

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2016

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 6

Name of MS4

SPDES ID
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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

| |
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| City of Binghamton |
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SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

| | | |
|---------------|----|-----------|
| First Name | MI | Last Name |
| R i c h a r d | C | D a v i d |

| |
|-----------|
| Title |
| M a y o r |

| |
|-----------------------------|
| Address |
| 3 8 H a w l e y S t r e e t |

| | | |
|---------------------|-------|-------------|
| City | State | Zip |
| B i n g h a m t o n | N Y | 1 3 9 0 1 - |

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| eMail |
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| | |
|---------------------------|-------------|
| Phone | County |
| (6 0 7) 7 7 2 - 7 0 0 1 | B r o o m e |

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

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

For each contact, select all that apply:

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

First Name

R a y

MI

L

Last Name

S t a n d i s h

Title

C i t y E n g i n n e e r

Address

3 8 H a w l e y S t

City

B i n g h a m t o n

State

N Y

Zip

1 3 9 0 1 -

eMail

r l s t a n d i s h @ c i t y o f b i n g h a m t o n . c o m

Phone

(6 0 7) 7 7 2 - 7 0 0 7

County

B r o o m e

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4 City of Binghamton

SPDES ID
N Y R 2 0 A 3 4 1

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5. Report Preparer (Consultants may provide company name in the space provided).

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

For each contact, select all that apply:

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

First Name MI Last Name

D i a n a L D a v e n p o r t

Title
E n g i n e e r T e c h n i c i a n

Address
3 8 H a w l e y S t

City State Zip

B i n g h a m t o n N Y 1 3 9 0 1 -

eMail
r l s t a n d i s h @ c i t y o f b i n g h a m t o n . c o m

Phone County

(6 0 7) 7 7 2 - 7 0 0 7 B r o o m e

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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| Town of Binghamton |
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Section 2 - Contact Information

Important Instructions - Please Read

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

For each contact, select all that apply:

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

First Name

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4:

SPDES ID
N Y R 2 0 A 0 0 9

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name: J o h n MI: P Last Name: M a s t r o n a r d i

Title: R e p o r t P r e p a r e r

Address: 1 3 S o u t h W a s h i n g t o n S t r e e t

City: B i n g h a m t o n State: N Y Zip: 1 3 9 0 3 -

eMail: j m a s t r o n a r d i @ g r i f f i t h s e n g i n e e r i n g

Phone: (6 0 7) 7 2 4 - 2 4 0 0 County: B r o o m e

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2015

Name of MS4 TOWN OF DICKINSON

SPDES ID
N Y R 2 0 A 1 4 3

Section 2 - Contact Information

Important Instructions - Please Read

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

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
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If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

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

First Name MI Last Name
M I C H A E L M A R I N A C C I O

Title
S U P E R V I S S O R

Address
5 3 1 O l d F r o n t S t r e e t

City State Zip
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eMail
M M A R I N A 1 9 1 @ A O L . C O M

Phone County
(6 0 7) 7 2 3 - 9 4 0 1 B r o o m e

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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SPDES ID

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Section 2 - Contact Information

Provide contact information for *all* of the following contacts:

1. The Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c.).
3. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
4. Report Preparer (Consultants may provide company name in the space provided).

Submit a separate sheet for each contact.

For each contact, select all that apply:

- Signatory Authority (choose one of the following)
 - Executive Officer or Ranking Elected Official
 - Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

| First Name | MI | Last Name |
|------------|----|-----------|
| K E N T | D | R A P P |

| Title |
|---------------------------------|
| E N G I N E E R I N G A I D E |

| Address |
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| City | State | Zip |
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| Phone | County |
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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID
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Section 2 - Contact Information

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

First Name MI Last Name

Title

Address

City State Zip

eMail

Phone County

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID

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- Report Preparer

First Name MI Last Name

Title

Address

City State Zip -

eMail

Phone County

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2015

Name of MS4

SPDES ID
N Y R 2 0 A 0 7 2

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

First Name MI Last Name

Title

Address

City State Zip

eMail

Phone County

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID
N Y R 2 0 A 0 7 2

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

First Name MI Last Name

Title

Address

City State Zip

eMail

Phone County

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID

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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.

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For each contact, select all that apply:

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

First Name MI Last Name

Title

Address

City State Zip

eMail

Phone County

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID

Section 2 - Contact Information

Important Instructions - Please Read

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

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
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For each contact, select all that apply:

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

First Name MI Last Name

Title

Address

City State Zip

eMail

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4 BROOME COUNTY

SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
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For each contact, select all that apply:

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

First Name J O H N MI M Last Name B E R N A R D O

Title D E P U T Y C O U N T Y E X E C U T I V E

Address 6 0 H A W L E Y S T R E E T - P O B O X 1 7 6 6

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MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

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Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? Yes No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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Partner/Coalition Name (con't.) SPDES Partner ID - If applicable

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Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G? Yes No

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

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Additional tasks/responsibilities

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

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MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

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Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? Yes No

If Yes, complete information below.

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If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? Yes No

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

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- MM5

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- MM6

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Additional tasks/responsibilities

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

| |
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MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID

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| N | Y | R | 2 | 0 | C | 0 | 0 | 2 |
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Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? Yes No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Partner/Coalition Name (con't.) SPDES Partner ID - If applicable

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Address

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City State Zip

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eMail

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Phone
 () -

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? Yes No

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

- MM1
- MM2
- MM3
- MM4
- MM5
- MM6

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? Yes No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

Address

City

State Zip

-

eMail

Phone

() -

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G? Yes No

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

MM1 /

MM2 /

MM3

MM4

MM5

MM6

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4 TIOGA

SPDES ID
N Y R 2 0 A 0 4 7

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? Yes No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name
T O W N O F O W E G O H I G H W A Y D E P T

Partner/Coalition Name (con't.)
SPDES Partner ID - If applicable
N Y R 2 0 A 0 7 9

Address
7 0 D E L P H I N E S T R E E T

City State Zip
O W E G O N Y 1 3 8 2 7 -

eMail
m c l a r k @ t o w n o f o w e g o . c o m

Phone
(6 0 7) 6 8 7 - 2 6 4 1

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? Yes No

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

- MM1
- MM2
- MM3 c a t c h b a s i n m a i n t . & i n s p e c t .
- MM4
- MM5
- MM6

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 6

Name of MS4

SPDES ID
N Y R 2 0 A 3 4 1

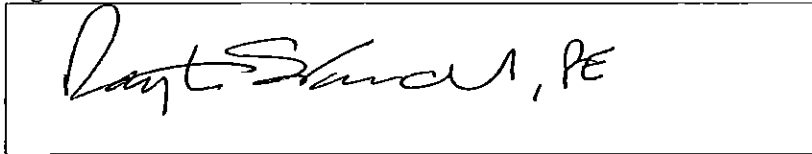
Section 4 - Certification Statement


"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 MI Last Name

Title (Clearly print title of individual signing report)

Signature


Date / / 

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4: Town of Binghamton

SPDES ID
N Y R 2 0 A

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: Timothy Last Name: Whitesell MI: P.

Title (Clearly print title of individual signing report): Town Supervisor

Signature: [Handwritten signature of Timothy P. Whitesell]

Date: 03 / 22 / 2016

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID
N Y R 2 0 A 2 5 5

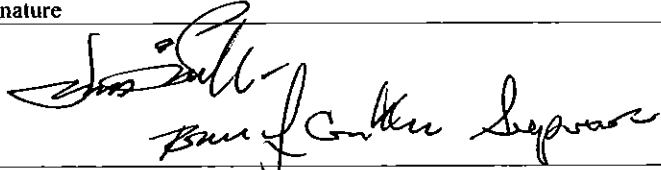
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First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature


Date
0 3 / 2 2 / 2 0 1 6

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 6

Name of MS4

SPDES ID
N Y R 2 0 A 0 7 8

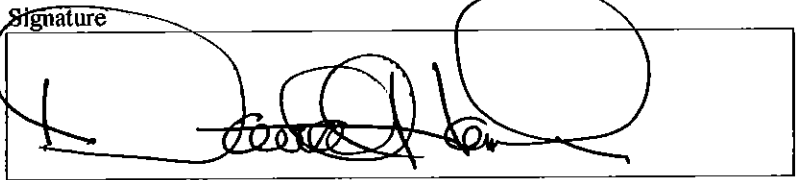
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First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature 

Date

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID
N Y R 2 0 A 1 0 1


Section 4 - Certification Statement

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First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature


Date
0 4 / 2 8 / 2 0 1 6

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

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

MS4 Municipal Compliance Certification(MCC)-Form

MCC form for period ending March 9, 2016

Name of MS4

Town of Kirkwood

SPDES ID

N Y R 2 0 A 0 7 2

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

G o r d o n

MI

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Last Name

K n i f f e n

Title (Clearly print title of individual signing report)

S u p e r v i s o r

Signature



Date

0 3 / 2 2 / 2 0 1 6

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID

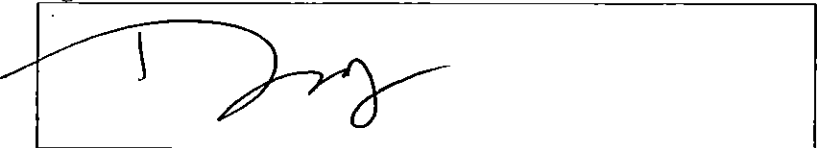
Section 4 - Certification Statement

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First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature


Date / /

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID

N Y R 2 0 A 0 5 0

Section 4 - Certification Statement

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First Name

R O S E

MI

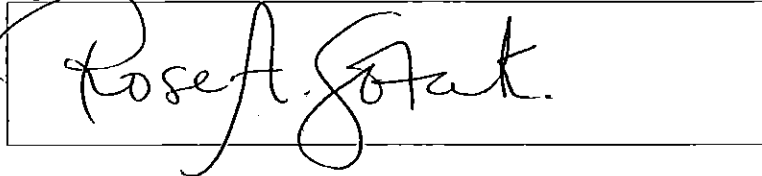
Last Name

S O T A K

Title (Clearly print title of individual signing report)

S U P E R V I S O R

Signature



Date

05 / 04 / 2016

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 6

Name of MS4

SPDES ID
N Y R 2 0 A 0 6 4

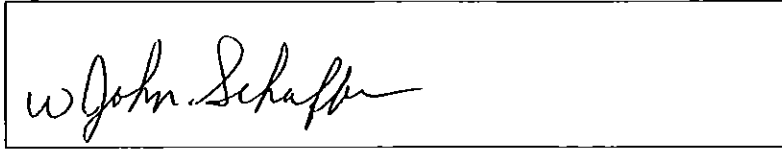
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First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature


Date

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID
N Y R 2 0 A 3 3 2


Section 4 - Certification Statement

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First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature 

Date

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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SPDES ID

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Section 4 - Certification Statement

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

First Name

| | | | | | | | | | | | | | | | |
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 MI

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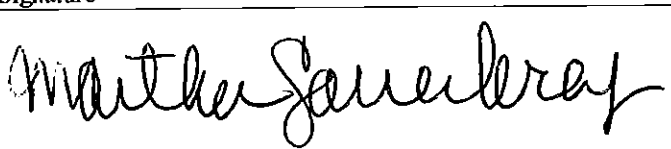
 Last Name

| | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|--|--|--|--|--|--|--|
| S | A | U | E | R | B | R | E | Y | | | | | | | |
|---|---|---|---|---|---|---|---|---|--|--|--|--|--|--|--|

Title (Clearly print title of individual signing report)

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|--|---|---|---|---|---|---|--|---|---|---|---|---|---|---|---|---|---|---|--|---|---|---|---|---|--|--|--|--|
| T | I | O | G | A | | C | O | U | N | T | Y | | L | E | G | I | S | L | A | T | U | R | E | | C | H | A | I | R | | | | |
|---|---|---|---|---|--|---|---|---|---|---|---|--|---|---|---|---|---|---|---|---|---|---|---|--|---|---|---|---|---|--|--|--|--|

