.)	# Acres
3. How many stormwater management trainings have been p during this reporting period?	rovided to municipal employees
4. What was the date of the last training?	04/07/2014
5. How many municipal employees have been trained in this	reporting period? 2 4
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments receive

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

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 c	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 6	
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 S	WMPP in this reporting period.
The Village continues to train employees regarding municipal oper contribute POCs to the MS4 system.	erations that could possibly
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
During this reporting period the street sweeper was utilized 552 h 528 hours for cleaning catchbasins, the loader/backhoe were utilized ditches and a total of 2112 manhours were utilized for this Measu markers are continued to be placed at catchbasins that state; "No during street re-construction projects CBs are replaced with casting the casting the construction projects CBs are replaced with casting the casti	rable Goal. Also, storm drainage Dumping Drains to River". Also,
C. How many times was this observation measured or evaluation	ted in this reporting period? 156 (ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in t	ihe SWMPP? • Yes • No
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).
The Village will continue to train employees responsible for mur potentially contribute to the MS4 system. The Village will conti sweeping, cathcbasin cleaning, creek/open ditch maintenance an markers.	nue its operations of street

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

		SPD	ES	ID		_				
Name of MS4/Coalition Town of Kirkwood	•	N	Y	R	2	0	A	0	7	2
Name of M24/Control										

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

			Dell 1x03e3011	
			Operation/Activit	
			performed within	the past 3
Operation/Activity/Facility	<u>Addressed</u> in	n SWMP?	<u>years?</u>	
Street Maintenance	• Yes		• Yes	O No
Bridge Maintenance	O Yes		O Yes	• No
Winter Road Maintenance	• Yes		• Yes	O No
Salt Storage		O No	• Yes	O No
Solid Waste Management	O Yes	● No	O Yes	No
New Municipal Construction and Land Disturbate		O No	• Yes	O No
Right of Way Maintenance	A 17	O No	• Yes	O No
Marine Operations	~ **	● No	O Yes	No
Hydrologic Habitat Modification	O Yes	● No	O Yes	No
Parks and Open Space	Yes	O No	• Yes	O No
Municipal Building		O No	• Yes	O No
Stormwater System Maintenance		O No	• Yes	O No
Vehicle and Fleet Maintenance	• Yes		● Yes	O No
		O No		O No
Other				

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

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

	SPDES ID
Name of MS4/Coalition Town of Kirkwood	N Y R 2 0 A 0 7 2
2. Provide the following information about municipal operations	good housekeeping programs:
 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
O 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 0 0
3. How many stormwater management trainings have been prov	ided to municipal employees
during this reporting period?	
4. What was the date of the last training?	111/06/2014
5. How many municipal employees have been trained in this rep	orting period?
6. What perceut of municipal employees in relevant positions an stormwater management training?	d departments receive

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID N|Y|R|2 $0 \mid A \mid 0$ Town of Kirkwood Name of MS4/Coalition 7. Evaluating Progress Toward Measurable Goals MCM 6 Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. Measurable goal is to reduce pollutants of concern through the use of good housekeeping programs. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. There has been a decrease in the incidences of flooding due to catch basin and culverts clogging. 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 **Yes** E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O No Yes F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern.

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

SPDF	2 IL	,					
Name of MS4/Coalition Town of Owego	R	2	0	Α	0	7	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

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

	5	SPDI	ES ID					
Name of MS4/Coalition Town of Owego		N	YR	2	0 2	A 0	7	9
2. Provide the following information about municipal operat	ious good	lho	usek	eepi	ing	prog	ran	ns:
Parking Lots Swept (Number of acres X Number of times swep	ot)	1	# Acr	es [<u>'</u>	1
• Streets Swept (Number of miles X Number of times swept)		;	# Mil	es [4	2
 Catch Basins Inspected and Cleaned Where Necessary 				# [5	4	0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 				# [4
O Phosphorus Applied In Chemical Fertilizer			# Lb	s. [
O Nitrogen Applied In Chemical Fertilizer			# Lb	s. [
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	lumber of	#	Acres].	
3. How many stormwater management trainings have been parting this reporting period?	provided (to n	nunic	ipa [l en	iplo;	yees	0
4. What was the date of the last training?	0	2	/ [1	2	/[2 0	1	4
5. How many municipal employees have been trained in this	reporting	g pe	riod:	?				0
6. What percent of municipal employees in relevant positions stormwater management training?	s and dep	arti	ment	s re		/ e	0	%

