### MS4 Annual Report Cover Page

MCC form for period ending March 9, 2019

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

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#### Choose one:

Fill in SPDES ID in upper right hand corner.

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### OR

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

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

Name of Single Entity				
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#### OR

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

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

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## MS4 Annual Report Cover Page

MCC form for period ending March 9, 2019

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

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

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

Each MS4 must submit an MCC form.

### Section 1 - MCC Identification Page

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

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

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

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

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#### **Section 2 - Contact Information**

Important Instructions - Please Read

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

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

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

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

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

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

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If Yes, complete information below.								
Submit a separate sheet for each partner. Information provided in								
accepted. If your MS4 cooperated with a coalition, submit one s coalition. It is not necessary to include a separate sheet for each						ne		
If No, proceed to Section 4 - Certification Statement.	14194 11	i tile t	Oan	tion				
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MCC form for period ending March 9, 2 0 1 9

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Name of MS4 City of Binghamton	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.

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

MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway

Albany, New York 12233-3505

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

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

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:

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- A Joint Report

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

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#### **Section 2 - Contact Information**

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

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

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

First Name T i m o t h y	MI Last Name P W h i t e s e l l
Title	
Supervisor	
Address	
2 7 9 P a r k A v e n u e	
City	State Zip
Binghamton	N Y 1 3 9 0 3 -
eMail	
supervisor@town	ofbinghamton.com
Phone	County
<b>(</b> 6 0 7 <b>)</b> 7 7 2 <b>-</b> 0 3 5 7	Broome

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

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

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

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

First Name	MI Last Name
John	P Mastronardi
Title	
Report Preparer	
Address	
13 South Washing	ton Street
City	State Zip
Binghamton	N Y 1 3 9 0 3 -
eMail	
j o h n @ g r i f f i t h s e r	n g i n e e r i n g . c o m
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MCC form for period ending March 9, 2 0 1 9

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

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Name of MS4 TOWN OF BINGHAMTON	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	MI Last Name
ELIZAbeth	A Kounds
Title (Clearly print title of individual signing report)	
Supervisor Town	of Binghamton
Signature	7
lelizabett a fori	Date
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Send completed form and any attachments to the DEC Central Office at:

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

MCC form for period ending March 9, 2 0 1

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Each MS4 must submit an MCC form.

### Section 1 - MCC Identification Page

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- O A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

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

If Joint Report, enter coalition name:

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#### **Section 2 - Contact Information**

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

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

First Name	Ml Last Name
Allexander	N Urda, P.E.
Title	
Engineerforthe	Town
Address	
1 0 6 Main Street	Suite 4
City	State Zip
City Windsor	State Zip  N Y 1 3 8 6 5 -
Windsor	
Windsor	N Y 1 3 8 6 5 -
Windsor eMail	N Y 1 3 8 6 5 -

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

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

#### **Section 2 - Contact Information**

Important Instructions - Please Read

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

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- 3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
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- O Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name	Ml Last Name
John	Freer
Title	
Stormwater Manag	gement Officer
Address	
1 5 2 9 N Y S R o u t e	1 2
City	State Zip
Binghamton	
	N Y 1 3 9 0 1 -
eMail	NY 13901 -
eMail	

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

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Name of MS4 Town of Chenango		N	Y	R	2	0	Α	1	2	7
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### **Section 2 - Contact Information**

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

First Name	MI Last Name
Jo Anne	K l e n o v i k
Title	
Town Supervisor	
Address	
1 5 2 9 N Y S R o u t e 1	1 2
City	State Zip
B i n g h a m t o n	N Y 1 3 9 0 1 -
eMail	
supervisor@town	o f c h e n a n g o . c o m
Phone	County
<b>(</b> 6 0 7 <b>)</b> 6 4 8 <b>-</b> 4 8 0 9	Broome

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

Name of MS4 Town of Chenango  N Y R 2 0 A 1 2 7  Section 3 - Partner Information  Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes, complete information below.  Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.  If No, proceed to Section 4 - Certification Statement.  Partner/CoalitionName  B r o o m e T i o g a S t o r m w a t e r C o a 1 i t i o n Partner/CoalitionName(con't.)  SPDES Partner ID-If applicable  N Y R 2 0
Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  ● Yes O No If Yes, complete information below.  Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition. If No, proceed to Section 4 - Certification Statement.  Partner/CoalitionName  Broome Tiogal Stormwwateer CoalitionName(con't.)  Croome Tiogal Stormwwateer CoalitionName(con't.)  SPDES Partner ID - If applicable Nyr R 2 0
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If No, proceed to Section 4 - Certification Statement.   Partner/CoalitionName  B r o o m e T i o g a S t o r m w a t e r C o a 1 i t i o n   Partner/CoalitionName (con't.)  C . Q u i d o r t , S T E R P D B N N Y R 2 0   Address  M e t r o c e n t e r , 4 9 C o u r t S t , s t e 2 2 2 2
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City State Zip
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j g r e g o r y @ s t e n y . o r g
Phone Legally Binding Agreement in accordance
( 6 0 7 ) 7 2 4 - 1 3 2 7 with GP-0-08-002 Part IV.G.?
What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)
• MM1 T r a i n i n g / E d u c a t i o n a l o u t r e a c h
• MM2 E v e n t i n v o l v e m e n t
O MM3
O MM4
O MM5
O MM6
Additional tasks/responsibilities
Additional tasks/responsibilities
Additional tasks/responsibilities  O Watershed Improvement Strategy Best Management Practices required for MS4s in impaired

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

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### **Section 4 - Certification Statement**

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

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

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

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

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

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Each MS4 must submit an MCC form.

### Section 1 - MCC Identification Page

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

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

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

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

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

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#### **Section 2 - Contact Information**

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- O Stormwater Management Program (SWMP) Coordinator
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MCC form for period ending March 9, 2 0 1 9

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

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

### **Section 4 - Certification Statement**

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

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First Name W i 1 1 i a m	MI	Last Name D u m i a n
Title (Clearly print title of individual signing report)  Superular visor		
Signature		Date 0 4 / 1 7 / 2 0 1 9

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

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

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

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- O A Single Entity (Per Part II.E of GP-0-10-002)
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MCC form for period ending March 9, 2 0 1 9

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

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Name of MS4 TOWN OF DICKINSON

# MS4 Municipal Compliance Certification (MCC) Form

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

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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?  O Yes C	ig 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.	
/ <b>1</b>	
Partner/CoalitionName  B R O O M E - T I O G A - S T O R M W A T E R C O A L I T I O	N
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Phone Legally Binding Agreement in accordance	
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What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Ta	sks)
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MM1 MULTIPLE TASKS	<del>     </del>
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● MM4 SWPPP REVIEWS, SITE INSPECTIO	N
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O MM5	
● MM6 H I G H W A Y S T A F F T R A I N I N G	
Additional tasks/responsibilities	
O Watershed Improvement Strategy Best Management Practices required for MS4s in impaired	
watersheds included in GP-0-08-002 Part IX.	
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MCC Page 3	

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

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

### **Section 4 - Certification Statement**

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

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

First Name	MI	Last Name
M I C H A E L		MARINACCIO
Title (Clearly print title of individual signing report)		
S U P E R V I S S O R		
Signature .		Date
Mikal Marenous		0 5 / 2 3 / 2 0 1 9

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

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

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

	SPL	LU	ID						
Name of MS4 Town of Fenton	N	Y	R	2	0	Α	0	7	8

Each MS4 must submit an MCC form.

### **Section 1 - MCC Identification Page**

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

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

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

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

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Name of MS4 Town of Fenton	L	L			L		L			L

### **Section 2 - Contact Information**

Important Instructions - Please Read

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

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

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

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

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

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

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Section 3 - Partner Information	ortina													
Did your MS4 work with partners/coalition to complete some or all permit requirements during this repperiod?	O No													
If Yes, complete information below.														
Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the														
coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.														
If No, proceed to Section 4 - Certification Statement.  Partner/CoalitionName														
Partner/CoalitionName														
Broome-TiogaStormwaterCoaliit														
Partner/Coalition Name (con't.)  SPDES Partner ID - If a														
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Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? • Yes	O No													
What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple	a Taeke)													
● MM1 Public Ed. Planning/Program:	i n g													
● MM2 V o l E v e n t s / A n n u a l R e p / M e e t i r	n g s													
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O MM4														
O MM5														
MM6 Training														
Additional tasks/responsibilities	ad													
O Watershed Improvement Strategy Best Management Practices required for MS4s in impair watersheds included in GP-0-08-002 Part IX.	u													
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MCC form for period ending March 9, 2 0 1 9

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### Section 4 - Certification Statement

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

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

First Name G a r y	MI J	Last Name H o 1 c o m b
Title (Clearly print title of individual signing report)  Town n Superviolet r v i sor		
Signature Young J. Holcomb	<del></del>	Date
10		05/07/2019

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

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

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

		SPL	ES	-ID						
Name of MS4 Town of Kirkwood		N	Y	R	2	0	Α	0	7	2
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Each MS4 must submit an MCC form.