Signature

| |
|---|
|  |
|---|

Date

| | | | | | | | | | |
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| 0 | 5 | / | 0 | 4 | / | 2 | 0 | 1 | 6 |
|---|---|---|---|---|---|---|---|---|---|

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

APPROVED
AS TO FORM BY
TIOGA COUNTY ATTORNEY

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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**

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | C | 0 | 0 | 2 |
|---|---|---|---|---|---|---|---|---|

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

Construction Site Operators Trained

Trained

| | | | | |
|--|--|---|---|---|
| | | 1 | 8 | 2 |
|--|--|---|---|---|

Direct Mailings

Mailings

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

Kiosks or Other Displays

Locations

| | | | | |
|--|--|---|---|--|
| | | 1 | 8 | |
|--|--|---|---|--|

List-Serves

In List

| | | | | |
|--|--|---|---|---|
| | | 5 | 5 | 1 |
|--|--|---|---|---|

Mailing List

In List

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

Newspaper Ads or Articles

Days Run

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

Public Events/Presentations

Attendees

| | | | | |
|--|---|---|---|---|
| | 2 | 2 | 0 | 2 |
|--|---|---|---|---|

School Program

Attendees

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

TV Spot/Program

Days Run

| | | | | |
|--|--|--|---|---|
| | | | 4 | 2 |
|--|--|--|---|---|

Printed Materials:

Total # Distributed

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

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

| | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| m | u | n | i | c | i | p | a | l | o | f | f | i | c | e | s | | | |
| p | a | r | t | n | e | r | o | r | g | a | n | i | z | a | t | i | o | n |
| | | | | | | | | | | | | | | | | | | |
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Other:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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**

SPDES ID
NYR 20C002

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

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http://www.broometiogastormwater.com/municipalities

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http://www.broometiogastormwater.com/residents

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http://www.gobroomecounty.com/solidwaste/hazwaste

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http://www.tiogacountyny.com/programs-agencies/recycling/

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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4. 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.

Make printed stormwater education materials readily available to the general public including youth, homeowners and businesses. Make literature and displays available at MS4 and partner offices, on MS4 and BTSC websites and at outreach events. Promote the BTSC websites, www.waterfromrain.org and www.BroomeTiogaStormwater.com as mechanisms for sharing information with the general public.

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

Materials available for display at 15 MS4's highway departments and planning offices, Cornell Cooperative Extensions, Broome and Tioga Soil & Water offices, Broome County Library (Solid waste, composting, grasscycling, hazardous waste management, green infrastructure, general stormwater information, kids activities). Materials and information are also incorporated into the websites.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Expand the variety of materials distributed and the audiences reached. Expand temporary or permanent displays into other municipally owned facilities and/or local businesses (i.e. Regional Farmers Market opening soon).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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4. 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 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 when possible.

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

2015-2016 Events: Earth Day Southern Tier Earth Fest, 2500 ppl; Broome Riverbank Cleanup participants, info distributed to 196 ppl; Owego Strawberry Festival, 100 families.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Chenengo

SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

Finding no illicit discharges. The Town website now includes information on Illicit Discharges, as well as links to the NYSDEC for complaint reporting and Town of Chenengo "Illicit Discharge Report Citizen Complaint Form".

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

No discharges found.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Develop mapping areas investigated and a log. Possibly initiate water sampling program at outfalls. Develop storm watershed map of areas contributing to each outfall.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

Measurable goal 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.

Since the local IDDE Law was passed the Town has not detected any illicit discharges.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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

MS4 Annual Report Form

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

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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

SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Continued implementation of the public education campaign: "Water From Rain" to guide residents to BMPs on website and in social media.
Promotional items were developed including stickers and magnets with the website address on them.

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

98 TV & 120 radio commercials were aired locally in May and June.
900 brochures & 2000 magnets & 250 stickers were printed and distributed at various events & offices
Facebook page started and utilized regularly for educational postings (34 likes).
517 new & legitimate users utilized the website.

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

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this Measurable Goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Will continue to promote program and air commercials in the coming year. Will increase promotion via Google Advertising and Facebook page. Plan to bring in an intern to focus on social media aspect as part of their duties.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Broome-Tioga Stormwater Coalition |
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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Broome County Planning partnered with the BTSC to put on an event "The Art of Water" to highlight stormwater education and green infrastructure. The event featured tables from local groups, art activities centered around water, and a green roof tour. The event was scheduled during First Friday, a monthly event in downtown Binghamton with art oriented exhibits and activities.

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

The event was announce via a press release and a Guest Viewpoint in the local paper that also gave information about the importance of stormwater protection. The event included several activities geared towards educating kids about stormwater protection, a rain barrel raffle, a professional chalk artist's water themed piece, and a green roof tour. About 150 people attended the event.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Will continue to hold educational events when feasible.

MS4 Annual Report Form

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

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Name of MS4/Coalition

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| Broome-Tioga Stormwater Coalition |
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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Continue public outreach via public presentations and local media.

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

- Guest Viewpoint published in the Press and Sun Bulletin promoting the "Art of Water" event and providing general stormwater education. A press release was sent out regarding the Annual Report public meeting. All press releases include a statement to raise awareness about stormwater protection.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue to do public outreach via press releases, newspaper guest viewpoints and news spots.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Broome-Tioga Stormwater Coalition |
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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Assist MS4s by implementing training programs and providing training materials for municipal officials and employees, as well as local developers and contractors.

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

- Broome/Tioga SWCD, Sediment and Erosion Control training for 182 attendees.
- Provided Good Housekeeping and IDDE training videos to 3 individual MS4 municipalities.
- Munis reported on participation in these events under additional MCMs.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue training schedule for the coming year. Continued sediment and erosion control trainings, additional trainings for good housekeeping program development, site inspection (construction), post-construction stormwater controls. Assess opportunities for additional topics.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Broome-Tioga Stormwater Coalition |
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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Broome County Division of Solid Waste continued promotion of its program, serving both Broome and Tioga Counties. Topics include HHW, electronics recycling, grasscycling, composting, illegal dumping, and disposal of agricultural plastic, freon units, oil and antifreeze, batteries, and prescription drugs.

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

- 3 Newspaper ads with HHW collection schedule, 1 billboard - 860 TV and Radio ads promoting HHW, electronics recycling and curbside recycling, and 370 banner ads on TV station website -1500 recycling guides - 5 landfill tours were held highlighting the hazardous waste facility.
-583 Grasscycling commercials

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue Solid Waste Outreach are established and when new opportunities arise. Further develop promotional materials for use in local media and educational campaigns. Develop additional topical brochures.

MS4 Annual Report Form

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

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

Name of MS4/Coalition:

SPDES ID

Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?

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

- Cleanup Events # Events
- Comments on SWMP Received # Comments
- Community Hotlines

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- Community Meetings # Attendees
- Plantings Sq. Ft.
- Storm Drain Markings # Drains
- Stakeholder Meetings # Attendees
- Volunteer Monitoring # Events
- Other: , t r e e s s o l d

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? Yes No

- List-Serve # In List
- Newspaper Advertising # Days Run
- TV/Radio Notices # Days Run
- Other:

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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**

SPDES ID
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2. URL(s) con't.:

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| BROOME-TIOGA STORMWATER COALITION |
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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Proper management and disposal of household hazardous wastes and electronics.

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

Stream cleanups: 2.5 ton of trash was collected
11.6 tons general waste, 340 tons of household hazardous waste, 234 tons electronics, 1,641 bulbs and 2,513 batteries were collected from 3905 households in Broome and Tioga counties.

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

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| | | 4 | 2 |
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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

-Continued formation of volunteer watershed groups and recruiting members with social media
-Continue annual tire clean up by municipalities with goal of 100 tons of tires collected
-Continue annual stream clean up volunteer organizations
-Continue annual Household Hazardous Waste and Electronics collections

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Broome-Tioga Stormwater Coalition |
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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Promote benefits of community participation in stream and river cleanup programs. Aim to improve water quality by reducing non-point source pollution. Inform public about sources of and solutions to water pollution. Involve the public, students, and local service organizations.

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

Broome County Riverbank Cleanup (Oct) - 196 volunteers, 1.5 tons of trash collected
Tioga County Stream Cleanup (May) 1 ton of trash collected

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

- Continue with annual cleanup events.
- Continued recruitment of volunteer groups.

MS4 Annual Report Form

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

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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

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Expand public involvement in development of stormwater programs and reporting of stormwater issues or concerns.

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

Fact sheet - "Detecting and Reporting Illicit Discharges". Educates the public on how to recognize an illicit discharge and who to call to report it. Distributed to riverbank cleanup participants who were also asked to report anything they noticed during the cleanup (196 people).

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue distribution of fact sheet.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Broome-Tioga Stormwater Coalition |
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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Continued promotion regarding the proper management and disposal of household hazardous waste and electronics in Broome and Tioga Counties. Continued collection from Conditionally Exempt Small Quantity Generators of hazardous waste.

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

Broome County Solid Waste held 31 HHW & Electronics collections with participation from 3548 Broome & Tioga households. There were 81 CESQGs from Broome and Tioga. 152.29 total tons of household hazardous waste was collected, 226.10 tons of electronics.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue established programs.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

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9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? Yes No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? Yes No NT

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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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.

Conducted Outfall Reconnaissance Inventory. Updated outfall map and inventory. Update database of SWPPPs, Review IDDE Ordinance. Update City of Binghamton IDDE program manual. Investigated and eliminated all reported illicit discharge. Cleanup and Inspected Catch basins. Updated list of non stormwater discharge. Implement educational measures through distribution of water bills.

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

Outfall mapping is in progress to make the inventory 100%. Only four more outfalls needs to be inspected. Reviewing of ordinances is ongoing. 710 drain structures were cleaned and inspected. Replaced 103 catchbasins. Repaired 18 manholes. Installed 15 new storm manholes. Installed 137 new castings. 37 "No Dumping Drains to River" markers installed on catchbasins.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue outfall reconnaissance inventory. Review of ordinance, catchbasins cleaning, illicit discharge detention investigation, and installation of catchbasins markers will be on going. Training in DDE for all staff. Continued to implement BMPs.

MS4 Annual Report Form

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

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Name of MS4/Coalition

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9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? Yes No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? Yes No NT

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Binghamton |
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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

Measurable goal 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.

Since the local IDDE Law was passed the Town has not detected any illicit discharges.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report?

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

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

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

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| <ul style="list-style-type: none"> <input type="radio"/> Auto Recyclers <input checked="checked" type="radio"/> Building Maintenance <input checked="checked" type="radio"/> Churches <input type="radio"/> Commercial Carwashes <input type="radio"/> Commercial Laundry/Dry Cleaners <input type="radio"/> Construction Vehicle Washouts <input type="radio"/> Cross-Connections <input type="radio"/> Distribution Centers <input type="radio"/> Food Processing Facilities <input type="radio"/> Garbage Truck Washouts <input checked="checked" type="radio"/> Hospitals <input type="radio"/> Improper RV Waste Disposal <input type="radio"/> Industrial Process Water <input type="radio"/> Other: | <ul style="list-style-type: none"> <input type="radio"/> Landscaping (Irrigation) <input type="radio"/> Marinas <input type="radio"/> Metal Plateing Operations <input type="radio"/> Outdoor Fluid Storage <input checked="checked" type="radio"/> Parking Lot Maintenance <input type="radio"/> Printing <input type="radio"/> Residential Carwashing <input checked="checked" type="radio"/> Restaurants <input type="radio"/> Schools and Universities <input type="radio"/> Septic Maintenance <input type="radio"/> Swimming Pools <input checked="checked" type="radio"/> Vehicle Fueling <input type="radio"/> Vehicle Maint./Repair Shops <input type="radio"/> None |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TOWN OF DICKINSON |
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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.