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

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

	SPDES ID
Name of MS4/Coalition Town of Owego	N Y R 2 0 A 0 7 9
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward ac identified in your Stormwater Management Program Plan (SWMPP) III.C.1. Submit additional pages as needed.	2
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
The Town of Owego will continue to provide training to municipal	employees.
B. Briefly summarize the observations that indicated the overal Goal.	I effectiveness of this Measurable
Broome Tioga Stormwater Coalition owned DVDs were borrowed personnel.	for use by highway department
C. How many times was this observation measured or evaluated	d in this reporting period? [
D. Has your MS4 made progress toward this measurable goal d	
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 next reporting cycle (including an implementation schedu	
The Town of Owego will conduct and annual review of monitoring each municipal department and revise if necessary.	and maintenance programs for

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

SPDES ID

Name of MS4/Coalition	VILLAGE OF PORT DICKI	NSON		N Y	R 2	0 A	0 8	0
Minimum Cont	trol Measure 6	<u>Stormwater</u>	Manageme	nt for M	unicip	al O	<u>oerat</u>	<u>ions</u>

On behalf of an individual MS4
 On behalf of a coalition
 How many MS4s contributed to this report?

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

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 Addressed in SWMP? years? Operation/Activity/Facility Street Maintenance..... 9 Yes O No • Yes O No ● No ○ Yes No Bridge Maintenance..... O Yes ● No ○ Yes No Winter Road Maintenance..... O Yes O No O No • Yes Salt Storage.....

Yes O No ● Yes O No Solid Waste Management.....

Yes No ○ Yes No New Municipal Construction and Land Disturbance.. O Yes O No ■ Yes O No Right of Way Maintenance..... ● No Yes No Marine Operations..... O Yes ● No ○ Yes No Hydrologic Habitat Modification..... O Yes Parks and Open Space.....

Yes O No Yes O No O No

■ Yes O No Municipal Building.....

Yes O No

■ Yes O No Stormwater System Maintenance..... • Yes O No O No ■ Yes Vehicle and Fleet Maintenance.....

Yes Other..... O Yes O No O Yes O No

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

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

	SPDES ID
Name of MS4/Coalition VILLAGE OF PORT DICKINSON	N Y R 2 0 A 0 8 0
2. Provide the following information about municipal operations	good housekeeping programs:
 Parking Lots Swept (Number of acres X Number of times swept) 	# Acres 2
• Streets Swept (Number of miles X Number of times swept)	# Miles 9
● Catch Basins Inspected and Cleaned Where Necessary	# 1 8
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#
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.)	per of # Acres
3. How many stormwater management trainings have been prov	ided to municipal employees
during this reporting period?	
4. What was the date of the last training?	12/0/2014
5. How many municipal employees have been trained in this rep	orting period?
6. What percent of municipal employees in relevant positions an stormwater management training?	d departments receive

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

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

SPDES ID

Name of MS4/Coalition	VILLAGE OF PORT DICKINSON	N Y R 2 0 A 0 8 0
7. Evaluating Pro	gress Toward Measurable Goals MCM 6	
identified in your St	ort on your progress and project plans towal tormwater Management Program Plan (SWI tional pages as needed.	rd achieving measurable goals MPP), including requirements in Part
A. Briefly summan	rize the Measurable Goal identified in the	SWMPP in this reporting period.
	NG; PARKING LOT CLEANING; LEAF I to reduce pollutants of concern through the	
B. Briefly summar Goal.	rize the observations that indicated the ov	verall effectiveness of this Measurable
TIMES EACH YEARE SWEPT AND	BASINS ARE CLEANED EACH EAR; AI ART; LEAVES ARE COLLECTED FROM KEPT CLEAN; WE DO NOT USE CHENT form reaching the streams and rivers by the	I DITCHES; ALL PARKING LOTS MICAL FERTERLIZER
C. How many time	es was this observation measured or eval	uated in this reporting period? (ex.: samples/participants/eve
D. Has your MS4	made progress toward this measurable g	
E. Is your MS4 on	schedule to meet the deadline set forth i	n the SWMPP? ● Yes ○ No
F. Briefly summar the next report	rize the stormwater activities planned to ing cycle (including an implementation so	meet the goals of this MCM during chedule).
	S ARE RECEIVING GOOD HOUSEKEER te good housekeeping programs and implen	

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

		SPL)ES	ш			_			
Name of MS4/Coalition Town of Union	N	Y	R	2	0	A	0	5	0	

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):				
On behalf of an individual MS4 On behalf of a condition				
On behalf of a coalition	1	1	Т	
How many MS4s contributed to this report?		1		