### **Section 1 - MCC Identification Page**

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

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

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

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

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Name of MS4 Town of Kirkwood		N	Y	R	2	0	Α	0	7	2
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#### **Section 2 - Contact Information**

Important Instructions - Please Read

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

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

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

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

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

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

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#### **Section 2 - Contact Information**

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

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

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Name of MS4 Town of Kirkwood		L	<u> </u>	<u> </u>		L			<u> </u>

### **Section 2 - Contact Information**

Important Instructions - Please Read

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

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

First Name	MI Last Name
John	P Mastronardi
Title	
Town Engineer	
Address	
1 3 S. Washingto	n Street, Suite 1
City	State Zip
City B i n g h a m t o n	State Zip  N Y 1 3 9 0 3 -
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MCC form for period ending March 9, 2 0 1 9

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

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Name of MS4		N	Y	R	2	0	Α	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."

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

First Name G o r d o n	MI E	Last Nam K n i	fe	n								
Title (Clearly print title of individual signing report)  S u p e r v i s o r												
Signature  Lander & Infor			Da 0	te 4	]/	1	9	/	2	0	1	9

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

MCC form for period ending March 9,2019

page 100 miles and 100 miles a	SPDES ID
Name of MS4 Town of Owego	NYR20A079
Each MS4 must submit an MCC form.	
Section 1 - MCC Identification Page	
Indicate whether this MCC form is being submitted to certify endorsement	nt or acceptance of:
O 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 b	inding agreements.
If Joint Report, enter coalition name:	
Broome Tioga Stormwater	
Coalition	

MCC form for period ending March 9, 2019

	SPDES ID
Name of MS4 Town of Owego	NYR20A079
Section 2 - Contact Information	
Important Instructions - Please Read	
Contact information must be provided for <u>each</u> of the fo	following positions as indicated below:
<ol> <li>Principal Executive Officer, Chief Elected Official of GP-0-08-002 Part VI.J).</li> </ol>	
2. Duly Authorized Representative (Information for the Authorized Representative is signing this form)	is contact must only be submitted if a Duly
3. The Local Stormwater Public Contact (required per	GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Co coordination/implementation of SWMP).	oordinator (Individual responsible for
5. Report Preparer (Consultants may provide company	name in the space provided).
A separate sheet must be submitted for each position	n listed above unless more than one position is
filled by the same individual. If one individual fills once and check all positions that apply to that individual	multiple roles, provide the contact information
If a new Duly Authorized Representative is signing	this report, their contact information must be
provided and a signature authorization form, signed	by the Principal Executive Officer or Chief
Elected Official must be attached.	
For each contact, select all that apply:	
<ul> <li>Principal Executive Officer/Chief Elected Official</li> </ul>	
O Duly Authorized Representative	
O Local Stormwater Public Contact	
O Stormwater Management Program (SWMP) Coordinator	
O Report Preparer	
First Name MI	Last Name
Donald	Castellucci
Title	
Town of Owego Supervisor	
Address 2354 State Route 434	
	State Zip
City Apalachin	NY 1 3 7 3 2 -
eMail	
dcastellucci@townofowego.com	
Phone	County
<b>(</b> 6 0 7 <b>)</b> 6 8 7 <b>-</b> 0 1 2 3	Tioga

City

eMail

Phone

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Apalachih

dstandinger@townofowego.dom

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# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2019

Wice form for period ending march 3,
Name of MS4 Town of Owego NYR20A079
Section 2 - Contact Information
Important Instructions - Please Read
Contact information must be provided for <u>each</u> of the following positions as indicated below:
<ol> <li>Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).</li> </ol>
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)
<ol> <li>The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).</li> </ol>
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:
O Principal Executive Officer/Chief Elected Official
O Duly Authorized Representative
Local Stormwater Public Contact
● Stormwater Management Program (SWMP) Coordinator
Report Preparer
First Name  Debra  MI Last Name  Standinger
Title Planning & Zoning Administrator
Address 2354 State Route 434

State

Zip

1

3 7

3

2

County

MCC form for period ending March 9, 2019

SPDES ID

Name of MS4 Town of Owego	NYR20AD79
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all perperiod?	mit requirements during this reporting  Yes O No
If Yes, complete information below.  Submit a separate sheet for each partner. Information provided accepted. If your MS4 cooperated with a coalition, submit one coalition. It is not necessary to include a separate sheet for each	sheet with the name of the
If No, proceed to Section 4 - Certification Statement.	
Partner/CoalitionName Broome Tioga Stormwater Coalition	
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable  N Y R 2 0
Address 311 East Main Street	
City Sta Endicott N	
eMail dgolazeski@townofunion.com	
Phone Legally	y Binding Agreement in accordance P-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	
O MM3	
O MM4	
O MM5	
● MM6	
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MCC form for period ending March 9, 2019

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Section 4 - Certification Statement													
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Send completed form and any attachments to the DEC Central Office at:

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

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Each MS4 must submit an MCC form.

# **Section 1 - MCC Identification Page**

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

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

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

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

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### **Section 2 - Contact Information**

Important Instructions - Please Read

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

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

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

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

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

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

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

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#### **Section 4 - Certification Statement**

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

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

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

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

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

Section 3 - Partner Information  Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  If Yes, complete information below.  Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition. If No, proceed to Section 4 - Certification Statement.  Partner/CoalitionName	Name of MS4 Town of Vestal SPDES ID  N Y R 2 0 A 0 6 4														4																
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MCC form for period ending March 9, 2 0 1 9

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

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

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Each MS4 must submit an MCC form.

### **Section 1 - MCC Identification Page**

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

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

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- Report Preparer

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

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

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### **Section 4 - Certification Statement**

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

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

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

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

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

	SPDES ID
Name of MS4 Village of Johnson City	N Y R 2 0 A 1 0 1
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all periperiod?	nit requirements during this reporting  Yes O No
If Yes, complete information below.  Submit a separate sheet for each partner. Information provided accepted. If your MS4 cooperated with a coalition, submit one coalition. It is not necessary to include a separate sheet for eacl If No, proceed to Section 4 - Certification Statement.	sheet with the name of the
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Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable  N Y R 2 0 C 0 0 2
Address	
City Sta	te Zip
eMail	
	Binding Agreement in accordance P-0-08-002 Part IV,G.?
What tasks/responsibilities are shared with this partner (e.g. MM1	School Programs or Multiple Tasks)?
• MMI Public Education &	Outreach
• MM2 PublicInvolvementP	articipation
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Additional tasks/responsibilities	
<ul> <li>Watershed Improvement Strategy Best Management Practices watersheds included in GP-0-08-002 Part IX.</li> </ul>	s required for MS4s in impaired

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

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

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

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# MS4 Municipal Compliance Certification (MCC) Form

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

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## Section 4 - Certification Statement

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

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

First Name  K E V I N	MI M	Last Name B U R K E
Title (Clearly print title of individual signing report)  M A Y O R		
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Send completed form and any attachments to the DEC Central Office at:

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

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#### **Section 2 - Contact Information**

Important Instructions - Please Read

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

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

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

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

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

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

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### Section 4 - Certification Statement

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

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

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

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Each MS4 must submit an MCC form.

### Section 1 - MCC Identification Page

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

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

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

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#### **Section 2 - Contact Information**

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

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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.

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- Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
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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.																														
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What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?															ke\9															
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## MS4 Municipal Compliance Certification (MCC) Form

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

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Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Second Properties of the period Properties of the Propert																														
If Yes, complete information below.  Submit a separate sheet for each partner. Information provided in other formats will not be																														
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## MS4 Municipal Compliance Certification (MCC) Form

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

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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																														
period?  If Yes, complete information below.																														
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Phone ( 6 0 7 ) 6 8 7 - 8 2 7 4  Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? ○ Yes • No																														
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О ММ4						,,,,									,,,,,,															
○ MM5										Activities																				
О ММ6																				***********										
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, 2 0 1 9

SPDES ID

Name of MS4 Tioga County	N	Y	R 2	2 0	A	0 4	1 7
Section 4 - Certification Statement							
"I certify under penalty of law that this document and all attachments direction or supervision in accordance with a system designed to assu properly gathered and evaluated the information submitted. Based on persons who manage the system, or those persons directly responsible the information submitted is, the best of my knowledge and belief, traware that there are significant penalties for submitting false informatine and imprisonment for knowing violations."  This form must be signed by either a principal executive officer or rate authorized representative of that person as described in GP-0-08-002.	my inq e for ga ue, accu ation, in	quan uiry theria rate, cludi	of the ng the and ng the	pers ne pe ne int com he po	rsor forn ple ossil	n or natio te. I	am y of
First Name MI Last Name		-			1		
Martha C Saue	r b 1	е	У				
Title (Clearly print title of individual signing report)					-	· · · ·	
Tioga County Legislatu	r e	C	h	a  i	r		
Signature							

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

martheranerores

MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway Albany, New York 12233-3505 APPROVED
AS TO FORM BY
TIOGA COUNTY LAW DEPT

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

	SPDES ID
Name of MS4/Coalition Broom-Tioga Stormwater Coalition	N Y R 2 0 0 4 7

#### **Water Quality Trends**

The information	in this section	is being reporte	d (check one):
On behalf of a	n individual N	AS4	

- On behalf of a coalition

  How many MS4s are contributed to this report?

  | 0 | 1 | 5 |
- 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One.