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

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

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

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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

WE HAVE A DECIDATED WEB SITE AND WILL BE PUTTING ALL MS4 RELATED MATERIAL ON IT.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016
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
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Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

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

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

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

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016
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 149

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

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

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

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

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

| | | |
|--|--|---|
| | | 4 |
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7. Has the storm sewershed mapping been completed in this reporting period? Yes No
If No, approximately what percent was completed in this reporting period?

| | | | |
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8. Is the above information available in GIS? Yes No
Is this information available on the web? Yes No
If Yes, provide URL(s):

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

URL

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| VILLAGE OF ENDICOTT |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

When the Village of Endicott has an Illicit Discharge like a Sanitary Sewer Overflow, we contact the DEC with in a 2 hour window. Then we identify where the problem area is and work accordingly.

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

We successfully Jetted the Sanitary Sewer Mains and were able to clear the blockage and identify the cause of the blockages. The Illicit Discharge was going into the Storm Sewer System and out to the River.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Illicit discharges are prohibited and enforcement procedures are in place and being implemented.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Fenton |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

Survey Outfalls in the MS4

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

All Outfalls were surveyed and no evidence of Illicit Discharges was detected

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Exceeded goal of surveying 1/3 of outfalls per year by surveying all.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report? 001

1. Enter the number and approx. percent of outfalls mapped: 18 # 100%

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? 018

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

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

Other: None
Residential Vehicle Maintenance

Sewersheds:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016
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

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

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

Grid for listing other types of discharges

4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 000

5. How many illicit discharges have been confirmed during this reporting period? 000

6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 000

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

8. Is the above information available in GIS? Yes No
Is this information available on the web? Yes No
If Yes, provide URL(s):

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

URL grid 1

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MS4 Annual Report Form

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

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Name of MS4/Coalition

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9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? Yes No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? Yes No NT

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

| | | |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Johnson City |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

| |
|---|
| 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. |
|--|

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

| |
|--|
| The Village will continue to train employees to be aware of illicit discharges during their daily activities and to notify their supervisors as necessary. |
|--|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

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

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

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

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

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

| | | |
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| | | 0 |
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7. Has the storm sewershed mapping been completed in this reporting period? If No, approximately what percent was completed in this reporting period?

Yes No

| | | |
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8. Is the above information available in GIS?

Yes No

Is this information available on the web?

Yes No

If Yes, provide URL(s):

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Kirkwood |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

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.

Since the local IDDE Law was passed the Town has not detected any illicit discharges.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6
 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 Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report?

1. Enter the number and approx. percent of outfalls mapped: 3 0 # 1 0 0 %

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? 3 0

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

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

Sewersheds:

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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8. URL(s) con't.:

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

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9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? ● Yes ○ No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? ● Yes ○ No ○ NT

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| VILLAGE OF PORT DICKINSON |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

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.

Since the local IDDE Law was passed the Town has not detected any illicit discharges.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue to 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 discharges and how the can and should be avoided.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report?

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

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

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

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

Sewersheds:

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Owego |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

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

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

The Town of Owego met this goal

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Union |
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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.

Code enforcement responds to complaints about dumping into stream channels and illegal dumping into storm system. New outfalls are mapped with new development. Stormwater markers have been obtained.

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

Code enforcement have increased fire safety inspections for businesses and have looked for illegal discharges during inspections. Town participates in CRS program and checks certain choke points in streams periodically. Put in bid documents for lawn cutting that contractor cannot discharge cuttings into street. Previous offenders where not observed to be in violation this year.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Need to install more storm drain markers to make public aware that illegal dumping not permitted.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Vestal |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

Training in IDDE for water/sewer, highway and engineering departments during March 2015 to educate and encourage awareness of illicit discharges that may be identified during department normal operations.

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

Several small issues were identified by staff including broken sewer clean-outs allowing stormwater into sanitary system were identified, reported and repaired.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

continue IDDE training program, coordinate and improve documentation between highway, water/sewer and engineering departments with respect to our SWMPP.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

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Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report?

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

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

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

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

Other: None

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Sewersheds:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition BROOME COUNTY

SPDES ID
NYR20A332

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

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

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4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 67

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

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

7. Has the storm sewershed mapping been completed in this reporting period? Yes No
If No, approximately what percent was completed in this reporting period? 0 %

8. Is the above information available in GIS? Yes No
Is this information available on the web? Yes No

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

URL

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| BROOME COUNTY |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

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

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

All of the outfalls within the County roadways (and within the designated MS4 boundaries) have been verified and relocated using GPS equipment during the summer of 2013. Eleven (11) facilities within the MS4 boundaries have been mapped/surveyed and eight (8) remain to be completed.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

During the summer of 2016 DPW staff will screen approximately 20% of the identified roadway outfalls and confirm/map any new ones. Additionally, all outfalls at the 19 County facilities will be inspected as part of the self-assessment, and a 5-year schedule of outfall inspections at these County facilities will be developed and implemented.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| BROOME COUNTY |
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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

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

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

Goal objectives have been met during this reporting year. During the 2015 summer season, DPW staff conducted dry weather inspections within Area #2, which is comprised of 76 outfalls.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue with inspection program as developed - by inspecting those outfalls in Area #3 (approximately 20%). Also will incorporate outfalls at County facilities as good housekeeping program is implemented (see MCM #3A).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

BROOME COUNTY

SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

MEASURABLE GOAL #3C -- To develop and pass a local IDDE law/regulation in Broome County in accordance with the State's model IDDE law.

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

Goal objectives have not been met in the 2015-2016 reporting period.

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

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The SWMPP identifies that this local law/regulation will be established and enacted by Broome County. A draft of the IDDE local law/regulation has been developed and is under review, and the goal will be to pass this law/regulation during the 2016-2017 reporting period.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

MEASURABLE GOAL #3D -- To install markers on 100% of the County-owned storm drain CB's and DI's within the MS4 area; to be completed each year within areas of dry weather inspections (at a minimum).

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

This was a new goal in 2015 and markers were installed within Area #2 which was the area where dry weather inspections were performed in 2015. 52 aluminum markers and 20 stencil applications were applied within Area #2.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

County staff will continue to install drain markers within areas of dry weather inspections each year (at a minimum). In 2016, drain markers will be installed in Area #3.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

MEASURABLE GOAL #3E -- To establish a dedicated IDDE hotline and to advertise this hotline and list it on the storm water website. This goal also includes creating centralized tracking and reporting of IDDE complaints with information related to follow-up.

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

During the 2015-2016 reporting period, a stormwater page was established on the County website which included a fillable form for reporting IDDE. This new form was not used during this reporting period, so we need to determine a more effective method to publicize this feature.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

During this next reporting period we want to further this goal by pulling the Health Department - Division of Environmental Health tracking and reporting system into this loop and to publicize the IDDE tracking and reporting form (see MCM-3F goal).

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| BROOME COUNTY |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

MEASURABLE GOAL #3F -- To educate and inform 100% of Broome County staff about IDDE's - what they are, how to report them, and how to address them. This goal is cross referenced with coalition activities related to public education, but will be directed specifically to county employees.

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

With the ongoing development and implementation of facility specific good housekeeping documents, this goal was advanced by implementation of the stormwater webpage. However, more direction education and progress needs to be made in this area.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

During the 2015-2016 reporting year an employee brochure will be developed to educate and inform about IDDE's -- what they are, how to report them, etc. This will be distributed to 100% of County staff electronically, and distributed in paper form throughout the County.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| BROOME COUNTY |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

MEASURABLE GOAL #3G -- To inform and educate businesses and industries about the negative environmental impacts of illegal dumping, as well as chemical and hazardous waste spills, and to encourage the use of BMP's to prevent and control these. This is to be done through the County 239 review process, which is an advisory capacity only.

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

Broome County Planning and Engineering staff continue to review and analyze 239 development reviews where BMP's were incorporated or included as advisory comments to municipalities as appropriate. Additionally, Broome County Planning has been providing training for municipal staff regarding stormwater issues and IDDE.

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

| | | | |
|--|--|--|---|
| | | | 0 |
|--|--|--|---|

(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).

For this next reporting period we need to create a better tracking system 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.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TIOGA COUNTY |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

-Tioga County Public Works continues to follow the best management practices as defined in the "Tioga County and Town of Owego Stormwater Management Program Plan", which was updated and is effective through 2020.
-No new catch basins or outfalls have been constructed or discovered since the last report.

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

Minimal litter and sediment were observed on catchment basins during biannual inspections. No illicit discharges were observed during biannual inspections of outfalls.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

-Catchment basins (55) and outfalls (6) will continue to be inspected 2 times per year, once in the spring and once in the fall.
-Tioga County will schedule street sweeping of its MS4 area of jurisdiction on Pennsylvania Ave with Town of Owego Highway Department per the intermunicipal agreement.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Binghamton |
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

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

| | | |
|--|--|---|
| | | 2 |
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3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

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

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

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016
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

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

Address

City Zip -

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Binghamton |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

Goals: The City of Binghamton continue reviewing and updating the SWMP to show the SPDES General Permit GP-0-15-003 changes. Continue to review all SWPPPs and maintain a database of SWPPPs reviewed. The City stormwater web page includes the City of Binghamton SWMP for the public to have access. All construction sites requiring a SWPPP had been reviewed and approved.

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

NYSDEC SWPPP review checklist is utilized for all SWPPP reviews in accordance with newly develop SWPPP review practices. Development and Associated stormwater documents are present to the public meetings. The SWPPP approved are confirm by weekly inspection with the assistance of outside company and periodically inspected by The City of Binghamton.

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

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

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

Yes No

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

Yes No

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

SWPPP review and database documentation will continue. Development projects will continue to be presented at public meetings. Inspections of all active projects for SWPPP compliance will continue. Pre - development meeting are held to meet with developers to discuss stormwater issues.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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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.

Goals: The City of Binghamton SWMP requires projects not requiring a SWPPP, pursuant the Erosion and Sediment Control ordinance and meet a group of specific requirements (See City of Binghamton ordinance chapter 227) required an Urban Runoff Reduction Plan "URRP". The City has a Green Stormwater and Landscaping Management Fund Grant for the public who is required to follow an URRP. The City continue to review all URRP and maintain an URRP inventory.

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

The City of Binghamton had created a Urban Runoff Reduction Plan "URRP" review checklist. Development and Associated stormwater documents are present to the public meetings and is accessible in the City's webpage.

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

| | | | |
|--|--|--|---|
| | | | 1 |
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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

URRP review and database documentation will continue. Development projects will continue to be presented at public meetings. Inspections of all active projects for URRP compliance will continue. Pre-development meetings are help to meet with developers to discuss stormwater issues.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Binghamton |
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SPDES ID

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

Name of MS4/Coalition:

SPDES ID
N Y R 2 0 A 0 0 9

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

T o w n o f B i n g h a m t o n C o d e O f f i c e

Address

2 7 9 P a r k A v e n u e

City

B i n g h a m t o n

N Y

Zip

1 3 9 0 3 -

Phone

(6 0 7) 7 7 2 - 0 3 5 7

○ Library

Address

City

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○ Other

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Binghamton |
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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.

| |
|--|
| Continue developing procedures for review of SWPPP plans. Utilize NYS Construction Stormwater Inspection Manual for Site Inspections. |
|--|

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

| |
|--|
| SWPPP procedures ensures thorough review. Manual ensures thorough inspection. |
|--|

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

| | | | |
|--|--|--|---|
| | | | 0 |
|--|--|--|---|

(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 SWPPP plans in accordance with procedures and inspect construction sites according to manual. |
|--|

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Chenengo |
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SPDES ID

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

| | | |
|--|--|--|
| | | |
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 %

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

| | | |
|--|--|--|
| | | |
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 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID
N Y R 2 0 A 1 2 7

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Submit additional pages as needed.

● MS4/Coalition Office

Department

B u i l d i n g O r d i n a n c e a n d P l a n n i n g

Address

1 5 2 9 N Y S R o u t e 1 2

City

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N Y

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(6 0 7) 6 4 8 - 4 8 0 9

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Chenengo

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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.

Continue to to develop and implement spreadsheet checklist of projects reviewed, inspected, and/or enforcement actions.

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

Inspections ongoing and reviews are conducted and logged . Staff are trained.