1. Choose/list each municipal operation/facility that coutributes 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 within	the past s
Operation/Activity/Facility	Addressed in	SWMP?	years?	
Street Maintenance	• Yes	O No	O Yes	No
Bridge Maintenance		○ No	O Yes	O No
Winter Road Maintenance	• Yes	O No	O Yes	No
Salt Storage		O No	O Yes	No
Solid Waste Management		O No	O Yes	No
New Municipal Construction and Land Disturba		O No	O Yes	No
Right of Way Maintenance	—	O No	O Yes	No
Marine Operations	O 17	O No	O Yes	O No
Hydrologic Habitat Modification		O No	O Yes	O No
Parks and Open Space	A 17	O No	O Yes	No
Municipal Building	- TT	O No	O Yes	No
Stormwater System Maintenance		O No	O Yes	No
Vehicle and Fleet Maintenance		O No	O Yes	No
Other	O 37	O No	O Yes	O No
O flive the contract of the co	. •			

	SPDES ID
Name of MS4/Coalition Town of Union	N Y R 2 0 A 0 5 0
2. Provide the following information about municipal operations	good housekeeping programs:
O Parking Lots Swept (Number of acres X Number of times swept)	# Acres
• Streets Swept (Number of miles X Number of times swept)	# Miles 9 9
Catch Basins Inspected and Cleaned Where Necessary	# 4 8 9
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#
Phosphorus Applied In Chemical Fertilizer	# Lbs. 7
Nitrogen Applied In Chemical Fertilizer	# Lbs. 9
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number applied to the nearest tenth.)	# Acres
3. How many stormwater management trainings have been prov during this reporting period?	ided to municipal employees
during this reporting period.	
4. What was the date of the last training?	0 2 / 0 4 / 2 0 1 5
5. How many municipal employees have been trained in this rep	orting period?
6. What percent of municipal employees in relevant positions an stormwater management training?	d departments receive

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

If submitting this form as part of a joint report on behalf of a coalition leave SFDES 1D blank.										
	Sì	DES	ID					_		
Town of Union	N	Y	R	2	0	Α	0	5	0	١

Name of MS4/Coalition	Town of Union	N Y R	2 0 A 0 5 0
7. Evaluating Pro	gress Toward Measurable Goals MCM	6	
identified in your St	oort on your progress and project plans tow tormwater Management Program Plan (SV itional pages as needed.	ard achieving measura /MPP), including requ	ible goals iirements in Part
A. Briefly summan	rize the Measurable Goal identified in t	ne SWMPP in this re	porting period.
Provided ewaste co disposal at landfill. Storm drain market	ollection and continue to participate in dru Continue to promote good housekeeping rs installed.	g collections to preven efforts at municipal fa	t improper acilities. 556
B. Briefly summa Goal.	rize the observations that indicated the	overall effectiveness (of this Measurable
Amount of e waste	collected. Amount of roads swept and sto	rm drains cleaned	
C. How many tim	es was this observation measured or ev	luated in this report	ing period?
D. II	made progress toward this measurable		x.: samples/participants/events arting period?
D. Has your M54	made progress toward this measurable	goar during this repe	● Yes ○ No
E. Is your MS4 or	n schedule to meet the deadline set forth	in the SWMPP?	O Yes ■ No
F. Briefly summa the next report	rize the stormwater activities planned t ling cycle (including an implementation	o meet the goals of th schedule).	
Increase staff train	ing on BMP and self evaluations. Install	torm drain markers.	

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

		SPD	ES	ID						
Name of MS4/Coalition	Town of Vestal	N	Y	R	2	0	Α	0	6	4

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
 On behalf of an individual MS4 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

		pertorn	ICU MILIII	i the past 5
Operation/Activity/Facility	Addressed in	n SWMP?	<u>years?</u>	<u>?</u>
Street Maintenance	• Yes	O No	. O Yes	No
Bridge Maintenance	• Yes	O No	. O Yes	No
Winter Road Maintenance		O No	O Yes	No
Salt Storage	• Yes	○ No	• Yes	O No
Solid Waste Management	• Yes	O No	O Yes	No
New Municipal Construction and Land Disturba	nce O Yes	● No	O Yes	No
Right of Way Maintenance	• Yes	O No	O Yes	No
Marine Operations	O Yes	● No	. O Yes	• No
Hydrologic Habitat Modification	O Yes	• No	. O Yes	No
Parks and Open Space	O Yes	● No	. O Yes	No
Municipal Building	● Yes	O No	. • Yes	O No
Stormwater System Maintenance	• Yes	O No	. • Yes	\circ No
Vehicle and Fleet Maintenance	• Yes	O No	• Yes	$O N_0$
Other	O Yes	● No	. O Yes	● No