If Yes, choose one of the following

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

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

No

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This report is being submitted for the reporting period ending March 9, 2019

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

SPDES ID

Broome-Tiggs Stormwater Coalition

Name of MS4/Coalition Broome-Tioga Stormwater Coaltion	NYR20C002												
Water Quality Trends													
The information in this section is being reported (check one):													
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s are contributed to this report?</li> </ul>													
1. Has this MS4/Coalition produced any reports documenting warelated to stormwater? If not, answer No and proceed to Minim One.	= *												
If Yes, choose one of the following													
O Report(s) attached to the annual report													
O Web Page(s) where report(s) is/are provided below  Please provide specific address of page where report(s) can be accessed - not home page.													
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This report is being submitted for the reporting period ending March 9, 2019

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.
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Name of MS4/Coalition Broome-Tioga Stormwater Coalition	SPDES ID NYR20C002
Minimum Control Measure 1. Public 1	Education and Outreach
The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition         How many MS4s contributed to this report?     </li> </ul>	15
1. Targeted Public Education and Outreach Best Manage	ement Practices
Check all topics that were included in Education and Outreach	h during this reporting period:
<ul><li>Construction Sites</li></ul>	O Pesticide and Fertilizer Application
General Stormwater Management Information	Pet Waste Management
Household Hazardous Waste Disposal	<ul><li>Recycling</li></ul>
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
● Infrastructure Maintenance	Trash Management
O Smart Growth	<ul><li>Vehicle Washing</li></ul>
Storm Drain Marking	<ul><li>Water Conservation</li></ul>
• Green Infrastructure/Better Site Design/Low Impact Developmen	nt • Wetland Protection
• Other:	○ None
Solid waste pick-up program, Other	
2. Specific audiences targeted during this reporting period	d:
Public Employees	
Residential Developers	
O Businesses	
O Restaurants O Industries	
Other: O Agricultural	

This report is being submitted for the reporting period ending March 9, 2019

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

SPDES ID Broome-Tioga Stormwater Coaltion NYR2DCD02 Name of MS4/Coalition 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply: #Trained 178 Construction Site Operators Trained Direct Mailings # Mailings # Locations O Kiosks or Other Displays # In List O List-Serves # In List O Mailing List 171 # Days Run Newspaper Ads or Articles 3|97|7 Public Events/Presentations # Attendees 60 School Program # Attendees 60 TV Spot/Program # Days Run 5|72|0 Total # Distributed Printed Materials: Locations (e.g. libraries, town offices, kiosks) COB Engineering 1pt Dickinson Newsletter offices Municipal Community events Other: media: 16,579 Social Provide specific web addresses - not home page. Continue on next page if additional space is Web Page: needed. www.waterfromrain.org www.bihghamton+ny.gov stormwater-management

This report is being submitted for the reporting period ending March 9,2019

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

SPDES ID

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This report is being submitted for the reporting period ending March 9, 2019

Name of MS4/Coalition Broome-Tioga Stormwater Coalition	NYR20C002
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the	e SWMPP in this reporting period.
Six community events in Tioga County (Lockheed Martic Earth House, Candor Daffodil Fesitval, Tioga Co. Fair, Kiwanis & Le participants. Stormwater principles have been integrated into me plans and ordinances, and pertinent land use trainings. Contract to a total of 178 attendees.	nunicipal and county comprehensive
B. Briefly summarize the observations that indicated the ov Goal.	verall effectiveness of this Measurable
No illicit discharges detected.	
C. How many times was this observation measured or evalu	uated in this reporting period?
	(ex.: samples/participants/even
D. Has your MS4 made progress toward this Measurable G	Goal during this reporting period?  ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in	
F. Briefly summarize the stormwater activities planned to r the next reporting cycle (including an implementation sc	

This report is being submitted for the reporting period ending March 9,2019

Name of MS4/Coalition	Broome-Tioga Stormwater Coalition	SPDES ID NYR20C002	
4. Evaluating Pro	gress Toward Measurable Goals MCM 1		
identified in your St	ort on your progress and project plans toward tormwater Management Program Plan (SWI tional pages as needed.		n Part
A. Briefly summan	rize the Measurable Goal identified in the	e SWMPP in this reporting po	eriod.
Stormwater informa	ation updates on municipal websites		
B. Briefly summan Goal.	rize the observations that indicated the ov	verall effectiveness of this Me	asurable
in its place, current	and available		
C. How many time	es was this observation measured or evalu		?
D. Has your MS4	made progress toward this Measurable G	•	riod?
E. Is your MS4 on	schedule to meet the deadline set forth in	n the SWMPP? • Yes	s O No
•	rize the stormwater activities planned to ning cycle (including an implementation sc		uring

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

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

		SPDES ID	
Name of MS4/Coalition Broome-Tioga Stormwater Coali	ition	N Y R 2	2 0 C 0 0 2
4. Evaluating Progress Toward Measur	rable Goals MCM 1		
Use this page to report on your progress an identified in your Stormwater Managemen III.C.1. Submit additional pages as needed	t Program Plan (SWM)		
A. Briefly summarize the Measurable G	oal identified in the S	SWMPP in this repo	orting period.
Work with partner Broome EMC to promo public. Topics include green infrastructure practices, kids activities, solid waste, com Promote www.waterfromrain.org at these	e, general stormwater in posting, grasscycling, l	nformation, best man hazardous waste man	nagement nagement.
B. Briefly summarize the observations t Goal.	hat indicated the over	rall effectiveness of	this Measurable
2018-2019 Events: Earth Day Southern Tier Earth to 150 people, 2018 Strawberry Festival 498 partic 2018 Pops on the River 217 participants, Farmers participants.	ipants, Binghamton Zoo 20	0 participants, Dog Walk	k 44 participants,
C. How many times was this observation	n measured or evalua	ted in this reporting	g period? 3 6 4 3
		(ex.:	samples/participants/ev
D. Has your MS4 made progress toward	I this Measurable Go		•
E. Is your MS4 on schedule to meet the	deadline set forth in t	the SWMPP?	• Yes O No
F. Briefly summarize the stormwater act the next reporting cycle (including a			MCM during
Expand the variety of materials distributed	d and the audiences rea	ehed. Incorporate ev	ents that reach

a broader demographic. Continue to distribute materials developed through the Water From Rain

public education and outreach marketing campaign.

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

If submitting this form as part of a joint report on behalf of a coalition leave 31 DES 1D blank.  SPDES ID
Name of MS4/Coalition Broome-Tioga Stormwater Coalition N Y R 2 0 C 0 0 2
4. Evaluating Progress Toward Measurable Goals MCM 1
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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, and 15,000 mobile and desktopimpressions - 352 TV and Radio ads promoting HHW, electronics recycling, grasscycling and curbside recycling - 4160 various guides (recycling, HHW, illegal dumping, grasscycling, pharma waste, cfl disposal, food waste) - 5 landfill tours were held
C. How many times was this observation measured or evaluated in this reporting period?  4 5 2 0  (ex.: samples/participants/events,
D. Has your MS4 made progress toward this Measurable Goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?    Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue 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.

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

Name of MS4/Coalition Broome-Tioga Stormwater Coalition N Y R	2 0 C 0 0 2
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieving measural identified in your Stormwater Management Program Plan (SWMPP), including requi III.C.1. Submit additional pages as needed.	ble goals irements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this rep	oorting period.
Continued implementation of the Water From Rain public education campaign. This includes website, and print materials. Posts to social media for sharing educational information about stormwater managabout events. Distribute promotional items including stickers, t-shirts, magnets, umbrellas, and totes.	TV ads, radio ads, gement and details
B. Briefly summarize the observations that indicated the overall effectiveness o Goal.	f this Measurable
702 radio spots aired. 196 TV spots aired. 1,579 people interacted with Social Media. 1,093 promotional items were distributed.	
C. How many times was this observation measured or evaluated in this reporting	ng period?
	1 0 9 3
D. Has your MS4 made progress toward this Measurable Goal during this repo	er: samples/participants/event prting period? ● Yes ONo
E. Is your MS4 on schednle to meet the deadline set forth in the SWMPP?	● Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this the next reporting cycle (including an implementation schedule).	s MCM during
Will continue to promote program and air commercial in the coming year. Will continue promotion via	social media.

This report is being submitted for the reporting period ending March 9, 2019

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Broome-Tioga Stormwater Coalition NYR20CD02 Name of MS4/Coalition Minimum Control Measure 2. Public Involvement/Participation The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? |01|5 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: 3 Cleanup Events # Events #Comments O Comments on SWMP Received 0 0 Community Hotlines Phone # 0 0 0 0 Phone# Phone # 0 0 0 0 Phone # Phone # 0 0 0 Phone# Phone # 0 0 0 0 Phone # Phone # 0 0 0 0 Phone # Phone# O Community Meetings # Attendees 99999 Sq. Ft. Plantings O Storm Drain Markings # Drains O Stakeholder Meetings # Attendees # Events Volunteer Monitoring Other: 19, 688 Trees sold, 2. Was public notice of availability of this annual report and Stormwater Management Yes O No Program (SWMP) Plan provided? # In List O List-Serve # Days Run Newspaper Advertising # Days Run O TV/Radio Notices

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

Other:

This report is being submitted for the reporting period ending March 9, 2019

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

SPDES ID

Name of MS4/Coalition Broome-Tioga Storm	NYR20C002	
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This report is being submitted for the reporting period ending March 9, 2019

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This report is being submitted for the reporting period ending March 9, 2019