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

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

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

Yes No

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

Yes No

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

Continue training staff on permit updates: continue to review, inspect, and document.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Conklin |
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SPDES ID

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

| | | |
|--|--|---|
| | | 0 |
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 3. What percent of active construction sites were inspected during this reporting period? NT

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

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

| | | |
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 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

Address

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Conklin |
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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 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.

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?

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|--|--|--|---|
| | | | 1 |
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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place and inspect every active construction project at least once a week during construction.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

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

| | | |
|--|--|---|
| | | 0 |
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 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
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| | | |
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 %

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

| | | |
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 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

TOWN OF DICKINSON

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

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?

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| | | | 0 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

REVIEW ANY SWPPP'S AND MAKE AVAILABLE FOR PUBLIC COMMENT
PLACE ACTIVITY ON WEB SITE WHENE OPERATIONAL

MS4 Annual Report Form

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

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

Name of MS4/Coalition

VILLAGE OF ENDICOTT

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

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| | | 1 |
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2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

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

| | | |
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 %

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

| | | |
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 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

6. con't.:
Submit additional pages as needed.

MS4/Coalition Office

Department

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

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

Skye View Heights is the active construction site that has had active authorized disturbances this reporting period. Inspections are done Monthly by Woit Engineering. The Construction project is working within the guidelines set forth by the DEC.

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

The Monthly reports by Woit Engineering followed up by physical inspections of the worksite indicated that Construction Site Stormwater Runoff is being maintained properly.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue Inspecting the Construction Site on a weekly basis.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Fenton |
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

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

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

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

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5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

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

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Name of MS4/Coalition

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Submit additional pages as needed.

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Fenton |
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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.

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

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Johnson City

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

| | | |
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| | | 1 |
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 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
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| | | 1 |
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 3. What percent of active construction sites were inspected during this reporting period? NT

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

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

| | | |
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| 1 | 0 | 0 |
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 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

NYR20A101

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Submit additional pages as needed.

● MS4/Coalition Office

Department

J o h n s o n C i t y P u b l i c W o r k s

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City

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Johnson City |
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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.

During this period one project required a SWPPP, this was the Binghamton University School of Pharmacy project - existing building demolition.

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

The project had weekly SWPPP inspections by a NYS licensed Engineer and was periodically inspected by JCDPW personnel. There were minor corrective actions that were required, all of which were corrected within a short time of the notification.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The 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.

MS4 Annual Report Form

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

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

Name of MS4/Coalition:

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| Town of Kirkwood |
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

| | | |
|--|--|---|
| | | 1 |
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 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
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| | | 1 |
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 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
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| 1 | 0 | 0 |
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 %

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

| | | |
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| 1 | 0 | 0 |
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 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

Name of MS4/Coalition:

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Submit additional pages as needed.

● MS4/Coalition Office

Department

B u i l d i n g & C o d e E n f o r c e m e n t

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Zip

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(6 0 7) 7 7 5 - 4 3 1 3

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Kirkwood |
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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 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.

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?

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place and inspect every active construction project at least once a week during construction.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

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

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

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

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 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

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Submit additional pages as needed.

● MS4/Coalition Office

Department

V I L L A G E H A L L

Address

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

Measurable goal is to inventory the number of SWPPP's received and reviewed. Also, to document the number and amount of times construction projects are inspected.

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

No active construction sites to observe during this reporting period.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Review any SWPPP's and make available for public comment. Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place and inspect every active construction project at least one a week during construction,

MS4 Annual Report Form

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Name of MS4/Coalition

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?
 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?
 3. What percent of active construction sites were inspected during this reporting period? NT %
 4. What percent of active construction sites were inspected more than once? NT %
 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT
 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

Name of MS4/Coalition

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Submit additional pages as needed.

● MS4/Coalition Office

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Name of MS4/Coalition

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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.

The Town of Owego has recently updated its website, which makes it easier to provide notice regarding projects being available for review and comment.

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

The website is updated in house, so current Planning Board and Zoning Board of Appeals agendas are easily accessed and posted in a timely manner.

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).

The Town of Owego will continue to update municipal staff education pertaining to local inspection procedures.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Union |
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

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

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

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| 1 | 0 | 0 |
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 %

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

| | | |
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| 1 | 0 | 0 |
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 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

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Submit additional pages as needed.

● MS4/Coalition Office

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MS4 Annual Report Form

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

Name of MS4/Coalition

Town of Union

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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.

There were 4 SWPPP's started in this reporting period. Three have been closed out.

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?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Staff received training on inspection procedures. Promote contractor training availability on website.

MS4 Annual Report Form

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

Name of MS4/Coalition

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| Town of Vestal |
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

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

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

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 %

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

| | | |
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 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

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Name of MS4/Coalition

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Submit additional pages as needed.

● MS4/Coalition Office

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MS4 Annual Report Form

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Name of MS4/Coalition

Town of Vestal

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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

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

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

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

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

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue reviewing SWPPP as development and construction projects dictate. Monitor during construction for conformance to SWPPP and follow up with corrective actions should SWPPP inspection report repetitive issues not being addressed.

MS4 Annual Report Form

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Name of MS4/Coalition

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

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

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

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

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

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 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

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

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Name of MS4/Coalition

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

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

7 County projects were let during this period which required a SWPPP. 3 were completed in 2015, 2 are under construction, and the other 2 will begin construction during 2016. The County has adopted a policy of including erosion control language in all contracts bid that involve earth disturbance and the potential for erosion and sedimentation, irregardless of the area disturbed. There were another 7 projects bid and completed during this reporting period that did not require SWPPP's.

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

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue as developed and implemented -- detailed reporting sheets for all construction work will be developed and utilize this next reporting period.

MS4 Annual Report Form

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Name of MS4/Coalition

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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 #4B -- To assure that 100% of County work with SWPPP's have a contractor with appropriately trained staff (NYSDEC Erosion Control Certified), that a copy of the certification be provided prior to start of work, and that this trained person be on site during all earth moving operations.

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

Appropriate contract language has been inserted into contract documents as necessary. We have had these discussions with contractor's on all applicable contracts at the preconstruction meeting (7 projects during this reporting period).

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue as developed and implemented - however, assure that we get copies of contractor's erosion control training certificates for all projects with SWPPP's (at a minimum).

MS4 Annual Report Form

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Name of MS4/Coalition

BROOME COUNTY

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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 #4C -- To assure that 100% of inspectors on 100% of County projects are either P.E.'s, CPESC's or trained and certified in erosion and sediment control.

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

Notices 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 staff are NYDEC trained and certified.
All inspectors on 2015 construction projects had appropriate training requirements per stated goals.

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

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| | | 1 | 4 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue as developed and implemented - improve reporting / record keeping for this goal.

MS4 Annual Report Form

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

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Name of MS4/Coalition

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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 #4D -- 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). Eleven (11) staff members were re-certified during this reporting period.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue 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.

MS4 Annual Report Form

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Name of MS4/Coalition

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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 #4E -- To track and inspect 100% of County sponsored projects for erosion and sediment control compliance at least once, irregardless of whether the project requires a SWPPP.

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

100% of County sponsored projects are/were inspected and tracked during the past reporting period whether they had a SWPPP or not.

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

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue as developed and implemented - develop and implement better County-wide tracking forms.

MS4 Annual Report Form

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

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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

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

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

MEASURABLE GOAL #4F -- 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 2 calls / complaints related to erosion and/or sediment related issues during this reporting period (related to the sewer utility project). Calls / complaints were received by the project engineer / manager and addressed promptly with the contractor.

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

| | | | |
|--|--|--|---|
| | | | 2 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue as developed and implemented -- update program tracking for better MS4 records, and include complaints as a check on inspection forms form MCM-4E goal.

MS4 Annual Report Form

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

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| 2 | 0 | 1 | 6 |
|---|---|---|---|

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

Name of MS4/Coalition

BROOME COUNTY

SPDES ID

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

7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

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

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

144 total 239 reviews were completed by County Planning during this reporting period, and 54 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?

| | | | |
|--|---|---|---|
| | 1 | 4 | 4 |
|--|---|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

This process is ongoing and well established, and County staff will continue to perform these duties in accordance with the established SWMP goal and review criteria; however, we will look at better definition of how many 239 reviews deal with water quality issues with the development and implementation of a tracking spreadsheet in 2016.

MS4 Annual Report Form

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

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TIOGA COUNTY

SPDES ID

| | | | | | | | | |
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| N | Y | R | 2 | 0 | A | 0 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

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

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

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

| | | |
|--|--|--|
| | | |
|--|--|--|

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

| | | |
|--|--|--|
| | | |
|--|--|--|

 %
 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT
 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

Address

City

Zip

-

Phone

() -

○ Library

Address

City

Zip

-

Phone

() -

○ Other

Address

City

Zip

-

Phone

() -

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

URL

URL

MS4 Annual Report Form

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

| | | | |
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| 2 | 0 | 1 | 6 |
|---|---|---|---|

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

Name of MS4/Coalition

TIOGA COUNTY

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

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.**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

| | | | |
|--|--|--|---|
| | | | 0 |
|--|--|--|---|

(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).

MS4 Annual Report Form

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

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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 Binghamton |
|--------------------|

SPDES ID

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

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

09/2004 03/2006 NT

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

| | | |
|--|--|---|
| | | 3 |
|--|--|---|
4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT
- If Yes, how many public comments were received during this reporting period?

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

 No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Termination of Contracts #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Other #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority

MS4 Annual Report Form

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

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|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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? Yes No

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

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Termination of Contracts #

| | | | | |
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| | | | | |
|--|--|--|--|--|

 No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Other #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority

MS4 Annual Report Form

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

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|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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

Name of MS4/Coalition

Town of Chenengo

SPDES ID

| | | | | | | | | |
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| N | Y | R | 2 | 0 | A | 1 | 2 | 7 |
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Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

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

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

How many MS4s contributed to this report?

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

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

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

09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|--|
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 No Authority
- Termination of Contracts #

| | | | | |
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 No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|--|
| | | | | |
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 No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|--|
| | | | | |
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 No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|--|
| | | | | |
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 No Authority
- Other #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Conklin

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 5 | 5 |
|---|---|---|---|---|---|---|---|---|

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

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

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

How many MS4s contributed to this report?

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

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

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|---|
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|--|--|--|--|---|

 No Authority
- Termination of Contracts #

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 No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|--|
| | | | | |
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 No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Enforcement Actions or Sanctions #

| | | | | |
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| | | | | |
|--|--|--|--|--|
- Other #

| | | | | |
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| | | | | |
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 No Authority

MS4 Annual Report Form

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

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| 2 | 0 | 1 | 5 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|-------------------|
| TOWN OF DICKINSON |
|-------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 4 | 3 |
|---|---|---|---|---|---|---|---|---|

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

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

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

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

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

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

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Stop Work Orders #

| | | | | |
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 ○ No Authority
- Criminal Actions #

| | | | | |
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|--|--|--|--|--|

 ○ No Authority
- Termination of Contracts #

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 ○ No Authority
- Administrative Fines #

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 ○ No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Other #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority

MS4 Annual Report Form

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

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| 2 | 0 | 1 | 6 |
|---|---|---|---|

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, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

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

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Termination of Contracts #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Other #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority

MS4 Annual Report Form

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

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|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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

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

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

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

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

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

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

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:

- Notices of Violation #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Stop Work Orders #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Criminal Actions #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Termination of Contracts #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Administrative Fines #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Civil Penalties #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Administrative Orders #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Enforcement Actions or Sanctions #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|
- Other #

| | | | | | |
|--|--|--|---|--|---|
| | | | 0 | | 0 |
|--|--|--|---|--|---|

 ○ No Authority

MS4 Annual Report Form

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

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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 |
|---|---|---|---|---|---|---|---|---|

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

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

On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

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

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

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

09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Termination of Contracts #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Other #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority

MS4 Annual Report Form

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

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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 |
|---|---|---|---|---|---|---|---|---|

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

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

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

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

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

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

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Termination of Contracts #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Other #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority

MS4 Annual Report Form

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

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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

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

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

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

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

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

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Termination of Contracts #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Other #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

NYR20A079

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

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

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

How many MS4s contributed to this report?