	SPDES ID				
Name of MS4/Coalition Town of Vestal	NYR2	0 A	0	6	4
2. Provide the following information about municipal operation	s good housekeep	oing pr	ogı:	am	s:
O Parking Lots Swept (Number of acres X Number of times swept)	# Acres				2
O Streets Swept (Number of miles X Number of times swept)	# Miles			3	5
O Catch Basins Inspected and Cleaned Where Necessary	#				0
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#			2	8
O Phosphorus Applied In Chemical Fertilizer	# Lbs.				
O Nitrogen Applied In Chemical Fertilizer	# Lbs.			T	
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Num times applied to the nearest tenth.)	# Acres [].[
3. How many stormwater management trainings have been produring this reporting period?	vided to municipa	al emp	loye	$\neg \Gamma$	0
4. What was the date of the last training?		/			
5. How many municipal employees have been trained in this rep	oorting period?				0
6. What percent of municipal employees in relevant positions are stormwater management training?	ıd departments r	eceive	3 3	3 9	%

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

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

Name of MS4/Coalition Town of Vestal	SPDES ID 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 identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified iu the S	WMPP in this reporting period.
The Town of Vestal cleans catch basins each year and also provide	les brush and leaf pick up
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
the need to clean catch basin has lessen over the years, especially during winter storms	with elimination of sand spreading
C. How many times was this observation measured or evaluat	ed in this reporting period?
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events
20 1140 your 1120 / made progress toward this incastrable goal	• Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
continue to clean streets and catch basins	

Additional Wate	rshed Improvemen	t Strategy Best Mai	nagement Practices
The information in this section	n is being reported (check	cone):	
On behalf of an individual No On behalf of a coalition			
	4s contributed to this re	eport?	
MS4s must answer the qu	estions or check NA a	s indicated in the table	below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	<u> </u>	<u> </u>	-
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	Filosphorus
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus
Traditional Non-Land Use	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	2,3,5,86,10,11,12	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	-	2.2.5 (0 - 0)	Pathagana
Traditional Land Use	1,4,7a·d,9,10,11,12	2,3,5,6,8a,8b 2,3,5,6,8a,8b	Pathogens Pathogens
Traditional Non-Land Use Non-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	134,74-4,2	2,5,4,5,60,05,10,11,12	- Lattingeris
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	-	•	
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
1 Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,70-0,7,10,11,12	5,6,8a,8b,10,11,12	Pathogens

		SPL	ES ID		
Nai	me of MS4/Coalition TIOGA COUNTY	N	Y R 2	0 A 0	4 7
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (infr	astructui • Yes		ection O N/A
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report		nave beer	inspect	ed
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 for disturb five thousand square feet or more?	ges from Co	nstructio	n Activi	ties
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 Act the New York State Stormwater Design Manual Enhanced Standards?	s that disturl e NYS DEC ivities (GP-0	greater SPDES (-08-001),	than or General includii	
7a	a. Does your MS4/Coalition have a retrofitting program to represent the phosphorus/nitrogen/pathogen loading?	educe erosio	u or O Yes	O No	● N/A
7 b	o. How many projects have been sited in this reporting perio	od?			О
	e. What percent of the projects included in 7b have been con			ing perio	<u> </u> %
741	i. What percent of projects planned in previous years have t	ocen complet		Projects	% Planned
8 a	a.Has your MS4/Coalition developed and implemented a tur procedures policy that addresses proper fertilizer applicate lands?		ent practi cipally o	ices and	● N/A
81	b. Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper disposal of grass municipally owned lands?				• N/A

Name of MS4/Coalition TIOGA COUNTY	SPDES ID N Y R 2	0 A 0	0 4 7
9. Has your MS4/Coalition developed and implemented a program	m of native plan ○ Yes	ting?	• N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet was prohibiting goose feeding?			rties and • N/A
11. Does your MS4/Coalition have a pet waste bag program?	O Yes	O No	• N/A
12. Does your MS4/Coalition have a program to manage goose populations?	O Yes	O No	• N/A

Non-Traditional

Non-Traditional

Non-Traditional

Traditional Land Use Traditional Non-Land Use

Traditional Land Use

Traditional Non-Land Use

Oscawana Lake Watershed

LI 27 Embayments

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

N Y R 2 0 A 3 4 1

Pathogens and Nitrogen

Phosphorus

Phosphorus

Phosphorus

<u>Pathogens</u>

Pathogens

Pathogens

Name of MS4/Coalition City of Bi		N Y R 2 0 A 3 4 1							
Additional Watershed Improvement Strategy Best Management Practices									
The information in this section	n is being reported (check	c one):							
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? MS4s must answer the questions or check NA as indicated in the table below. 									
MS4 Description	Answer	Check NA	(POC)						
NYC EOII 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	2,3,4,5,86,10,11,12	Phosphorus						
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus						
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus						
Greenwood Lake Watershed	-	+	<u>-</u>						
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus						
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus						
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus						
Oyster Bay	-	-	-						
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens						
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens						
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens						
Peconic Estuary	-	-	<u>-</u>						
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						