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.
SPDES ID
Name of MS4/Coalition Broome-Tioga Stormwater Coalition NYR2 0 C 0 0 2
3. Where can the public access copies of this annual report, Stormwater Management
Program SWMP) Plan and submit comments on those documents?
Enter address/contact info and select radio button to indicate which document is available and
whether comments may be submitted at that location. Submit additional pages as needed.
○ MS4/Coalition Office
Department
Southern Tier 8
Address
49 Court Street, Suite 222
City Zip
Binghamton
Phone
(BOF) FAU - 1327
O Library O Annual Report O SWMP Plan O Comments Address
City
Phone
(0) \0 -
● Other ● Annual Report ● SWMP Plan ● Comments
Address
Tiloga County Plan Dept, 56 Main
City Zip
Owego
Phone
(607)687-8257
● Web Page URL: ○ Annual Report ○ SWMP Plan ○ Comments
www.broometiogastormwater.com/a
nnual-reports
Please provide specific address of page where report can be accessed - not home page.
O eMail O Comments
blucas@co.broome.ny.usa

pratte@co.tioga.ny.usa

This report is being submitted for the reporting period ending March 9, 2019

	SPDES ID
Name of MS4/Coalition Broome-Tioga Stormwater Coalition	NYR20C002
4.a. If this report was made available on the internet, what date v	vas it posted?
Leave blank if this report was not posted on the internet.	0 / 0 /
4.b. For how many days was/will this report be posted?	365
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 O No
If Yes, what was the date of the meeting?	0 / 0 /
If No, is one planned?	● Yes ○ No
5.b. Was an Annual Report public meeting held for all MS4s com-	tributing 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? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.	○ Yes ● No

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

Name of MS4/Coalition Broome-Tioga Stormwater Coalition SPDES ID  N Y R 2 0 C 0 0 2
7. Evaluating Progress Toward Measurable Goals MCM 2
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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 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 (10/13/18) - 150 volunteers, I.25 tons of trash collected
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this reporting period?
● Yes O No  E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  ● Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
- Continue with annual cleanup events Continued recruitment of volunteer groups Establish partnership with other cleanup efforts

Name of MS4/Coalition Broome-Tioga Stormwater Coalition

### **MS4 Annual Report Form**

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

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

SPDES ID

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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 6380 Broome & Tioga households. There were 78 CESQGs from Broome and Tioga. 145 total tons of household hazardous waste was collected, 280.6 tons of electronics.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal during this reporting period?  ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
● Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue established programs.

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

	SPDES ID													
Name of MS4/Coalition City of Binghamton	N Y R 2 0 A 3 4 1													
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination													
The information in this section is being reported	(check one):													
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to t</li> </ul>	this report? 1													
1. Enter the number and approx. percent	of outfalls mapped: 2 0 0 # 9 9 %													
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?													
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspection during this													
O Auto Recyclers	• Landscaping (Irrigation)													
O Building Maintenance	O Marinas													
O Churches	O Metal Plateing Operations													
O Commercial Carwashes	O Outdoor Fluid Storage													
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance													
Construction Vehicle Washouts	O Printing													
O Cross-Connections	O Residential Carwashing													
O Distribution Centers	O Restaurants													
O Food Processing Facilities	O Schools and Universities													
<ul><li>Garbage Truck Washouts</li></ul>	O Septic Maintenance													
O Hospitals	Swimming Pools													
O Improper RV Waste Disposal	Vehicle Fueling													
O Industrial Process Water	O Vehicle Maint./Repair Shops													
Other:	O None													
City streets														
O Sewersheds:														

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

	SPDES ID													
Name of MS4/Coalition City of Binghasmton	N Y R 2 0 A 3 4 1													
3.b. What types of illicit discharges have	e been found during this reporting period?													
O Broken Lines From Sanitary Sewer	O Industrial Connections													
O Cross Connections	O Inflow/Infiltration													
O Failing Septic Systems	O Pump Station Failure													
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows													
O Illegal Dumping	O Straight Pipe Sewer Discharges													
O Other:	● None													
4. How many illicit discharges/potentia	al illegal connections have been detected during this													
reporting period?														
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5. How many illicit discharges have bee	en confirmed during this reporting period?													
6. How many illicit discharges/illegal co	onnections have been eliminated during this reporting													
period?	0													
7. Has the storm sewershed mapping be	een completed in this reporting period? • Yes • O No													
If No, approximately what percent was	s completed in this reporting period?													
8. Is the above information available in	n GIS? O Yes ● No													
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If Yes, provide URL(s):  Please provide specific address of page:	where map(s) can be accessed - not home page.													
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This report is being submitted for the reporting period ending March 9,  $\begin{bmatrix} 2 & 0 \end{bmatrix}$  1  $\begin{bmatrix} 9 & 1 \end{bmatrix}$ 

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This report is being submitted for the reporting period ending March

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SPDES ID
Name of MS4/Coalition City of Binghamton N Y R 2 0 A 3 4 1
12. Evaluating Progress Toward Measurable Goals MCM 3
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Updated outfall map and inventory. Update database of SWPPP's, Review IDDE Ordinance. Update City of Binghamton IDDE program manual. Investigated and eliminated all reported illicit discharge. Cleanup and inspected catchbasins. Updated list of non stormwater discharge. Implement educational measures through distribution of water bills and brochures, and speaking at schools.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Outfall mapping is in progress to make the inventory 100%. Reviewing of ordinances is ongoing. Replaced 77 catchbasins. Replaced 45 manholes. 760 drain structures were cleaned and inspected. Installed 56 new castings. 40 "No Dumping Drains to River" markers installed on catchbasins. Repaired 80 catchbasins. Repaired 9 manholes.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
O Yes ● No  F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation sehedule).
Continue outfall reconnaissance inventory. Review of ordinance, catchbasins, cleaning, illicit discharge detention investigation, and installation of catchbasin markers will be ongoing. Training in IDDE for all staff. Continued to implement BMP's.

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

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

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

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

Town of Binghamton 2 Υ 0 A 0 0 9 R Name of MS4/Coalition 3.b. What types of illicit discharges have been found during this reporting period? O Broken Lines From Sanitary Sewer O Industrial Connections O Cross Connections O Inflow/Infiltration O Failing Septic Systems O Pump Station Failure O Floor Drains Connected To Storm Sewers O Sanitary Sewer Overflows O Illegal Dumping O Straight Pipe Sewer Discharges O Other: None 4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 0 0 5. How many illicit discharges have been confirmed during this reporting period? 6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0 O Yes No 7. Has the storm sewershed mapping been completed in this reporting period? If No, approximately what percent was completed in this reporting period? 0 왕 O No 8. Is the above information available in GIS? Yes Is this information available on the web? Yes O No If Yes, provide URL(s): Please provide specific address of page where map(s) can be accessed - not home page. t b S r W W W 0 m W е s е р р 1 m a. q р е r v i е W е r h t m 11

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

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

SPDES ID
Name of MS4/Coalition Town of Binghamton N Y R 2 0 A 0 0 9
12. Evaluating Progress Toward Measurable Goals MCM 3
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in 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 annually 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?  (ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period?  ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  Set of 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.

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

Name of MS4/Coalition Town of Chenengo							N	Y R	2	0	A	1	2 7
Minimum Control Measure 3.	<u>Illicit</u>	Disc	hai	rge	Dete	ecti	on	and	Eli	imi	<u>na</u>	<u>tio</u>	<u>n</u>
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<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to</li> </ul>	this rep	ort? [											
1. Enter the number and approx. percent	of outf	falls n	ıap	peo	d: [			1 6	]#		1	0	0 %
2. How many of these outfalls have been s reporting period (outfall reconnaissance			-	w	eather	dis	scha	ırges	du	ring	th [	is 0	0 0
3.a. What types of generating sites/sewersh reporting period?	eds we	re tar	get	ed 1	for ins	spe	ctio	n du	ring	thi	S		
O Auto Recyclers	ing	(Ir	rigatio	1)									
O Building Maintenance	arinas												
O Churches	ОМе	etal Pla	iteir	ıg (	Operati	ons							
O Commercial Carwashes	O Ou	tdoor	Flui	d S	torage								
O Commercial Laundry/Dry Cleaners	O Par	rking I	ot	Ma	intenar	ice							
O Construction Vehicle Washouts	O Pri	nting											
O Cross-Connections	O Re	sidenti	al (	Carv	washin	g							
O Distribution Centers	O Re	staurai	nts										
O Food Processing Facilities	O Sch	hools a	and	Un	iversiti	es							
O Garbage Truck Washouts	O Sep	ptic M	aint	ena	nce								
O Hospitals	O Sw	/immin	g P	ools	S								
O Improper RV Waste Disposal	O Vel	hicle I	uel	ing									
O Industrial Process Water	O Vel	hicle N	⁄lair	ıt./F	Repair	Sho	ps						
O Other:	O No	ne			T							- 1	
• Sewersheds:		<del>, ,</del>	,						·	······			
General Storm	S	e w	е	r	N	е	t	w o	r	k	s		

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

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	6. How many illicit discharges/illegal connections have been eliminated during this reporting period?																													
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This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 9$ 

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

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

SPDES ID

Name of MS4/Coalition Town of Chenengo	N Y R 2 O A 1 2 7
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward acidentified in your Stormwater Management Program Plan (SWMPF III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	VMPP in this reporting period.
Finding no illicit discharges. The Town website now includes informed as links to the NYSDEC for complaint reporting and Town of Report Citizen Complaint Form".	
B. Briefly summarize the observations that indicated the overa Goal.	ll effectiveness of this Measurable
No discharges found.	
C. How many times was this observation measured or evaluate	ed in this reporting period?
D. Has your MS4 made progress toward this measurable goal (	(ex.: samples/participants/events,
D. Has your MS4 made progress toward this measurable goal d	• Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP?
	• Yes O No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation sched	
Develop mapping areas investigated and a log. Possibly initiate was Develop storm watershed map of areas contributing to each outfall	