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

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

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

09/2004 03/2006 NT

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

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period? 1

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

If Yes, how many public comments were received during this reporting period? 0

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

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

- Notices of Violation #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Stop Work Orders #

| | | | | |
|--|---|--|--|--|
| | 1 | | | |
|--|---|--|--|--|

 ○ No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Termination of Contracts #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Other #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 ○ No Authority

MS4 Annual Report Form

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

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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

Name of MS4/Coalition

Town of Union

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 5 | 0 |
|---|---|---|---|---|---|---|---|---|

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

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

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

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

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

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

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

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

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

| | | |
|--|--|---|
| | | 3 |
|--|--|---|

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

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

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

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

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

- Notices of Violation #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 No Authority
- Stop Work Orders #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 No Authority
- Criminal Actions #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 No Authority
- Termination of Contracts #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 No Authority
- Administrative Fines #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 No Authority
- Civil Penalties #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 No Authority
- Administrative Orders #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 No Authority
- Enforcement Actions or Sanctions #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 No Authority
- Other #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 No Authority

MS4 Annual Report Form

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

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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 |
|---|---|---|---|---|---|---|---|---|

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

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

On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

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

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

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

09/2004 03/2006 NT

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

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

| | | |
|--|--|---|
| | | 6 |
|--|--|---|

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Termination of Contracts #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Administrative Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Other #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 ○ No Authority

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

BROOME COUNTY

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 3 | 2 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
 On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

| | | |
|--|--|---|
| | | 7 |
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
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 No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

 No Authority
- Termination of Contracts #

| | | | | |
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| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Administrative Fines #

| | | | | |
|--|--|--|--|--|
| | | | | |
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 No Authority
- Civil Penalties #

| | | | | |
|--|--|--|--|--|
| | | | | |
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 No Authority
- Administrative Orders #

| | | | | |
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 No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Other #

| | | | | |
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 No Authority

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TIOGA COUNTY

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
 On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- | | | | | | | | | |
|--|---|--|--|--|--|--|--|---|
| <input type="radio"/> Notices of Violation | # | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Stop Work Orders | # | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Criminal Actions | # | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Termination of Contracts | # | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Administrative Fines | # | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Civil Penalties | # | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Administrative Orders | # | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | |
| | | | | | | | | |
| <input type="radio"/> Other | # | <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------|
| City of Binghamton |
|--------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 4 | 1 |
|---|---|---|---|---|---|---|---|---|

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
|--|--|---|
| | | 3 |
|--|--|---|

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

| | | |
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| | 8 | 0 |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------|
| City of Binghamton |
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SPDES ID

| | | | | | | | | |
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| N | Y | R | 2 | 0 | A | 3 | 4 | 1 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.

Train inspection / enforcement personnel on post construction runoff regulations and inspection procedures. Perform inspections to ensure conformance with specifications. Continue to keep inventory of post construction stormwater practices

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

SWPPP inventory is used to track post construction stormwater practices. A post construction stormwater map has been created and will be updated as needed.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Train inspection personnel. Perform inspections when appropriate. Continue to track construction projects and post construction storm water practices. Continue to develop and implement procedures for inspection, maintenance, and tracking of activities related to post-construction controls.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Binghamton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 0 | 9 |
|---|---|---|---|---|---|---|---|---|

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

| | | |
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| | 5 | 0 |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------|
| Town of Binghamton |
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SPDES ID

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| 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 measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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 utilize stormwater ordinance.
Perform inspections on qualifying project sites.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Stormwater ordinance allows enforcement.
Inspections ensure compliance with regulations.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 0 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to improve review and inspection procedures.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of Chenengo

SPDES ID
N Y R 2 0 A 1 2 7

Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained |
|--|---|---|---|
| <input type="radio"/> Alternative Practices | | | |
| <input type="radio"/> Filter Systems | | | |
| <input type="radio"/> Infiltration Basins | | | |
| <input checked="" type="radio"/> Open Channels | 1 | 1 | 1 |
| <input checked="" type="radio"/> Ponds | 2 | 2 | 1 |
| <input type="radio"/> Wetlands | | | |
| <input type="radio"/> Other | | | |

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes
- Municipal Comprehensive Plans
- Overlay Districts
- Open Space Preservation Program
- Zoning
- Local Law or Ordinance
- None
- Land Use Regulation/Zoning
- Watershed Plans
- Other Comprehensive Plan

Other:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
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| 2 | 0 | 1 | 6 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Chenengo |
|------------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 2 | 7 |
|---|---|---|---|---|---|---|---|---|

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

| | | |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Chenengo |
|------------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 2 | 7 |
|---|---|---|---|---|---|---|---|---|

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.

Staff continued to train and improve inspection and maintenance skills.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Limited or no problems annually.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to train employees. Develop GIS and/or spreadsheet to track maintenance, practices, etc.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------|
| Town of Conklin |
|-----------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 2 | 5 | 5 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained | | | | | | | | | |
|--|---|------------------|-----------------------|---|---|--|--|---|---|--|--|---|
| <input type="radio"/> Alternative Practices | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| | | | | | | | | | | | | |
| <input checked="" type="radio"/> Filter Systems | <table border="1"><tr><td> </td><td> </td><td>1</td></tr></table> | | | 1 | <table border="1"><tr><td> </td><td> </td><td>1</td></tr></table> | | | 1 | <table border="1"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 |
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| <input checked="" type="radio"/> Infiltration Basins | <table border="1"><tr><td> </td><td> </td><td>1</td></tr></table> | | | 1 | <table border="1"><tr><td> </td><td> </td><td>1</td></tr></table> | | | 1 | <table border="1"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 |
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| <input checked="" type="radio"/> Open Channels | <table border="1"><tr><td> </td><td> </td><td>1</td></tr></table> | | | 1 | <table border="1"><tr><td> </td><td> </td><td>1</td></tr></table> | | | 1 | <table border="1"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 |
| | | 1 | | | | | | | | | | |
| | | 1 | | | | | | | | | | |
| | | 0 | | | | | | | | | | |
| <input checked="" type="radio"/> Ponds | <table border="1"><tr><td> </td><td> </td><td>3</td></tr></table> | | | 3 | <table border="1"><tr><td> </td><td> </td><td>3</td></tr></table> | | | 3 | <table border="1"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 |
| | | 3 | | | | | | | | | | |
| | | 3 | | | | | | | | | | |
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| <input type="radio"/> Wetlands | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| | | | | | | | | | | | | |
| <input type="radio"/> Other | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| | | | | | | | | | | | | |

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes Municipal Comprehensive Plans
- Overlay Districts Open Space Preservation Program
- Zoning Local Law or Ordinance
- None Land Use Regulation/Zoning
- Watershed Plans Other Comprehensive Plan

Other:

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|--|---|---|---|---|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| P | l | a | n | n | i | n | g | | B | o | a | r | d | | R | e | c | o | m | m | e | n | d | a | t | i | o | n |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Conklin

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 5 | 5 |
|---|---|---|---|---|---|---|---|---|

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

| | | |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------|
| Town of Conklin |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Measurable goal is to document the number of post construction BMP's inspected. Also to verify that the owner has conducted and documented maintenance of the post construction BMP's.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

After the post construction BMP's were in place staff inspected them after heavy rainfall events and found no flood damage or migration of Silt/Sediment surrounding the sites.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to inspect post construction BMP's and hold owner's/operators accountable to maintain them. Also, to request and file annual maintenance records from each post construction BMP.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained | | | | | | | | | |
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| <input type="radio"/> Alternative Practices | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="radio"/> Filter Systems | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="radio"/> Infiltration Basins | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="radio"/> Open Channels | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="radio"/> Wetlands | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes Municipal Comprehensive Plans
- Overlay Districts Open Space Preservation Program
- Zoning Local Law or Ordinance
- None Land Use Regulation/Zoning
- Watershed Plans Other Comprehensive Plan

Other:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| TOWN OF DICKINSON |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 4 | 3 |
|---|---|---|---|---|---|---|---|---|

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| TOWN OF DICKINSON |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Measurable goal is to document the number of post construction BNP"s inspected. Also to verify that the owner has conducted and documented maintenance of the post construction BMP'S.

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?

| | | | |
|--|--|--|---|
| | | | 0 |
|--|--|--|---|

(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).

IT IS NOT LIKELY THAT THERE WILL BE ANY POST CONSTRUCTION ACTIVITIES THIS YEAR
Continue to inspect post construction BMP's and hold owner's /operators accountable to maintain them. Also, to request and file annual maintenance records from each post construction BMP.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained |
|---|---|--|---|
| <input type="radio"/> Alternative Practices | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value="0"/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> |
| <input type="radio"/> Filter Systems | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value="0"/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> |
| <input type="radio"/> Infiltration Basins | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value="0"/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> |
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| <input type="radio"/> Wetlands | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value="0"/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> |
| <input type="radio"/> Other | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value="0"/> | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> |

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes Municipal Comprehensive Plans
- Overlay Districts Open Space Preservation Program
- Zoning Local Law or Ordinance
- None Land Use Regulation/Zoning
- Watershed Plans Other Comprehensive Plan

Other:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

VILLAGE OF ENDICOTT

SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
|--|--|---|
| | | 0 |
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| VILLAGE OF ENDICOTT |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Skye View Heights Construction Project does not have any Post-Construction as of yet. There will be some later on this year as the project continues. The Post-Construction Stormwater Management will be addressed at that time.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Please see the above comments.

C. How many times was this observation measured or evaluated in this reporting period?

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| | | | 0 |
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(ex. 1 samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The goals for the stormwater activities will be inspected at the appropriate time.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Fenton

SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 7 | 8 |
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
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| | | 0 |
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Fenton |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

No NOI closures have occurred that would resulting in Post Construction effort

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

None to date

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Inspect and approve or correct any Post Construction activity on completed projects.

2 projects are currently in the Construction Phase.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Village of Johnson City |
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SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Village of Johnson City |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village has a data base established for Post-Construction Water Management annual inspections. The property owner is responsible for maintenance of their storm system, therefore the Village does not maintain the systems.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The annual inspections conclude that the implemented systems are maintained and operable.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The MCC goal will continue to be met by continuing the annual inspections and expanding the inspections to include any new systems that may be installed during future reporting periods.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Kirkwood |
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SPDES ID

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Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained | | | | | | | | | |
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| <input type="radio"/> Alternative Practices | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input checked="" type="radio"/> Ponds | <table border="1"><tr><td> </td><td> </td><td>3</td></tr></table> | | | 3 | <table border="1"><tr><td> </td><td> </td><td>3</td></tr></table> | | | 3 | <table border="1"><tr><td> </td><td> </td><td>3</td></tr></table> | | | 3 |
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| <input type="radio"/> Wetlands | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes
- Municipal Comprehensive Plans
- Overlay Districts
- Open Space Preservation Program
- Zoning
- Local Law or Ordinance
- None
- Land Use Regulation/Zoning
- Watershed Plans
- Other Comprehensive Plan

Other:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Kirkwood |
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SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Kirkwood

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Measurable goal is the number of post construction BMP's inspected and maintained. Also to verify that the owner has conducted and documented maintenance of the post construction BMP's.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

After the post construction BMP's were in place staff inspected them after heavy rainfall events and found no flooding or migration of Silt/Sediment surrounding the sites.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to inspect post construction BMP's and hold owner's/operators accountable to maintain them. Also, to request and file annual maintenance records from each post construction BMP.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| VILLAGE OF PORT DICKINSON |
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Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained | | | | | | | | | |
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| <input type="radio"/> Alternative Practices | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="radio"/> Infiltration Basins | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="radio"/> Open Channels | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="radio"/> Ponds | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="radio"/> Wetlands | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes Municipal Comprehensive Plans
- Overlay Districts Open Space Preservation Program
- Zoning Local Law or Ordinance
- None Land Use Regulation/Zoning
- Watershed Plans Other Comprehensive Plan

Other:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| VILLAGE OF PORTDICKINSON |
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SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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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 is to document the number of post construction BMP'S inspected. Also to verify that the owner has conducted and documented maintenance of the post construction BMP'S.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Currently the Village does not have any port-construction BMP's to inspect or observe.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

It is not likely that there will be any post construction activities next reporting period.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

%

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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
NYR20A079

6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town of Owego will continue work to develop an inventory, including types of post construction practices and inspection schedules.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Work continues on the creation of an inventory.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town of Owego will review its stormwater ordinance to ensure maintenance of NYS stormwater standards and requirements as defined in the recently updated SPDES General Permit GP-0-15-003

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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6. 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.