1.	Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? • Yes	O No	O N/A
2.	Has 100% of the MS4/Coalition conveyance system been mapped in GIS? • Yes	O No	O N/A
	If N/A, go to question 3.	0110	0 1477
	If No, estimate what percentage of the conveyance system has been mapped so far.		%
	Estimate what percentage was mapped in this reporting period.		%

1,4,7a-d,8a,9

1,4,6,7a-d,8a,9

1,4,6,7a-d,8a,9

1,4,6,7a-d,8a,9

1.2.3.4.7a-d.9

1,2,3,4,7a-d,9,10,11,12

1,2,3,4,7a-d,9,10,11,12

2,3,4,5,86,10,11,12

2,3,5,86,10,11,12

2,3,5,8b,10,11,12

2,3,5,86,10,11,12

5.6.8a.8b.10.11.12

5,6,8a,8b

5,6,8a,8b

		SPDES	ID		
Nai	ne of MS4/Coalition City of Binghamton	N Y	R 2	0 A 3	3 4 1
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	•	ructur Yes	e) 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		e been	inspec 1 0	
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 fredisturb five thousand square feet or more?	ges from Const om construction	ructio	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 Acti the New York State Stormwater Design Manual Enhanced Standards?	that disturb gu NYS DEC SP vities (GP-0-08 Phosphorus R	reater (DES G -001),	than or Seneral includi	•
7a.	Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?		r Yes	• No	O N/A
7b.	How many projects have been sited in this reporting period	1?			0
7c.	What percent of the projects included in 7b have been com	pleted in this r	eporti	ng peri	od?
7d	.What percent of projects planned in previous years have b	een completed?	?		
			• No I	Projects	Planned
8a.	Has your MS4/Coalition developed and implemented a turn procedures policy that addresses proper fertilizer application lands?	on on municip			O N/A
8b	Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper disposal of grass of proper disposal of grass of the council to the council t	lippings and le	aves fi	rom	
	inunicipally owned lands?		Yes	\circ No	O N/A

Name of MS4/Coalition City of Binghamton	SPDES ID N Y R 2	0 A .	3 4 1
9. Has your MS4/Coalition developed and implemented a program	of native plan • Yes	ting? ○ No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste prohibiting goose feeding?			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	• No	O N/A

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

Name of MS4/Coalition Town of Bi	nghainton		SPDES ID N Y R 2 0 A 0 0 9				
Additional Watershed Improvement Strategy Best Management Practices							
The information in this section O On behalf of an individual M O On behalf of a coalition How many MS4 MS4s must answer the que	184 Is contributed to this re	eport? 1	le below.				
	· · · · · ·		(POC)				
MS4 Description NYC EOH Watershed	Answer	Check NA	1100				
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	<u> </u>		-				
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus				
Traditional Non-Land Use	I,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	1	2260, 1011 12	Phosphorus				
Traditional Land Use	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	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 Non-Land Use	1,4,7a-d,9,10,1 <u>1,12</u>	2,3,5,6,8a,8b	Pathogens				
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens				
Peconie Estuary	-	-					
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen				
Traditional Non-Land Use	I,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	2,3,5,86,10,11,12	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	2,3,5,85,10,11,12	Phosphorus				
L1 27 Embayments	122472 40101112	5,6,8a,8b	Pathogens				
Traditional Land Use Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens				
Non-Traditional 1. Does your MS4/Coalitiphosphorus/nitrogen/p 2. Has 100% of the MS4/Goalitiphosphorus/nitrogen/p If N/A, go to question 3.	12347a-d.9 on have an education athogens on waterbook Coalition conveyance	dies? system been mapped	O Yes ● No O N/A in GIS? ● Yes O No O N/A				
If No, estimate what per	centage of the conveya	nce system has been m	apped so far%				

Estimate what percentage was mapped in this reporting period.