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

Name of MS4/Coalition Town of Conklin									SPD N			2 (	0 A	2	5 5
Minimum Control Measure 3	<u>3. II</u>	licit	Di	sch	<u>ar</u>	ge	Det	ect:	ion	and	ΙE	lir	nina	<u>atio</u>	<u>on</u>
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<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed</li> </ul>	to th	is rep	ort'	? [											
1. Enter the number and approx. perce	nt of	f out	falls	s ma	p	ed	: [			5 (	7	#	1	. 0	0 %
2. How many of these outfalls have bee reporting period (outfall reconnaissa					ry	we	athei	· di	scha	rge	s dı	ıri	ng t	his	5 0
3.a. What types of generating sites/sewer reporting period?	shed	ls we	ere t	arge	ete	ed f	or in	spe	etior	ı du	rin	g t	his		
O Auto Recyclers															
● Building Maintenance															
O Churches		ОМ	etal	Plate	ein,	g O	perati	ons							
<ul><li>Commercial Carwashes</li></ul>		<b>©</b> O	utdo	or Fl	uic	l St	orage								
O Commercial Laundry/Dry Cleaners		<b>©</b> Pa	ırkin	g Lo	t N	Иai	ntenai	nce							
Construction Vehicle Washouts		O Pr	intin	g											
O Cross-Connections		O Re	eside	ntial	C	arw	vashin	g							
<ul><li>Distribution Centers</li></ul>		• Re	estau	rant	S										
O Food Processing Facilities		• Sc	hool	s an	d١	Uni	versiti	es							
O Garbage Truck Washouts	,	• Se	ptic	Mai	nte	enar	nce								
O Hospitals	1	O Sv	vimn	ning	Po	ools									
O Improper RV Waste Disposal	ı	<b>©</b> Ve	ehicle	e Fu	eli	ng									
O Industrial Process Water	I	• Ve	ehicle	e Ma	in	t./R	epair	Sho	ps						
O Other:	(	O No	one												
O Sewersheds:															

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

R 2 0 A 2 Υ Town of Conklin Name of MS4/Coalition 3.b. What types of illicit discharges have been found during this reporting period? O Broken Lines From Sanitary Sewer O Industrial Connections O Inflow/Infiltration O Cross Connections O Failing Septic Systems O Pump Station Failure O Floor Drains Connected To Storm Sewers O Sanitary Sewer Overflows O Illegal Dumping O Straight Pipe Sewer Discharges O Other: None 4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 0 0 5. How many illicit discharges have been confirmed during this reporting period? 6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0 7. Has the storm sewershed mapping been completed in this reporting period? O No Yes. If No, approximately what percent was completed in this reporting period? કૃ O No 8. Is the above information available in GIS? Yes Is this information available on the web? **Yes** O No If Yes, provide URL(s): Please provide specific address of page where map(s) can be accessed - not home page. h t t O m е g r O m p b i t b 0 е u b i С r 0 р i n f W е s е r 0 m p р h t ? i 1 е r m u n а е S R W m p L Α В Ε 0 0 0 0 0 0 0 & L Α Y Ε R S 1 1 1 0 0 0 0 0 1 0

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

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

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

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

<u> </u>	SPDES ID												
Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2 0 A 1 4 3												
Minimum Control Measure 3.	3. Illicit Discharge Detection and Elimination												
The information in this section is being reported	red (check one):												
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to</li> </ul>	to this report?												
1. Enter the number and approx. percen	ent of outfalls mapped: 60# 100%												
2. How many of these outfalls have been reporting period (outfall reconnaissan	on screened for dry weather discharges during this nace inventory)?												
3.a. What types of generating sites/sewers reporting period?	sheds were targeted for inspection during this												
O Auto Recyclers	O Landscaping (Irrigation)												
● Building Maintenance	O Marinas												
<ul><li>Churches</li></ul>	O Metal Plateing Operations												
O Commercial Carwashes	O Outdoor Fluid Storage												
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance												
O Construction Vehicle Washouts	O Printing												
O Cross-Connections	O Residential Carwashing												
O Distribution Centers	Restaurants												
O Food Processing Facilities	O Schools and Universities												
O Garbage Truck Washouts	O Septic Maintenance												
<ul><li>Hospitals</li></ul>	O Swimming Pools												
O Improper RV Waste Disposal	Vehicle Fueling												
O Industrial Process Water	O Vehicle Maint./Repair Shops												
O Other:	O None												
O Sewersheds:													

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

	SPDES ID	
Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2	0 A 1 4 3
3.b. What types of illicit discharges have	been found during this reporting period	?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	O Inflow/Infiltration	
O Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows	
O Illegal Dumping	O Straight Pipe Sewer Discharges	
O Other:	● None	
4. How many illicit discharges/potential	illegal connections have been detected d	uring this
reporting period?		0
5. How many illicit discharges have bee	n confirmed during this reporting period	1?
5. 110W many finer discharges have bee	in confirmed during this reporting period	''
6. How many illicit discharges/illegal co	nnections have been eliminated during the	his reporting
period?		0
7. Has the storm sewershed mapping be		Yes O No
If No, approximately what percent was	completed in this reporting period?	0 %
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	where map(s) can be accessed - not home pa	age.
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This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 9$ 

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

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

II Submittii	ig this form as part of a joint report on bena	iii oi a coaimon	SPDES ID Glan.	κ.
Name of MS4/Coalition	TOWN OF DICKINSON		N Y R 2 0 A	1 4 3
12. Evaluating Pro	gress Toward Measurable Goals MCI	M 3		
identified in your St	ort on your progress and project plans to tormwater Management Program Plan (Stional pages as needed.		_	1 Part
A. Briefly summar	rize the Measurable Goal identified in	the SWMPP	in this reporting pe	riod.
	RGES FOUND. Measurable goal is to rand identify and eliminate illicit dischar		ct the outfalls during	dry
B. Briefly summar Goal.	rize the observations that indicated the	e overall effec	tiveness of this Mea	ısurable
	DISCHARGES ARE TARGETD FOR EIBLE. None were found	ENFORCEME	NT AND ELIMINA	TED
C. How many time	es was this observation measured or ev	valuated in thi	is reporting period?	?
·				1 7 6
D 11 3404				articipants/events
D. Has your MS4 i	made progress toward this measurable	e goal during	this reporting perio	
E. Is your MS4 on	schedule to meet the deadline set fort	h iu the SWM		20
·			Yes	O No
•	ize the stormwater activities planned ng cycle (including an implementation	-	oals of this MCM du	ıring

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

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

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

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	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the	his	rep	ort?	, [_														
1.	Enter the number and approx. percent of	of c	uti	falls	ma	ıpj	ped	l:				3	6	#		1	0	0 %	0
2.	How many of these outfalls have been so reporting period (outfall reconnaissance					ry	we	ath	er e	dis	cha	ırg	es	du	rinș	g th	is	0	]
3.2	a.What types of generating sites/sewershe reporting period?	eds	we	re t	arge	et€	ed f	or i	nsp	ec	tio	n d	ur	ing	th:	is			
	O Auto Recyclers	0	La	ndsc	apir	ıg	(Irı	igati	on)	i									
	O Building Maintenance	0	Ma	arina	ıs														
	O Churches	0	Мє	etal 1	Plate	ein	g C	)pera	itio	ns									
	O Commercial Carwashes	O Outdoor Fluid Storage																	
	O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance																	
	O Construction Vehicle Washouts	0	Pri	ntin	g														
	O Cross-Connections	0	Re	side	ntial	C	arv	vashi	ng										
	O Distribution Centers	O Restaurants																	
	O Food Processing Facilities	0	Scl	hool	s an	d	Uni	versi	ties	6									
	O Garbage Truck Washouts	O Septic Maintenance																	
	O Hospitals	O Swimming Pools																	
	O Improper RV Waste Disposal	O Vehicle Fueling																	
	O Industrial Process Water	O Vehicle Maint./Repair Shops																	
	O Other:	•	No	ne															_
	O Sewersheds:									,								<b>.</b>	<del>,</del>

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

		SPDES ID								
Name of MS4/Coalition Town of Fenton			2 0 A 0	7 8						
3.b. What types of illicit discharges have	been found during this	reporting period	1?							
O Broken Lines From Sanitary Sewer	O Industrial Connections									
O Cross Connections	O Inflow/Infiltration									
O Failing Septic Systems	O Pump Station Failure									
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflo	WS								
O Illegal Dumping	O Straight Pipe Sewer Dis	scharges								
O Other:  4 How many illicit discharges/notentia	4. How many illicit discharges/potential illegal connections have been detected during this									
reporting period?  5. How many illicit discharges have been been been been been been been be	en confirmed during this	s reporting perio	d?	0 0 ng 0						
<ul> <li>7. Has the storm sewershed mapping be If No, approximately what percent was</li> <li>8. Is the above information available in Is this information available on the valid Yes, provide URL(s):</li> <li>Please provide specific address of page</li> </ul>	completed in this reporting GIS? web?	ng period?	O Yes O	O No 0 % No No						
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This report is being submitted for the reporting period ending March 9,  $\begin{bmatrix} 2 & 0 \end{bmatrix} 1 = \begin{bmatrix} 9 & 1 \end{bmatrix}$ 