Code enforcement software is used to track SWPPP inspections. The Town is only responsible for maintaining one system.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Yearly inspections made to make sure systems are performing properly.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Train additional staff to inspect systems. Highway Department personnel received training on IDDE and Everyday Best Management Practices for Pollution Prevention and Good Housekeeping

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Vestal

SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town has a data base established for all sites requiring Post-Construction Water Management annual inspections. Each site is inspected yearly by the engineering department. The property owner is notified if an issues are identified that need addressing. The owner is responsible for maintenance of their storm system. The engineering department follows up to see that corrective measures have been addressed.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The annual inspections found 4 incidents that were reported for corrective actions by owners. Once the corrective actions were completed, a letter to the owner stating that the action is closed is also included in our MS4 records.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The MCC goal will continue to be met by continuing the annual inspections and expanding the inspections to include any new systems that may be installed during future reporting periods.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

BROOME COUNTY

SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASURABLE GOAL #5A -- To develop and maintain an INVENTORY of 100% of the County's Post-Construction Stormwater Management Practices including location, inspection records and responsible departments / staff.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

This measure has been met, and new practices will be added as constructed (none were added in the 2015-2016 reporting year, but several will be under construction to be added in the upcoming inspection year).

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

During the next reporting period activities to meet this goal include adding any new measures to the inventory that may be constructed during each reporting year. We anticipate the addition of several new practices in 2016 based on current construction projects.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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6. 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 #5B -- To INSEPECT 100% of the County's Post-Construction Stormwater Management Practices annually.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

100% of the County's Post-Construction Stormwater Management Practices were inspected during this reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue inspections as established and for any new measures added.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| BROOME COUNTY |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASURABLE GOAL #5C -- To MAINTAIN 100% of the County's Post-Construction Stormwater Management Practices annually - in accordance with established O&M guidelines.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

100% of the County's Post-Construction Stormwater Management Practices were maintained in accordance with the O&M guidelines during this reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 4 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue maintenance as established and for any new measures added.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---------------|--|--|--|--|--|--|--|--|--|
| BROOME COUNTY | | | | | | | | | |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 3 | 2 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASURABLE GOAL #5D -- To TRAIN 100% of the County staff responsible for inspection and O&M of the County's Post-Construction Stormwater Management Practices, with respect to inspections, record keeping, operation, and maintenance (including good housekeeping measures).

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Implementation of this goal was not achieved in 2015.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 0 |
|--|--|--|---|

(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).

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. It is a priority in 2016 to get the goal up and functioning in accordance with adopted good-housekeeping documents.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| BROOME TIOGA STORMWATER COALITION | | | | | | | | | |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
|--|--|--|
| | | |
|--|--|--|

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

| | | |
|--|--|--|
| | | |
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 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------|
| TIOGA COUNTY |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 4 | 7 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes 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).

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| | | | | | | | | | |
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| City of Binghamton | | | | | | | | | |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 4 | 1 |
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|----------------------------------|---|----------------------------------|
| | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------|
| City of Binghamton |
|--------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 4 | 1 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|---|---|
| | | | 5 | 1 |
|--|--|--|---|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|---|---|---|---|
| | 3 | 5 | 0 | 0 |
|--|---|---|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|---|---|---|
| | | 7 | 1 | 0 |
|--|--|---|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 4 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|---|---|---|
| | | 1 | 8 | 0 |
|--|--|---|---|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|---|---|
| | | | 6 | 0 |
|--|--|--|---|---|
- Pesticide/Herbicide Applied # Acres

| | | | | |
|--|--|--|---|---|
| | | | 3 | 0 |
|--|--|--|---|---|

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

4. What was the date of the last training?

| | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|
| | 2 | / | 1 | 0 | / | 2 | 0 | 1 | 6 |
|--|---|---|---|---|---|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 4 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | | |
|--|---|---|---|
| | 3 | 0 | % |
|--|---|---|---|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| City of Binghamton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 4 | 1 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Provided training to all municipal employees whose operations impact storm-water. Reduce the impact of moving/landscaping through the use of best management practices. Perform vehicle and equipment maintenance / washing according to plan, to reduce impact of stormwater. Prevent hazardous / waste material from impaction stormwater through proper use / storage / disposal methods. Continue street sweeping and catchbasins cleaning operations.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

xxx miles of street swept, and 710 catchbasins cleaned during reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue training as available. Continue the use of BMPs in moving/landscaping operations. Continue to use good house keeping procedures to reduce the impact of vehicle / equipment maintenance and washing.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Binghamton |
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SPDES ID

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Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> |
|---|---|---|
| Street Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Bridge Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Other..... | <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Binghamton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 0 | 9 |
|---|---|---|---|---|---|---|---|---|

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

| | | | | |
|--|--|--|---|---|
| | | | 3 | 0 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|---|---|---|
| | | 2 | 0 | 0 |
|--|--|---|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied # Acres

| | | | | | |
|---|--|--|--|---|--|
| 0 | | | | . | |
|---|--|--|--|---|--|

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|

4. What was the date of the last training?

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 7 | / | 2 | 4 | / | 2 | 0 | 1 | 6 |
|---|---|---|---|---|---|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | | |
|--|---|---|---|
| | 6 | 7 | % |
|--|---|---|---|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------|
| Town of Binghamton |
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SPDES ID

| | | | | | | | | |
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| N | Y | R | 2 | 0 | A | 0 | 0 | 9 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Self assess municipal operations and train personnel in procedures.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Self assessment has identified potential pollutants and training has promoted proper procedures. Eight additional training elements were covered.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue training and proper procedures.
Implement capital improvement projects.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Chenengo |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 2 | 7 |
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Other..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Chenengo |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 2 | 7 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 6 | 6 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|---|---|---|
| | | 1 | 0 | 0 |
|--|--|---|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied # Acres

| | | | | | | |
|---|--|--|--|--|---|--|
| 0 | | | | | . | |
|---|--|--|--|--|---|--|

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 0 | 2 |
|---|---|

 /

| | |
|---|---|
| 1 | 0 |
|---|---|

 /

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Chenengo |
|------------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| 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?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to improve on staff training and log of improvements. Possible IPM programs for parks and recreation.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|-----------------|
| Town of Conklin |
|-----------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 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 Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|-----------------|
| Town of Conklin |
|-----------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 5 | 5 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 3 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 4 | 1 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 3 | 9 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 6 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied # Acres

| | | | | | | |
|---|--|--|--|--|---|--|
| 0 | | | | | . | |
|---|--|--|--|--|---|--|

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|

4. What was the date of the last training?

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 7 | / | 2 | 4 | / | 2 | 0 | 1 | 6 |
|---|---|---|---|---|---|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 3 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | | |
|---|---|---|---|
| 1 | 0 | 0 | % |
|---|---|---|---|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|-----------------|
| Town of Conklin |
|-----------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 5 | 5 |
|---|---|---|---|---|---|---|---|---|

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 incidents 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?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern. Continue to attend stormwater management training when available.

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

| | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|--|---|---|--|---|---|---|---|---|---|---|---|---|
| T | J | O | W | N | | O | F | | D | I | C | K | I | N | S | O | N |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 4 | 3 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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|---|---|---|---|
| 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 |
|---|---|---|---|---|---|---|---|---|

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

| | | | | |
|--|--|--|---|---|
| | | | 1 | 0 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 4 | 7 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | | |
|---|--|--|--|--|---|--|
| 0 | | | | | . | |
|---|--|--|--|--|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 6 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 1 | 2 |
|---|---|

 /

| | |
|---|---|
| 0 | 0 |
|---|---|

 /

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 4 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 7 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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|---|---|---|---|
| 2 | 0 | 1 | 5 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TJOWN OF DICKINSON

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 4 | 3 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

CLEANING OF STREETS AND PARKING LOTS, INSPECTION OF CATCHBASINS, AND GOOD HOUSEKEEPING. Measurable goal is to reduce pollutants of concern through the use of good housekeeping programs.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

THE SWEEPING WAS DONE MORE THAN ONCE AND THE CATCHBASINS WERE INSPECTED. There has been a decrease in migration of materials to the streams and rivers due to catch basin and culvert cleaning.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

ALL EMPLOYEES GET GOOD HOUSEKEEPING TRAINING ONCE A YEAR. Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|---------------------|
| VILLAGE OF ENDICOTT |
|---------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 4 | 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.

| <u>Operation/Activity/Facility</u> | <u>Self-Assessment</u> <u>Operation/Activity/Facility</u> <u>performed within the past 3</u> | | | |
|---|--|-------------------------------------|--------------------------------------|-------------------------------------|
| | <u>Addressed in SWMP?</u> | | <u>years?</u> | |
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Bridge Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres [][] [] [] 1 8
- Streets Swept (Number of miles X Number of times swept) # Miles [][] 2 5 0
- Catch Basins Inspected and Cleaned Where Necessary # [][][][][]
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # [][][][][]
- Phosphorus Applied In Chemical Fertilizer # Lbs. [][][][][]
- Nitrogen Applied In Chemical Fertilizer # Lbs. [][][][][]
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres [][][][][] . []

3. How many stormwater management trainings have been provided to municipal employees during this reporting period? [][][][] 1

4. What was the date of the last training? 0 5 / 2 9 / 2 0 1 5

5. How many municipal employees have been trained in this reporting period? [][] 2

6. What percent of municipal employees in relevant positions and departments receive stormwater management training? [][] 2 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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. 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.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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 |
|---|---|---|---|---|---|---|---|---|

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 | 9 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 5 | 0 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|---|---|--|--|---|---|
| 0 | 0 | | | . | 0 |
|---|---|--|--|---|---|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 1 | 1 |
|---|---|

 /

| | |
|---|---|
| 0 | 5 |
|---|---|

 /

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 5 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|---|---|
| | 1 | 2 |
|--|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------|
| Town of Fenton |
|----------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 7 | 8 |
|---|---|---|---|---|---|---|---|---|

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.

Staff Training

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

No issues to date

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 0 |
|--|--|--|---|

(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).

Additional Staff Training

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 0 | 1 |
|---|---|---|---|---|---|---|---|---|

Name of MS4/Coalition

| |
|-------------------------|
| Village of Johnson City |
|-------------------------|

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**

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>years?</u> | |
|---|--------------------------------------|-------------------------------------|--------------------------------------|-------------------------------------|
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Bridge Maintenance..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 3 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|---|---|---|
| | | 5 | 0 | 0 |
|--|--|---|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 1 | 9 |
|--|--|--|---|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | | |
|---|--|--|--|--|---|--|
| 0 | | | | | . | |
|---|--|--|--|--|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

4. What was the date of the last training?

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 3 | / | 0 | 7 | / | 2 | 0 | 1 | 6 |
|---|---|---|---|---|---|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|---|---|
| | 2 | 4 |
|--|---|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | | |
|---|---|---|---|
| 1 | 0 | 0 | % |
|---|---|---|---|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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 Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village continues to train employees regarding municipal operations that could possibly contribute POCs to the MS4 system.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

During this reporting period the street sweeper was utilized 632 hours, the vacuum truck was utilized 440 hours for cleaning catchbasins, the loader/backhoe were utilized 264 hours for cleaning creeks & ditches and a total of 2568 manhours were utilized for this Measurable Goal. Also, storm drainage markers are continued to be placed at catchbasins that state; "No Dumping Drains to River". Also, during street re-construction projects CBs are replaced with castings that have "No Dumping....".