8 0 %

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

		<u> </u>	PDES ID		
Na	me of MS4/Coalition Town of Binghamton] [1	N Y R 2	0 A 0	0 9
3.	Does your MS4/Coalition have a Stormwater Conveyance Stand Maintenance Plan Program?	System (in	ofrastructu O Yes	re) Insp O No	ection N/A
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report			inspec	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 Acti the New York State Stormwater Design Manual Enhanced Standards?	that distu NYS DE vities (GP	irb greater C SPDES (2-0-08-001),	than or General includi	
7a	Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?	educe eros	ion or O Yes	O No	• N/A
7b	How many projects have been sited in this reporting period	d?			0
7e.	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	een comp	leted?		\ %
			No	Projects	Planned
8a	Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper fertilizer applicate lands?	f manager ion on mu	ment practi micipally o O Yes	ces and wned • No	o n/a
8 b	Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper disposal of grass of municipally owned lands?				O N/A

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 progra	
	O Yes ● No O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet wa	aste on municipal properties and
prohibiting goose feeding?	O Yes No O N/A
11 December MCA/Co-Ration have a material at her management	OV ON- ONA
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?	O Yes ● No O N/A

Name of MS4/Coalition Town of Ch	ienengo		SPDES ID N Y R 2 0 A 1 2 7					
Additional Watershed Improvement Strategy Best Management Practices								
The information in this section	is being reported (check	one):						
 On behalf of an individual M On behalf of a coalition How many MS4 	1S4 4s contributed to this re	port?						
MS4s must answer the que	estions or check NA a	s indicated in the tabl	e 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 Phosphorus					
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	1 HOSPHOLUS					
Onondaga Lake Watershed Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	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	2,3,5,86,10,11,12	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	 		Pathogens					
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b 2,3,5,6,8a,8b	Pathogens					
Traditional Non-Land Use	1,4,7a-d,9,10,11,12 1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens					
Non-Traditional Peconic Estuary	1,4,7a-d,9	2,3,4,3,66,80,10,11,12	- Tumogens					
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	2,3,5,6,86	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	2,3,5,8b,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,10,1 <u>1,12</u>	Phosphorus					
LI 27 Embayments		5,6,8a,8b	Pathogens					
Traditional Land Use Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens					
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens					
1. Does your MS4/Coaliti phosphorus/nitrogen/p	ion have an education pathogens on waterboo	program addressing dies?	O Yes O No O N/A					
2. Has 100% of the MS4/ If N/A, go to question 3	-	system been mapped	in GIS? O Yes O No O N/A					
If No, estimate what per	centage of the conveya	ince system has been m	apped so far.					
Estimate what percentage	ge was mapped in this i	eporting period.						

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

Na	nme of MS4/Coalition Town of Chenengo		SPDES ID N Y R 2	0 A 1	2 7
3.	Does your MS4/Coalition have a Storand Maintenance Plan Program?	rmwater Conveyance	System (infrastructu O Yes	re) Insp O No	ection O N/A
4.	Estimate the percentage of on-site wa and maintained or rehabilitated as n			inspect	ted %
5.	Has your MS4/Coalition developed a NYSDEC SPDES General Permit for (GP-0-08-001) to reduce pollutants in disturb five thousand square feet or	r Stormwater Dischar n stormwater runoff f	ges from Construction	n Activi	ities
6.	Has your MS4/Coalition developed a runoff from new development and re equal to one acre that provides equivalent for Stormwater Discharges for the New York State Stormwater Des Standards?	edevelopment projects valent protection to th rom Construction Act	s that disturb greater e NYS DEC SPDES (ivities (GP-0-08-001).	than or General , includi	
7a	a. Does your MS4/Coalition have a reti phosphorus/nitrogen/pathogen load		educe erosion or O Yes	O No	O N/A
7b	b.How many projects have been sited i	in this reporting perio	d?		
	c. What percent of the projects include			ing peri	od?
7d	d.What percent of projects planned in	previous years have b		Projects	
8 a	a.Has your MS4/Coalition developed a procedures policy that addresses pro lands?		f management pract	ices and wned	O N/A
8 b	b.Has your MS4/Coalition developed a procedures policy that addresses pro municipally owned lands?				O N/A