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10	10. If Yes, has every traditional MS4 contributing to this report certified that this law is																															
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This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 9 & 1 \end{vmatrix}$ 

Name of MS4/Coalition Town of Fenton	N         Y         R         2         0         A         0         7         8
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
Measurable goal is to annually inspect 25% of the outfalls during identify and eliminate illicit discharges if found.	dry weather conditions and
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
Since the local IDDE Law was passed the Town has not detected a	any illicit discharges.
C. How many times was this observation measured or evaluate	ed in this reporting period?
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in th	e SWMPP?  • Yes O No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	et the goals of this MCM during
Continue to do annual outfall inspections on a four year cycle to ic during dry weather conditions. Continue public outreach through explaining illicit discharges and how they can and should be avoid	the use of flyers and pamphlets

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

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

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### **MS4 Annual Report Form**

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

Y R 2 0 A 0 Town of Kirkwood Name of MS4/Coalition 3.b. What types of illicit discharges have been found during this reporting period? O Broken Lines From Sanitary Sewer O Industrial Connections O Cross Connections O Inflow/Infiltration O Failing Septic Systems O Pump Station Failure O Floor Drains Connected To Storm Sewers O Sanitary Sewer Overflows O Illegal Dumping O Straight Pipe Sewer Discharges O Other: None 4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 0 0 5. How many illicit discharges have been confirmed during this reporting period? 6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0 O No 7. Has the storm sewershed mapping been completed in this reporting period? Yes If No, approximately what percent was completed in this reporting period? 왕 O No 8. Is the above information available in GIS? Yes Is this information available on the web? **Yes** O No If Yes, provide URL(s): Please provide specific address of page where map(s) can be accessed - not home page. h t t m е g S O m C b i t b е b 1 i С W е S е r О 0 m р u р r О р n i ? 1 R v е W е r h t u е u b m р a L Α В Ε  $_{\rm L}$ 0 0 0 0 0 0  $\mathbf{L}$ Α Y  $\mathbf{E}$ R S δ 0 1 0 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 1 1 0 0 0 0 0 0 0 0 0 0

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10	10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law?  • Yes • O No • O NT																															
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This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 9 & 1 \end{vmatrix}$ 

Name of MS4/Coalition Town of Kirkwood	N Y R 2 0 A 0 7 2
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Measurable goal is to annually inspect all outfalls during dry weat eliminate illicit discharges if found.	ather conditions and identify and
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Since the local IDDE Law was passed the Town has not detected	any illicit discharges.
C. Have many times was this absorption massured as evalua-	tod in this various pariod?
C. How many times was this observation measured or evaluation	ted in this reporting period:
	(ex.: samples/participants/ev
D. Has your MS4 made progress toward this measurable goal	l during this reporting period? ● Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in t	he SWMPP?
	Yes O No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	_
Continue to do annual outfall inspections to identify illicit discha conditions. Continue public outreach through the use of flyers ar discharges and how they can and should be avoided.	

This report is being submitted for the reporting period ending March 9, 2019

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

SPDES ID

Name of MS4/Coalition Town of Owego	NYR20A079
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported  On behalf of an individual MS4	(check one):
On behalf of a coalition  How many MS4s contributed to t	his report?
1. Enter the number and approx. percent	of outfalls mapped: 22 # 100 %
2. How many of these outfalls have been s reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershoreporting period?	eds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	• None
○ Sewersheds:	

This report is being submitted for the reporting period ending March 9, 2019

Name of MS4/Coalition Town of Owego		SPDES ID NYR20A07	9
3.b. What types of illicit discharges have	been found during tl	nis reporting period?	•
O Broken Lines From Sanitary Sewer	O Industrial Connection	ons	
○ Cross Connections	O Inflow/Infiltration		
O Failing Septic Systems	O Pump Station Failure	e	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Over	rflows	
O Illegal Dumping	O Straight Pipe Sewer	Discharges	
Other:	● None		
4. How many illicit discharges/potentia	ıl illegal connections h	nave been detected di	uring this
reporting period?			0
5. How many illicit discharges have be	en confirmed during (	his renorting neriod	2 0
5. How many miere amenat geo nave 55.	on continuou auxang	me robotome borroe	•
6. How many illicit discharges/illegal coperiod?	onnections have been	eliminated during th	nis reporting
7. Has the storm sewershed mapping b If No, approximately what percent was	•		● Yes ○ No
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This report is being submitted for the reporting period ending March 9, 2019

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Name of MS4/Coalition Town of Owego	SPDES ID NYR20A079
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Develop flow chart for IDDE field tests and place on website	
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Not only did the Town of Owego develop the IDDE flow chart, it Operating Procedures (SOPs) and MS4 Organizational Chart	has created new IDDE Standard
C. How many times was this observation measured or evaluat	ed in this reporting period?
	1
D. H MC4 I	(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal	• Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	ne SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheme	<del>-</del>
Create an IDDE brochure which will be provided to property own Town.	ers within the MS4 areas in the

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

No. 10 Town of Union	<u>,</u>					1			SPD	ES Y	ID R	2	0 2	ΑŢ	0	5 0
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Minimum Control Measure 3.	Illi	<u>cit</u>	Dis	cha	rg	<u>e I</u>	Dete	<u>cti</u>	on	<u>an</u>	d	Eli	miı	<u>1at</u>	io	<u>n</u>
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3.a. What types of generating sites/sewersl reporting period?	heds	wei	re ta	arge	ted	fo	r ins	peo	etio	n d	luri	ing	this	8		
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O Commercial Laundry/Dry Cleaners	0	Par	rking	g Lot	Ma	ain	tenan	ce								
O Construction Vehicle Washouts	0	Pri	nting	g												
O Cross-Connections	0	Res	sider	ntial	Car	'wa	shing	3								
O Distribution Centers	٠	Res	stauı	ants												
Food Processing Facilities	0	Scł	nools	and	Ur	nive	ersitie	es								
<ul><li>Garbage Truck Washouts</li></ul>	•	Sep	otic	Mair	ten	anc	ce									
O Hospitals	0	Sw	imın	ing I	200	ls										
O Improper RV Waste Disposal	0	Vel	hicle	Fue	ling	3										
O Industrial Process Water	0	Vel	hicle	Mai	nt./	Re	pair	Sho	ps							
O Other:	0	No	ne													
O Sewersheds:			1		т		1		- T	—т		I	T		_	
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This report is being submitted for the reporting period ending March 9, 2 0 1 9

Name of MS4/Coalition Town of Union	SPDES ID  N Y R 2 0 A 0 5 0											
Traine of M54/Coantion												
<ul> <li>Broken Lines From Sanitary Sewer</li> </ul>	e been found during this reporting period?  O Industrial Connections											
O Cross Connections	O Inflow/Infiltration											
O Failing Septic Systems	O Pump Station Failure											
O Floor Drains Connected To Storm Sewers	Sanitary Sewer Overflows											
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• Illegal Dumping	O Straight Pipe Sewer Discharges											
Other:												
4 How many illiait disahargas/natantia	al illegal connections have been detected during this											
reporting period?	in megal connections have been detected during this											
5. How many illicit discharges have been	en confirmed during this reporting period?											
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during this reporting											
7. Has the storm sewershed mapping be If No, approximately what percent was												
8. Is the above information available in Is this information available on the v												
If Yes, provide URL(s): Please provide specific address of page URL	where map(s) can be accessed - not home page.											
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This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 9$ 

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# Name of MS4/Coalition 12. Evaluating Progress Toward Measurable Goals MCM 3 Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. 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? 1 (ex.: samples/participants/events) D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O Yes F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

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

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

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SPDES ID

Name of MS4/Coalition Town of Vestal	N Y R 2 0 A 0 6 4
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported	(check one):
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to</li> </ul>	this report? 0 0 1
1. Enter the number and approx. percent	of outfalls mapped: 190# 100%
2. How many of these outfalls have been s reporting period (outfall reconnaissand	screened for dry weather discharges during this ce inventory)?
3.a. What types of generating sites/sewersh reporting period?	eds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
<ul> <li>Commercial Carwashes</li> </ul>	O Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
O Other:	O None
O Sewersheds:	<del></del>

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

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Name of MS4/Coalition Town of Vestal								N	Y	R	2	0	Α	0	6	4
3.b. What types of illicit discha	arges have	been	found	du:	ring t	his	repo	rtin	g p	eric	od?	ı				
Broken Lines From Sanitary Se	wer	O Inc	dustria	l Co	nectio	ons										
O Cross Connections		• Inf	flow/In	filtra	ition											
Failing Septic Systems		O Pu	mp St	ation	Failur	e										
O Floor Drains Connected To Stor	rm Sewers	• Sa	nitary	Sewe	er Ove	rflo	ws									
O Illegal Dumping		O Sti	aight !	Pipe	Sewer	Dis	charg	ges								
O Other:		O No	ne													
4. How many illicit discharge	es/notentia	l illeg	al con	nect	ions l	1av	e bee	n de	etec	ted	l dı	ıriı	ıg (	this		
reporting period?	<b>.</b>													0	—	3
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5. How many illicit discharge	es have bee	en con	firme	d du	ring	this	rep	ortin	ıg p	er	iod'	?		0	0	3
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7. Has the storm sewershed in If No, approximately what p			_			_		-		od?	<u> </u>	•	Ye	s	0	No &
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This report is being submitted for the reporting period ending March 9, 2 0 1 9

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

Name of MS4/Coalition
12. Evaluating Progress Toward Measurable Goals MCM 3
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Advanced documentation/reporting and enforcement of Fats, Oil and Grease applications through Code Department. Continued sanitary manhole/sewer reporting form for sewer department and storm catch basin/manhoel reporting form for Highway Department.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Improved tracking of sewer issues including private lateral repair/replacement and failing septic systems. More awareness of Fats, Oils and Grease for Code Department. IDDE Training for Code Department personnel.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/even  D. Has your MS4 made progress toward this measurable goal during this reporting period?  See Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes • O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue IDDE training program for other Town Departments. Coordinate and improve documentation between highway, water/sewer, engineering departments and code departments with respect to our SWMPP.