C. How many times was this observation measured or evaluated in this reporting period?

| | | |
|---|---|---|
| 1 | 6 | 7 |
|---|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village will continue to train employees responsible for municipal operations that could potentially contribute to the MS4 system. The Village will continue its operations of street sweeping, catchbasin cleaning, creek/open ditch maintenance and installation of storm drainage markers.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

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 |
|---|---|---|---|---|---|---|---|---|

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.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|----------------------------------|---|----------------------------------|
| | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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|---|---|---|---|
| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Kirkwood |
|------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 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 |
|--|--|---|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|---|---|--|--|---|---|
| 0 | 0 | | | . | 0 |
|---|---|--|--|---|---|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 0 | 7 |
|---|---|

 /

| | |
|---|---|
| 2 | 4 |
|---|---|

 /

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|---|---|
| | 6 | 7 |
|--|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Kirkwood |
|------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 7 | 2 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

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?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern. Continue to attend stormwater management training when available.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|---------------------------|
| VILLAGE OF PORT DICKINSON |
|---------------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 8 | 0 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|-------------------------------------|---|-------------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Bridge Maintenance..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|---------------------------|
| VILLAGE OF PORT DICKINSON |
|---------------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 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 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | | |
|---|--|--|--|--|---|--|
| 0 | | | | | . | |
|---|--|--|--|--|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 0 | 7 |
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| | |
|---|---|
| 2 | 4 |
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| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 6 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|---|---|
| | 6 | 7 |
|--|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

VILLAGE OF PORT DICKINSON

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 8 | 0 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

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.

No observed pollutants are reaching the streams and rivers due to street sweeping and catch-basin cleaning.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 3 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern. Continue to encourage Village personnel to attend good housekeeping training each reporting period.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

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.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|--------------------------|---|--------------------------|
| | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Hydrologic Habitat Modification..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres
- Streets Swept (Number of miles X Number of times swept) # Miles
- Catch Basins Inspected and Cleaned Where Necessary #
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #
- Phosphorus Applied In Chemical Fertilizer # Lbs.
- Nitrogen Applied In Chemical Fertilizer # Lbs.
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

4. What was the date of the last training? / /

5. How many municipal employees have been trained in this reporting period?

6. What percent of municipal employees in relevant positions and departments receive stormwater management training? %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

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

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town of Owego will continue to develop an annual review procedure of maintenance and monitoring programs for each municipal department

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Development of annual review procedure continues.

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).

Provide training to municipal employees.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---------------|
| Town of Union |
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SPDES ID

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| 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 coalition

How many MS4s contributed to this report?

| | | |
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| | | |
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1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|--------------------------|---|-------------------------------------|
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Bridge Maintenance..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 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 Union

SPDES ID
N Y R 2 0 A 0 5 0

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres
- Streets Swept (Number of miles X Number of times swept) # Miles 9 9
- Catch Basins Inspected and Cleaned Where Necessary # 2 6 8
- 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
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 0 .

3. How many stormwater management trainings have been provided to municipal employees during this reporting period? 2

4. What was the date of the last training? 1 0 / 2 8 / 2 0 1 5

5. How many municipal employees have been trained in this reporting period? 3 1

6. What percent of municipal employees in relevant positions and departments receive stormwater management training? 1 0 0 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Union

SPDES ID

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|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Provided ewaste collection and continue to participate in drug collections to prevent improper disposal at landfill. Continue to promote good housekeeping efforts at municipal facilities. 182 Storm drain markers installed.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Amount of e waste collected. Amount of roads swept and storm drains cleaned

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).

Increase staff training on BMP and self evaluations. Install storm drain markers.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| Town of Vestal |
|----------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 6 | 4 |
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
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1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| Town of Vestal |
|----------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 6 | 4 |
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2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 8 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 8 | 0 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|---|---|---|
| | | 4 | 0 | 0 |
|--|--|---|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 3 | 2 |
|--|--|--|---|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied # Acres

| | | | | | | |
|---|--|--|--|--|---|--|
| 0 | | | | | . | |
|---|--|--|--|--|---|--|

 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 3 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 0 | 3 |
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| 1 | 9 |
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| | | | |
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| 2 | 0 | 1 | 6 |
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5. How many municipal employees have been trained in this reporting period?

| | | |
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
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| 1 | 0 | 0 |
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 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------|
| Town of Vestal |
|----------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 6 | 4 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town will continue to train employees regarding municipal operations that could possibly contribute POCs to the MS4 system. The Town will continue street sweeping, cleaning catch basins, storm pipes and ditches each year and also provide brush and leaf pick up which it recycles into wood chip mulch and leaf mulch for the use of the residents.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The accurate documentation of street sweeping, catch basin cleaning and storm pipe cleaning is allowing greater efficiency each year. Crews are now able to more readily identify areas that may need additional attention.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 2 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to train employees responsible for municipal operations to identify issues and problem areas as well as improve or management of the MS4 system. The Town will continue its operations of brush and leaf pick up, street sweeping, catch basin cleaning, open ditch maintenance and installation of storm drainage markers.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|---------------|
| BROOME COUNTY |
|---------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 3 | 2 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> |
|---|---|---|
| Street Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Bridge Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input type="radio"/> No |
| Hydrologic Habitat Modification..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Other..... | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

BROOME COUNTY

SPDES ID

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|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|---|---|
| | | | 1 | 1 |
|--|--|--|---|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|---|---|---|
| | | 3 | 4 | 0 |
|--|--|---|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|---|---|---|
| | | 1 | 3 | 8 |
|--|--|---|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 4 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|---|---|
| | | | 4 | 7 |
|--|--|--|---|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|---|---|---|---|
| | 4 | 1 | 8 | 0 |
|--|---|---|---|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|---|---|---|---|--|
| | 4 | 7 | 5 | . | |
|--|---|---|---|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
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| | | | | 2 |
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4. What was the date of the last training?

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 3 | / | 0 | 8 | / | 2 | 0 | 1 | 6 |
|---|---|---|---|---|---|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|---|---|
| | 1 | 1 |
|--|---|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | | |
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| | 5 | 0 | % |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

BROOME COUNTY

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASURABLE GOAL #6A -- To complete a self-assessment every 3 years for each of the 19 County facilities within the MS4 jurisdictional area, and then to use these assessments to evaluate established good housekeeping and implement changes as needed.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

As the good housekeeping documents have been developed, these self-assessments have been reviewed and updated, 15 were updated in the 2013-2014 reporting year, and the final 4 were updated in the 2014-2015 reporting year. The target will be to complete all of them again during the 2016-2017 reporting year.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 0 |
|--|--|--|---|

(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).

All 19 self-assessments will be updated during the 2016-2017 reporting period, including on-site inspections by DPW staff.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

BROOME COUNTY

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASURABLE GOAL #6B -- 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. Although we did sweep roads and parking lots, we did not get the MS4 boundary definition completed as described.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|---|---|---|
| | 3 | 4 | 0 |
|--|---|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue program as established, but complete delineation of what is within MS4 boundaries and create checklist information for Highways to utilize.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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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

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.

MEASUREABLE GOAL #6C -- To clean and inspect 50% of catch basins and drop inlets within the MS4 boundary annually.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Cleaning / inspection is occurring by County Highway Division each year, however, we do not have confirmation whether 50% of structures as denoted in this goal are actually being cleaned and inspected due to the lack of good mapping.

C. How many times was this observation measured or evaluated in this reporting period?

| | | |
|---|---|---|
| 1 | 3 | 8 |
|---|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue program as established. And -- priority within 2016 to complete mapping of closed systems.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

BROOME COUNTY

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASUREABLE GOAL #6D -- To minimize the amount of phosphorus and nitrogen applied in chemical fertilizers.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Chemical fertilizers are only being used / applied at the En Joie golf course, they are no longer used in our Parks or other facilities.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue as developed and implemented, and continue to monitor materials for phosphorus / nitrogen contents.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| BROOME COUNTY |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASUREABLE GOAL #6E -- To minimize the acreage of herbicide/pesticide usage within the MS4 boundaries.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Herbicides are only being used along County roadways at guide rail locations, and at En Joie golf course.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Review minimization to the greatest extent possible and monitor products used.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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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

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASUREABLE GOAL #6F -- To develop staff training related to the stormwater program, IDDE, and good housekeeping measures, and to have 100% of County staff educated in accordance with this goal. This goal will be accomplished in part by the BTSC as part of MCM-1 and MCM-2, they will assist in the creation of applicable training materials and opportunities.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The step identified to be completed during this reporting period was only partially completed. A County based stormwater management link was established on our website for employee use and education; however sending out broadcast emails was to make employees aware, was not done.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The next step in this process is to reach out to all employees via email (complete goal from last year), and then to get all facility managers and their staff up to speed with respect to good housekeeping expectations.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

BROOME COUNTY

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.

MEASUREABLE GOAL #6G -- To target 100% distribution of good housekeeping guidelines and training to new County employees upon orientation. This goal will be accomplished in part by the BTSC as part of MCM-1 and MCM-2, they will assist in the creation of applicable training materials and opportunities.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

This is a newly defined goal within MCM-6 of the County's SWMP that is related directly to County staff as opposed to the general public, and no progress was made during this reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 0 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Goal this reporting period is to create pamphlet described in earlier goals and have this available to all new employees during their orientation with the Personnel Department.

MS4 Annual Report Form

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASUREABLE GOAL #6H -- To maintain the County's existing PBS/SPCC plans and training as established and to keep these plans current with any changes in state and/or federal regulations.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Existing SPCC plans are reviewed annually for compliance with current federal and state regulations, and all staff training at each facility has been completed during this reporting period as specified in the SPCC reports. During this reporting period 22 staff members completed this update training.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|---|---|
| | | 2 | 2 |
|--|--|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue program as established tracking that 100% of staff training is being completed as stipulated within the SPCC plan documents. During this next reporting period the County will develop a list of all staff members at each facility or within each department that require the SPCC training.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASUREABLE GOAL #6I -- To complete an updated and detailed inventory of County buildings and facilities within the MS4 boundaries (including updated mapping), and to develop facility specific good housekeeping programs for each.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

There are 14 County facilities, 4 County parks, and 1 County Golf Course located within the MS4 boundary. The County has developed and finalized good housekeeping documents for all of these locations and have begun specific facility mapping. Mapping at 9 facilities and 2 parks has been completed (4 additional surveys were completed in 2015). Full implementation of the good housekeeping plans was not accomplished during this reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 4 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

During the next reporting period detailed facility mapping/survey will continue to supplement the good housekeeping documents.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

BROOME COUNTY

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MEASUREABLE GOAL #6J -- To implement program tracking and record keeping that is individualized for each County facility based on the good housekeeping documents and in accordance with the NYSDEC tracking system and forms so that the County will be in a position to transition to this annual reporting method once it is implemented by the DEC.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

This is a new program goal that has been established in the latest SWMPP update and has not yet been implemented.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 0 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

This goal will be progressed in coordination with MCM-6I goal.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

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| TIOGA COUNTY |
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
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1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|-------------------------------------|---|-------------------------------------|
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Bridge Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Parks and Open Space..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 5 | 5 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied # Acres

| | | | | | | |
|---|--|--|--|--|---|--|
| 0 | | | | | . | |
|---|--|--|--|--|---|--|

 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
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|---|---|
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|---|---|

 /

| | | | |
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| 2 | 0 | 1 | 6 |
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5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|--|--|
| | | |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TIOGA COUNTY

SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 4 | 7 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

-Received a Satisfactory rating NYS DEC on the MS4 Stormwater Audit conducted on 2/25/2013.
-Tioga County Public Works continues to follow the best management practices as defined in the "Tioga County and Town of Owego Stormwater Management Program Plan", which is effective through 2020.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

No illicit discharges or spills, leaks observed.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|---|---|---|
| | 3 | 6 | 5 |
|--|---|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to follow EPA/OSHA self audit recommendations conducted more than 6 years ago, which have also been incorporated into the Tioga County and Town of Owego Stormwater Management Program Plan 2020.
The NYS DEC Audit Report recommended conducting this audit more often.