	N Y R 2	0 A 1	2 7
9. Has your MS4/Coalition developed and implemented a program of		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?	O 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, $2 \begin{bmatrix} 0 & 1 \end{bmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition				SPDES ID				
The information in this section is being reported (check one): ● On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? MS4s must answer the questions or check NA as indicated in the table below. MS4 Description	N V D 2 0 3 0 7 9							
● On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? MS4s must answer the questions or check NA as indicated in the table below. MS4 Description	Additional Watershed Improvement Strategy Best Management Practices							
MS4s must answer the questions or check NA as indicated in the table below. MS4 Description	The information in this section	n is being reported (check	c one):					
MISA Description	 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 							
Traditional Land Use								
Traditional Land Use		Austre	CHERTIA	100				
Traditional Non-Land Use		12245672482860	101112	Phoenhorus				
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 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 2,3,5,8b,10,11,12 Phosphorus Greenwood Lake Watershed - - - Traditional Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Traditional Non-Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Non-Traditional 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,9,10,11,12 2,3,5,6,8a,8b Pathogens Peconic Estuary - - - Traditional Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Traditional Non-Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Traditional Non-Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Oscawana Lake Watershed - -		1,2,774-0,04,00,7	3,7,3,10,11,12	1 Hospitorus				
Traditional Non-Land Use		1670.480	234585101112	Phoenhorus				
Non-Traditional		1 ,, , ,						
Traditional Land Use								
Traditional Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Traditional Non-Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Non-Traditional 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Oyster Bay Traditional Land Use 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b Pathogens Traditional Non-Land Use 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b Pathogens Non-Traditional 1,4,7a-d,9,9 2,3,4,5,8a,8b,10,11,12 Pathogens Peconic Estuary - - - Traditional Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Traditional Non-Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Non-Traditional 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 Pathogens and Nitrogen 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		1,0,74-0,00,7	2,3,4,3,60,10,11,12	Thosphorus				
Traditional Non-Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Non-Traditional 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Oyster Bay - - - Traditional Land Use 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b Pathogens Traditional Non-Land Use 1,4,7a-d,9 2,3,4,5,8a,8b,10,11,12 Pathogens Peconic Estuary - - - Traditional Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Traditional Non-Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Non-Traditional 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 Pathogens and Nitrogen Oscawana Lake Watershed - - - Traditional Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Non-Traditional 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 Non-Traditional 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus <td></td> <td>146704800</td> <td>23585101112</td> <td>Phoenhorus</td>		146704800	23585101112	Phoenhorus				
Non-Traditional 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus								
Oyster Bay								
Traditional Land Use 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b Pathogens Traditional Non-Land Use 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b Pathogens Non-Traditional 1,4,7a-d,9 2,3,4,5,8a,8b,10,11,12 Pathogens Peconic Estuary - - - Traditional Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Traditional Non-Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Non-Traditional Land Use 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 Pathogens and Nitrogen 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 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		1,4,0,7a-0,6a,9	2,3,3,80,10,11,12	Filospilorus				
Traditional Non-Land Use 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b Pathogens Non-Traditional 1,4,7a-d,9 2,3,4,5,8a,8b,10,11,12 Pathogens Peconic Estuary Traditional Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Traditional Non-Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Non-Traditional 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 Pathogens and Nitrogen Oscawana Lake Watershed - - - Traditional Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Traditional Non-Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Non-Traditional 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus LI 27 Embayments - - - Traditional Land Use 1,2,3,4,7a-d,9,10,11,12 5,6,8a,8b Pathogens		1470 40 10 11 12	13569a9h	Dathagens				
Non-Traditional 1,4,7a-d,9 2,3,4,5,8a,8b,10,11,12 Pathogens								
Peconic Estuary								
Traditional Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Traditional Non-Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Non-Traditional 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 Pathogens and Nitrogen Oscawana Lake Watershed - - - Traditional Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Traditional Non-Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Non-Traditional 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus LI 27 Embayments - - - Traditional Land Use 1,2,3,4,7a-d,9,10,11,12 5,6,8a,8b Pathogens		1,4,78-0,7	2,3,4,3,08,00,10,11,12	Tattiogens				
Traditional Non-Land Use 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b Pathogens and Nitrogen Non-Traditional 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 Pathogens and Nitrogen Oscawana Lake Watershed - - - Traditional Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Traditional Non-Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Non-Traditional 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus LI 27 Embayments - - - Traditional Land Use 1,2,3,4,7a-d,9,10,11,12 5,6,8a,8b Pathogens		1 4 72 4 82 9 10 11 12	235686	Pathogens and Nitrogen				
Non-Traditional 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 Pathogens and Nitrogen								
Oscawana Lake Watershed - - - Traditional Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Traditional Non-Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus Non-Traditional 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 Phosphorus LI 27 Embayments - - - Traditional Land Use 1,2,3,4,7a-d,9,10,11,12 5,6,8a,8b Pathogens		1 2 2 2 2 2 2 2						
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 1,4,6,7a-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		1 4 6 7a-d 8a 9	23585101112	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				 				
LI 27 Embayments -								
<u>Traditional Land Use</u> 1,2,3,4,7a-d,9,10,11,12 5,6,8a,8b <u>Pathogens</u>			2,5,5,5,5,11,12	- Insophorus				
		1 2 3 4 72-4 9 10 11 12	5 6 8a 8h	Pathogens				
Traditional Non-Land Lise	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				-				

Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes C	O No	O N/A
If N/A, go to question 3.	0 110	0 1001
If No, estimate what percentage of the conveyance system has been mapped so far.		<u></u> %
Estimate what percentage was mapped in this reporting period.	1	5 %

1. Does your MS4/Coalition have an education program addressing impacts of

phosphorus/nitrogen/pathogens on waterbodies?