This report is being submitted for the reporting period ending March 9, |20|19

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Minimum Control Measure 3. Illicit Discharge Detection and Elimination

<b>Minimum Control Measure 3.</b>	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	t of outfalls mapped: # %
2. How many of these outfalls have been reporting period (outfall reconnaissand	screened for dry weather discharges during this ce inventory)?
3.a. What types of generating sites/sewersh reporting period?	neds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	○ None
O Sewersheds:	

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

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

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Name of MS4/Coalition Village of Endicott	N Y R 2	2 0 A 1 4 9												
3.b. What types of illicit discharges have	been found during this reporting period	1?												
O Broken Lines From Sanitary Sewer	O Industrial Connections													
O Cross Connections	● Inflow/Infiltration													
O Failing Septic Systems	O Pump Station Failure													
O Floor Drains Connected To Storm Sewers	Sanitary Sewer Overflows													
O Illegal Dumping	O Straight Pipe Sewer Discharges													
Other:	O None													
4. How many illicit discharges/potential	illegal connections have been detected	during this												
reporting period?	mogai connections have been accepted	1												
5. How many illicit discharges have been confirmed during this reporting period?														
6. How many illicit discharges/illegal connections have been eliminated during this re														
period?	micerous mave been eminated during													
7. Has the storm sewershed mapping be	en completed in this reporting period?	○ Yes • No												
If No, approximately what percent was		1 2 8												
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8. Is the above information available in Is this information available on the w		<ul><li>Yes ○ No</li><li>Yes ○ No</li></ul>												
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Map #9 Villag	e of Endicott													

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

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

	SPDES ID
Name of MS4/Coalition Village of Endicott	N Y R 2 0 A 1 4 9
12. Evaluating Progress Toward Measurable Goals MCM 3  Use this page to report on your progress and project plans toward	
identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Added 120' Feet of 8" Storm Sewer and 2 Catch Basins on River between Badger Avenue and Exchange Avenue.	Теггасе,
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Stormwater no longer gets over the Curb and the Catch Basins keep the properties on River Terrace from Flooding.	
C. How many times was this observation measured or evaluate	ted in this reporting period?
	6
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in t	he SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	et the goals of this MCM during
Add more catch basins and storm sewer in locations around the Village of Endicott to protect properties that are prone to issues. I	Beginning this summer.

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

Name of MS4/Coalition Village of Johnson City	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):
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to t</li> </ul>	his report? 0 0 1
1. Enter the number and approx. percent	of outfalls mapped: 18# 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershoreporting period?	eds were targeted for inspection during this
O Auto Recyclers	<ul><li>Landscaping (Irrigation)</li></ul>
● Building Maintenance	○ Marinas
Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
Distribution Centers	<ul><li>Restaurants</li></ul>
O Food Processing Facilities	O Schools and Universities
<ul><li>Garbage Truck Washouts</li></ul>	O Septic Maintenance
Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	○ None
Residential	ehicle Maintenance
O Sewersheds:	

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

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

Name	of M	S4/0	Coal	itioı	vi	llage	of J	ohns	on C	ity	<del></del>											ſ		Y	R	2	0	A	1	0	1
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This report is being submitted for the reporting period ending March 9, 2 0 1 9

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

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

SPDES ID

Name of MS4/Coalition	Village of Johnson City	N Y R 2 0 A 1 0 1
12. Evaluating Pro	gress Toward Measurable Goals MCM 3	
identified in your St	ort on your progress and project plans toward tormwater Management Program Plan (SWM itional pages as needed.	
A. Briefly summa	rize the Measurable Goal identified in the S	SWMPP in this reporting period.
employees are on the	f the Village's Refuse, Street, Sanitary Sewer he streets daily and are aware to notify their sment works closely with the DPW in identifyicharges.	upervisors of any Illicit Discharges.
B. Briefly summa Goal.	rize the observations that indicated the ove	rall effectiveness of this Measurable
catchbasin. DPW	ng year two illicit discharges was documented cleaned the catchbasin the day that they were ne resident. The second one was pumping of a	notified. A Notice of Violation
C. How many time	es was this observation measured or evalua	ited in this reporting period?
D. Has your MS4	made progress toward this measurable goa	(ex.: samples/participants/events al during this reporting period?  ■ Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in	
	rize the stormwater activities planned to m ing cycle (including an implementation sch	eet the goals of this MCM during
	ontinue to train employees to be aware of illicatify their supervisors as necessary.	it discharges during their daily

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

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 ( On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to t  1. Enter the number and approx. percent	his report?
<ul><li>2. How many of these outfalls have been so reporting period (outfall reconnaissance</li><li>3.a. What types of generating sites/sewershee</li></ul>	creened for dry weather discharges during this e inventory)?
reporting period?	
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
<ul><li>Churches</li></ul>	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
<ul> <li>Distribution Centers</li> </ul>	<ul><li>Restaurants</li></ul>
O Food Processing Facilities	<ul> <li>Schools and Universities</li> </ul>
O Garbage Truck Washouts	O Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	<ul><li>Vehicle Fueling</li></ul>
● Industrial Process Water	O Vehicle Maint./Repair Shops
O Other:	O None
O Sewersheds:	

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

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4.	. How many illicit discharges/potential illegal connections have been detected during this reporting period?  . How many illicit discharges have been confirmed during this reporting period?																															
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This report is being submitted for the reporting period ending March 9, 2 0 1 9

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

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

Name of MS4/Coalitio	VILLAGE OF PORT DICK	KINSON		SPDES ID  N Y R 2 0 A 0 8	0
12. Evaluating Pro	ogress Toward Mea	surable Goals MC	М 3		
identified in your S		nent Program Plan (		ing measurable goals cluding requirements in Pa	rt
A. Briefly summa	rize the Measurabl	e Goal identified in	the SWMPI	P in this reporting period	
	RGES FOUND. Mos and identify and eli			ect the outfalls during dry	
B. Briefly summa Goal.	rize the observation	ns that indicated th	e overall effe	ectiveness of this Measura	able
I .	DISCHARGES ARI SIBLE. None were t		ENFORCEM	ENT AND ELIMINATED	
C. How many tim	es was this observa	tion measured or e	valuated in t	his reporting period?	
				(ex.: samples/partic.	
D. Has your MS4	made progress tow	ard this measurabl	le goal during	g this reporting period?	panca, evencs,
				● Yes C	No
E. Is your MS4 on	schedule to meet t	he deadline set fort	th in the SW		No
•	rize the stormwater iug cycle (including	_		goals of this MCM during	

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

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

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

Name of MS4/Coalition BROOME COUNTY			***************************************						SPE N		ID R		0	Α	3	3 2
Minimum Control Measure	3. I	llic	eit :	<u>Discl</u>	181	ge I	<u> Dete</u>	cti	<u>ion</u>	an	ıd	Eli	m	ina	tio	<u>n</u>
The information in this section is being repor	ted (d	chec	ek o	ne):												
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed</li> </ul>	to th	ıis 1	epo	ort?		1										
1. Enter the number and approx. perce	ent o	f o	utf	alls m	ap	ped:			5	7	3	#		1	0	0 %
2. How many of these outfalls have been reporting period (outfall reconnaiss:					•	wea	ther	dis	scha	arg	es :	dur	rinş	g th	is 1	9 6
3.a. What types of generating sites/sewer reporting period?	rshe	ds v	wer	e tarş	gete	ed fo	r ins	peo	etio	n d	ur	ing	th	is		
O Auto Recyclers			Lan	ndscap	ing	(Irrig	ation	1)								
● Building Maintenance		0	Ma	rinas												
O Churches		0	Me	tal Pla	tein	g Op	eratio	ons								
O Commercial Carwashes		•	Out	tdoor I	lui	d Sto	rage									
O Commercial Laundry/Dry Cleaners			Par	king L	ot l	Maint	enan	ce								
O Construction Vehicle Washouts		0	Pri	nting												
<ul><li>Cross-Connections</li></ul>		0	Res	identia	ıl C	Carwa	shing	5								
O Distribution Centers		0	Res	tauran	ts											
○ Food Processing Facilities		0	Sch	ools a	nd	Unive	ersitie	es								
O Garbage Truck Washouts			Sep	tic Ma	aint	enanc	e									
○ Hospitals		0	Swi	imminį	g P	ools										
O Improper RV Waste Disposal		•	Veh	nicle F	ueli	ing										
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This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 9$  If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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