MS4 Annual Report Form

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| 2 | 0 | 1 | 6 |
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Name of MS4/Coalition

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| City of Binghamton | | | | | | | | | | | | | | | | | | | |
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Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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| | | 1 |
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MS4s must answer the questions or check NA as indicated in the table below.

| MS4 Description | Answer | Check NA | (POC) |
|---------------------------------|--------------------------|------------------------|------------------------|
| NYC EOH Watershed | | | |
| Traditional Land Use | 1,2,3,4,5,6,7a-d,8a,8b,9 | 10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,2,3,4,7a-d,8a,8b,9 | 5,10,11,12 | Phosphorus |
| Non-Traditional | 1,2,77a-d,8a,8b,9 | 3,4,5,10,11,12 | Phosphorus |
| Onondaga Lake Watershed | | | |
| Traditional Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Greenwood Lake Watershed | | | |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Oyster Bay | | | |
| Traditional Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Non-Traditional | 1,4,7a-d,9 | 2,3,4,5,8a,8b,10,11,12 | Pathogens |
| Peconic Estuary | | | |
| Traditional Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Traditional Non-Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Non-Traditional | 1,4,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Pathogens and Nitrogen |
| Oscawana Lake Watershed | | | |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| LI 27 Embayments | | | |
| Traditional Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Non-Traditional | 1,2,3,4,7a-d,9 | 5,6,8a,8b,10,11,12 | Pathogens |

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? Yes No N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes No N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

| | | |
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 %

Estimate what percentage was mapped in this reporting period.

| | | |
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 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| City of Binghamton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 4 | 1 |
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3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes No N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?

| | | |
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 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? Yes No N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? Yes No N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? Yes No N/A

7b. How many projects have been sited in this reporting period?

| | | |
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7c. What percent of the projects included in 7b have been completed in this reporting period?

| | | |
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| | | 0 |
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 %

7d. What percent of projects planned in previous years have been completed?

| | | |
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 %
 No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes No N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? Yes No N/A

MS4 Annual Report Form

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| 2 | 0 | 1 | 6 |
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Name of MS4/Coalition

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| City of Binghamton |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 4 | 1 |
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9. Has your MS4/Coalition developed and implemented a program of native planting?
 Yes No N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?
 Yes No N/A
11. Does your MS4/Coalition have a pet waste bag program?
 Yes No N/A
12. Does your MS4/Coalition have a program to manage goose populations?
 Yes No N/A

MS4 Annual Report Form

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Name of MS4/Coalition

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| Town of Binghamton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 0 | 9 |
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Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
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MS4s must answer the questions or check NA as indicated in the table below.

| MS4 Description | Answer | Check NA | (POC) |
|---------------------------------|--------------------------|------------------------|------------------------|
| NYC EOH Watershed | | | |
| Traditional Land Use | 1,2,3,4,5,6,7a-d,8a,8b,9 | 10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,2,3,4,7a-d,8a,8b,9 | 5,10,11,12 | Phosphorus |
| Non-Traditional | 1,2,77a-d,8a,8b,9 | 3,4,5,10,11,12 | Phosphorus |
| Onondaga Lake Watershed | | | |
| Traditional Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Greenwood Lake Watershed | | | |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Oyster Bay | | | |
| Traditional Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Non-Traditional | 1,4,7a-d,9 | 2,3,4,5,8a,8b,10,11,12 | Pathogens |
| Peconic Estuary | | | |
| Traditional Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Traditional Non-Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Non-Traditional | 1,4,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Pathogens and Nitrogen |
| Oscawana Lake Watershed | | | |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| LI 27 Embayments | | | |
| Traditional Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Non-Traditional | 1,2,3,4,7a-d,9 | 5,6,8a,8b,10,11,12 | Pathogens |

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? Yes No N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes No N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

| | | |
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 %

Estimate what percentage was mapped in this reporting period.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

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| Town of Binghamton |
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SPDES ID

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3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes No N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?

| | | |
|--|--|--|
| | | |
|--|--|--|

 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? Yes No N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? Yes No N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? Yes No N/A

7b. How many projects have been sited in this reporting period?

| | | |
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| | | |
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7c. What percent of the projects included in 7b have been completed in this reporting period?

| | | |
|--|--|--|
| | | |
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 %

7d. What percent of projects planned in previous years have been completed?

| | | |
|--|--|--|
| | | |
|--|--|--|

 %
 No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes No N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? Yes No N/A

MS4 Annual Report Form

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------|
| Town of Binghamton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 0 | 9 |
|---|---|---|---|---|---|---|---|---|

9. Has your MS4/Coalition developed and implemented a program of native planting?

Yes No N/A

10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?

Yes No N/A

11. Does your MS4/Coalition have a pet waste bag program?

Yes No N/A

12. Does your MS4/Coalition have a program to manage goose populations?

Yes No N/A

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Fenton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 7 | 8 |
|---|---|---|---|---|---|---|---|---|

Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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| | | |
|--|--|--|

MS4s must answer the questions or check NA as indicated in the table below.

| MS4 Description | Answer | Check NA | (POC) |
|---------------------------------|--------------------------|------------------------|------------------------|
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| Traditional Land Use | 1,2,3,4,5,6,7a-d,8a,8b,9 | 10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,2,3,4,7a-d,8a,8b,9 | 5,10,11,12 | Phosphorus |
| Non-Traditional | 1,2,77a-d,8a,8b,9 | 3,4,5,10,11,12 | Phosphorus |
| Onondaga Lake Watershed | | | |
| Traditional Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Greenwood Lake Watershed | | | |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Oyster Bay | | | |
| Traditional Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Non-Traditional | 1,4,7a-d,9 | 2,3,4,5,8a,8b,10,11,12 | Pathogens |
| Peconic Estuary | | | |
| Traditional Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Traditional Non-Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Non-Traditional | 1,4,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Pathogens and Nitrogen |
| Oscawana Lake Watershed | | | |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| LI 27 Embayments | | | |
| Traditional Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Non-Traditional | 1,2,3,4,7a-d,9 | 5,6,8a,8b,10,11,12 | Pathogens |

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? Yes No N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes No N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

| | | |
|---|---|---|
| 1 | 0 | 0 |
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 %

Estimate what percentage was mapped in this reporting period.

| | | |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Fenton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 7 | 8 |
|---|---|---|---|---|---|---|---|---|

3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes No N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? Yes No N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? Yes No N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? Yes No N/A

7b. How many projects have been sited in this reporting period?

| | | |
|--|--|---|
| | | 0 |
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7c. What percent of the projects included in 7b have been completed in this reporting period?

| | | |
|--|--|---|
| | | 0 |
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 %

7d. What percent of projects planned in previous years have been completed?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

 %
 No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes No N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? Yes No N/A

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| Town of Fenton |
|----------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 7 | 8 |
|---|---|---|---|---|---|---|---|---|

9. Has your MS4/Coalition developed and implemented a program of native planting?

Yes No N/A

10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?

Yes No N/A

11. Does your MS4/Coalition have a pet waste bag program?

Yes No N/A

12. Does your MS4/Coalition have a program to manage goose populations?

Yes No N/A

MS4 Annual Report Form

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Name of MS4/Coalition

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| Town of Union |
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SPDES ID

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| 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):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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| | | |
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MS4s must answer the questions or check NA as indicated in the table below.

| MS4 Description | Answer | Check NA | (POC) |
|---------------------------------|--------------------------|------------------------|------------------------|
| NYC EOH Watershed | | | |
| Traditional Land Use | 1,2,3,4,5,6,7a-d,8a,8b,9 | 10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,2,3,4,7a-d,8a,8b,9 | 5,10,11,12 | Phosphorus |
| Non-Traditional | 1,2,77a-d,8a,8b,9 | 3,4,5,10,11,12 | Phosphorus |
| Onondaga Lake Watershed | | | |
| Traditional Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Greenwood Lake Watershed | | | |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Oyster Bay | | | |
| Traditional Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Non-Traditional | 1,4,7a-d,9 | 2,3,4,5,8a,8b,10,11,12 | Pathogens |
| Peconic Estuary | | | |
| Traditional Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Traditional Non-Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Non-Traditional | 1,4,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Pathogens and Nitrogen |
| Oscawana Lake Watershed | | | |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| LI 27 Embayments | | | |
| Traditional Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Non-Traditional | 1,2,3,4,7a-d,9 | 5,6,8a,8b,10,11,12 | Pathogens |

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? Yes No N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes No N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

| | | |
|--|--|--|
| | | |
|--|--|--|

 %

Estimate what percentage was mapped in this reporting period.

| | | |
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| | | |
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 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---------------|
| Town of Union |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 5 | 0 |
|---|---|---|---|---|---|---|---|---|

3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes No N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?

| | | |
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| | | |
|--|--|--|

 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? Yes No N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? Yes No N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? Yes No N/A

7b. How many projects have been sited in this reporting period?

| | | |
|--|--|--|
| | | |
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7c. What percent of the projects included in 7b have been completed in this reporting period?

| | | |
|--|--|--|
| | | |
|--|--|--|

 %

7d. What percent of projects planned in previous years have been completed?

| | | |
|--|--|--|
| | | |
|--|--|--|

 %
 No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes No N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? Yes No N/A

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 1 | 5 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Union |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 5 | 0 |
|---|---|---|---|---|---|---|---|---|

9. Has your MS4/Coalition developed and implemented a program of native planting?
 Yes No N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?
 Yes No N/A
11. Does your MS4/Coalition have a pet waste bag program?
 Yes No N/A
12. Does your MS4/Coalition have a program to manage goose populations?
 Yes No N/A

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition TIOGA COUNTY

SPDES ID
N Y R 2 0 A 0 4 7

Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

MS4s must answer the questions or check NA as indicated in the table below.

| MS4 Description | Answer | Check NA | (POC) |
|---------------------------------|--------------------------|------------------------|------------------------|
| NYC EOH Watershed | - | - | - |
| Traditional Land Use | 1,2,3,4,5,6,7a-d,8a,8b,9 | 10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,2,3,4,7a-d,8a,8b,9 | 5,10,11,12 | Phosphorus |
| Non-Traditional | 1,2,77a-d,8a,8b,9 | 3,4,5,10,11,12 | Phosphorus |
| Onondaga Lake Watershed | - | - | - |
| Traditional Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phosphorus |
| Greenwood Lake Watershed | - | - | - |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Oyster Bay | - | - | - |
| Traditional Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pathogens |
| Non-Traditional | 1,4,7a-d,9 | 2,3,4,5,8a,8b,10,11,12 | Pathogens |
| Peconic Estuary | - | - | - |
| Traditional Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Traditional Non-Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | Pathogens and Nitrogen |
| Non-Traditional | 1,4,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Pathogens and Nitrogen |
| Oscawana Lake Watershed | - | - | - |
| Traditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Traditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| Non-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Phosphorus |
| LI 27 Embayments | - | - | - |
| Traditional Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Traditional Non-Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | Pathogens |
| Non-Traditional | 1,2,3,4,7a-d,9 | 5,6,8a,8b,10,11,12 | Pathogens |

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? Yes No N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes No N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far. %

Estimate what percentage was mapped in this reporting period. %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TIOGA COUNTY

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes No N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?

| | | |
|--|--|--|
| | | |
|--|--|--|

 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? Yes No N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? Yes No N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? Yes No N/A

7b. How many projects have been sited in this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

7c. What percent of the projects included in 7b have been completed in this reporting period?

| | | |
|--|--|--|
| | | |
|--|--|--|

 %

7d. What percent of projects planned in previous years have been completed?

| | | |
|--|--|--|
| | | |
|--|--|--|

 %

No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes No N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? Yes No N/A

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
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| 2 | 0 | 1 | 6 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| TIOGA COUNTY |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

9. Has your MS4/Coalition developed and implemented a program of native planting?

Yes No N/A

10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?

Yes No N/A

11. Does your MS4/Coalition have a pet waste bag program?

Yes No N/A

12. Does your MS4/Coalition have a program to manage goose populations?

Yes No N/A