2.

		SPDE	SID		
Nar	me of MS4/Coalition Town of Fenton	מו	(R 2	0 A 0	7 8
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (infra	structur • Yes	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 report	ystems that he ting period?	avc been	inspect 1 0	
5.	Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Dischar (GP-0-08-001) to reduce pollutants in stormwater runoff for disturb five thousand square feet or more?	ges from Con	structio	n Activi	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 Act the New York State Stormwater Design Manual Enhanced Standards?	s that disturb e NYS DEC S ivities (GP-0-	greater SPDES (08-001),	than or Seneral iucludi	
7a	. Does your MS4/Coalition have a retrofitting program to r phosphorus/nitrogen/pathogen loading?	educe erosion	or O Yes	• No	O N/A
7 b	. How many projects have been sited in this reporting perio	od?			0
7c	. What percent of the projects included in 7b have been con	npleted in thi	s report	ing peri	od?
76	l. What percent of projects planned in previous years have l	been complete	ed?		%
			No	Projects	Planned
82	a. Has your MS4/Coalition developed and implemented a tur procedures policy that addresses proper fertilizer applica lands?	rf manageme tion on munic	nt practi cipally o • Yes	wned	O N/A
81	o. Has your MS4/Coalition developed and implemented a tu procedures policy that addresses proper disposal of grass municipally owned lands?	rf manageme clippings and	nt pract d leaves • Yes	ices and from O No	I O N/A

Town of Fenion	N Y R 2	0 A C	7 8				
Name of MS4/Coalition Town of Fenton	<u> </u>	• •	-1				
9. Has your MS4/Coalition developed and implemented a program of native planting? O Yes O No N/A							
	O Yes	O 140	AWI				
10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and							
prohibiting goose feediug?	• Yes	O No	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, $\begin{bmatrix} 2 & 0 & 1 & 5 \end{bmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of Un	ilon		SPDES ID A 0 5 0 N Y R 2 0				
Additional Watershed Improvement Strategy Best Management Practices							
The information in this section is being reported (check one):							
The information in this acciton is come reported (effect one).							
On behalf of an individual MOn behalf of a coalition	184						
How many MS4	ls contributed to this re	port?					
,							
MS4s must answer the que	estions or check NA as	s indicated in the table	e below.				
MS4 Description	Answer	Check NA	(POC)				
NYC EOII 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		2,3,4,5,86,10,11,12	Phosphorus				
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus				
Traditional Non-Land Use Non-Traditional	1,6,7a- <u>d,8a,9</u> 1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus				
Greenwood Lake Watershed	1,0,74*0,00,7	2,3,4,3,66,10,11,12	-				
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	2,3,5,8b,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	 		Pathagan and Mitagan				
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen 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 Oscawana Lake Watershed	1,4,7a-d,8a,9	2,3,4,3,80,10,11,12	1 amogens and 14thogen				
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	2,3,5,8b,10,11,12	Phosphorus				
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus				
LI 27 Embayments		<u>-</u>					
Traditional Land Use	1,2,3,4,7 <u>a-d,9,10,11,12</u>	5,6,8a,8b	Pathogens				
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11 <u>,12</u>	5,6,8a,8b	Pathogens				
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens				
1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? ○ Yes ○ No ○ N/A							
2 Han 1000/ aftha MEA/Coalition conveyance greatern been manual in CYC?							
2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? ● Yes ○ No ○ N/A							
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.

		SPDES ID		
Na	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 and Maintenance Plan Program?	System (infrastructu O Yes	re) Insp • No	ection O N/A
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report		n inspec	ted %
5.	Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Dischar (GP-0-08-001) to reduce pollutants in stormwater runoff for disturb five thousand square feet or more?	ges from Construction	on 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 Active 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	•
7a	. Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?	educe erosion or O Yes	• No	o n/a
7 b	.How many projects have been sited in this reporting perio	d?		
	. What percent of the projects included in 7b have been con		ting peri	iod? %
			Projects	
8a	Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper fertilizer applicat lands?			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?			I O n/a

Name of MS4/Coalition Town of Union	N Y R 2 0 A 0 5 0
9. Has your MS4/Coalition developed and implemented a program	m of native planting?
7. Has your 19154/Coantion developed and implemented a program	O Yes ● No O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet wa	este on municinal properties and
prohibiting goose feeding?	O Yes ● No 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