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ie of M	IS4/Coa	lition	BRO	OME	E CO	UNTY	<b>′</b>													N	Y	R	2	0	Α	3	3
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This report is being submitted for the reporting period ending March 9, 2 0 1 9

n submiun	ig this form as part	or a joint report o	n benaii oi a coa	SPDES ID	.5 ID blank.
Name of MS4/Coalition	BROOME COUNTY				2 0 A 3 3 2
12. Evaluating Pro	gress Toward Me	easurable Goals	MCM 3		
Use this page to repidentified in your Statistics. III.C.1. Submit addi	ormwater Manage	ement Program F		-	_
A. Briefly summai	ize the Measural	ble Goal identif	ied in the SWN	APP in this rep	orting period.
MEASURABLE G and identified within SWMP includes sci	n the MS4 bound	aries, including t	hose located at	all County-own	
B. Briefly summar Goal.	ize the observati	ons that indicat	ed the overall	effectiveness of	this Measurable
All of the outfalls werified and relocat within the MS4 bou During the 2016 sellocated and mapped	ed using GPS equ indaries have beer lf-assessment surv	ipment during the mapped/survey eys at the 19 MS	ne summer of 20 red and two (2) S4 County facil:	113. Seventeen remain to be contities, additional	(17) facilities npleted in 2019.
C. How many time	es was this observ	ation measured	l or evaluated i	in this reportin	g period?
D. Has your MS4 i	nade progress to	ward this meas	urable goal du		: samples/participants/e ing period? • Yes O No
E. Is your MS4 on	schedule to meet	the deadline se	et forth in the S	SWMPP?	• • • • • • • • • • • • • • • • • • • •
F. Briefly summar the next reporti	ize the stormwat ng cycle (includir	-		_	● Yes ○ No MCM during
During the summer facility outfalls and MS4 facilities will be	confirm/map any	new ones. Deta			

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

If submitting this form as part of a joint report on be	
	SPDES ID
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
2. Evaluating Progress Toward Measurable Goals M	CM 3
Use this page to report on your progress and project plans	<del>-</del>
identified in your Stormwater Management Program Plan	i (SWMPP), including requirements 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 reconnaissa	ance inventory and dry weather inspections
of 20% of County-owned outfalls within the MS4 bound	
	,,-
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 2018 summer season, DPW
staff conducted dry weather inspections within Area #4,	
Inspection areas were redistributed in 2018 to more equa	lly balance outfalls in each area for the next
round of 20% (five year) dry weather inspections.	
	and and in this was outing parts 19
C. How many times was this observation measured or	
	1 9 6
	(ex.; samples/participants
D. Has your MS4 made progress toward this measura	
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set for	orth in the SWMPP?
·	● Yes ○ No
Briefly summarize the stormwater activities planne the next reporting cycle (including an implementat	
Continue with inspection program as developed - by insp	pecting those outfalls in Area #1
(approximately 20%), including outfalls along County ro	
(pp 20,0), moreous occurs around country to	and the second of the second o
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This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 9$ 

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

grande destruction of the control of	SPDES ID
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
MEASURABLE GOAL #3C To develop and implement local County in accordance with the State's model IDDE law.	IDDE regulations in Broome
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Goal objectives have not been met in the 2018-2019 reporting per	riod.
C. How many times was this observation measured or evaluat	
	(ex.: samples/participants/ever
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schednle to meet the deadline set forth in the	he SWMPP?  ○ Yes • No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	et the goals of this MCM during
The SWMPP identifies that this local law/regulation will be estab	olished 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 2019-2020 reporting period.

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

Name of MS4/Coalition BROOME COUNTY	SPDES ID    N   Y   R   2   0   A   3   3   2
Name of Wis-4 Countrion	
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM) III.C.1. Submit additional pages as needed.	_
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
MEASURABLE GOAL #3D To install markers on 100% of the and DI's within the MS4 area; to be completed each year within a minimum).	
B. Briefly snmmarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
During 2018, the marker installation goal was not met due to other	er program priorities.
C. How many times was this observation measured or evaluation	ted in this reporting period?
	(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	•
Drain markers that were not installed in area #4 during 2018 will County staff will continue to re-install drain markers within areas year. In 2019, Outfall Area #1 will be inspected - markers will be	of dry weather inspections each

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

If submittin	ng this form as part of a joir	nt report on behalf of a	a coalition leave SPDES ID blank.  SPDES ID	
Name of MS4/Coalition	BROOME COUNTY		N Y R 2 0 A 3 3	2
12. Evaluating Prop	gress Toward Measural	ble Goals MCM 3		
identified in your St			d achieving measurable goals IPP), including requirements in Part	
A. Briefly summar	rize the Measurable Goa	al identified in the S	SWMPP in this reporting period.	
and list it on the sto		goal also includes cr	hotline and to advertise this hotline reating centralized tracking and w-up.	
B. Briefly summar Goal.	rize the observations tha	at indicated the ove	erall effectiveness of this Measural	ble
fillable on-line form fillable form specifi County Planning we	n through Environmental ically for reporting IDDE ebpage. All of the compl	Health (part of the I E on the County's DP laints / issues during	pome County. There is a hotline and Health Department) - there is a PW Stormwater webpage and the g 2018 came in through the Health nethod to publicize the on-line forms	
C. How many time	es was this observation 1	measured or evalua	ated in this reporting period?	
				1
D. Has your MS4 r	made progress toward t	his measurable goa	ex.: samples/particing all during this reporting period?  ✓ Yes ○	
E. Is your MS4 on	schedule to meet the de	eadline set forth in t	the SWMPP?  • Yes • 1	No.
•	rize the stormwater activ	-	eet the goals of this MCM during	10
	porting period we want to IDDE tracking and repo		l tracking system for any complaints	3,

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

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| SPDES ID | | N | Y | R | 2 | 0 | A | 3 | 3 | 2 |

### 12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

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

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

DPW staff have been working directly with facility managers to educate these staff regarding IDDE's, SPCC's, and good housekeeping. Several employee educational brochures have been developed relating to IDDE's and stormwater/MS4 in general. In 2018 we began more general training of DPW staff related to these measures. 63 new individuals were trained regarding IDDE and general facility related good housekeeping measures.

C	How many	times was	this obse	rvation	measured	or e	valuated	in this	reporting	neriod?
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(ex.: samples/participants/events)

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

● Yes ○ No

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

Yes O No

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

During the 2019-2020 reporting year DPW staff will continue to distribute the IDDE and stormwater brochures and set up more general staff training sessions for those staff specifically identified. Special attention will be paid to new employees or existing employees in new positions.

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

If submittin	g this form as part of a join	t report on behalf of a	SPDES ID STARK.
Name of MS4/Coalition	BROOME COUNTY		N Y R 2 0 A 3 3 2
12. Evaluating Prop	gress Toward Measurab	ole Goals MCM 3	
identified in your St			achieving measurable goals PP), including requirements in Part
A. Briefly summar	ize the Measurable Goa	l identified in the S	SWMPP in this reporting period.
environmental impa encourage the use of	ects of illegal dumping, as	s well as chemical ar ontrol these. This is	es and industries about the negative nd hazardous waste spills, and to s to be done through the County 239
B. Briefly summar Goal.	ize the observations tha	t indicated the over	rall effectiveness of this Measurable
reviews where BMI appropriate. Additi	P's are incorporated or inconally, Broome County Per issues and IDDE. No a	cluded as advisory co Planning has been pr	ew and analyze 239 development omments to municipalities as roviding training for municipal staff elated to tracking was made during
C. How many time	s was this observation n	neasured or evalua	ted in this reporting period?  (ex.: samples/participants/eve
D. Has your MS4 i	nade progress toward th	nis measurable goa	I during this reporting period?  • Yes • No
E. Is your MS4 on	schedule to meet the dea	adline set forth in t	the SWMPP?  ● Yes ○ No
	ize the stormwater activ		eet the goals of this MCM during
count the number of	f times these educational:	issues are being add	system through County Planning to lressed through the 239 review ue these reviews as established, and

to continue the outreach to municipal officials. An additional item that we would like to work on

this year is to create specific literature to be sent back with 239 reviews.

This report is being submitted for the reporting period ending March 9, 2019

Name of MS4/Coalition Tioga County	SPDES ID											
Name of MS4/Coantion												
Minimum Control Measure 3	3. Illicit Discharge Detection and Elimination											
The information in this section is being reporte	ted (check one):											
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to</li> </ul>	to this report?											
1. Enter the number and approx. perce	ent of outfalls mapped: 6 # 100%											
2. How many of these outfalls have been reporting period (outfall reconnaissa	en screened for dry weather discharges during this ance inventory)?											
3.a. What types of generating sites/sewer reporting period?	rsheds were targeted for inspection during this											
O Auto Recyclers	O Landscaping (Irrigation)											
O Building Maintenance	O Marinas											
○ Churches	O Metal Plateing Operations											
O Commercial Carwashes	O Outdoor Fluid Storage											
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance											
O Construction Vehicle Washouts	O Printing											
O Cross-Connections	O Residential Carwashing											
O Distribution Centers	O Restaurants											
O Food Processing Facilities	O Schools and Universities											
O Garbage Truck Washouts	O Septic Maintenance											
O Hospitals	O Swimming Pools											
O Improper RV Waste Disposal	O Vehicle Fueling											
O Industrial Process Water	O Vehicle Maint./Repair Shops											
Other:	• None											
O Sewersheds:												

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

Name of MS4/Coalition Tioga County	SPDES ID  N Y R 2	0 A 0 4 7
3.b. What types of illicit discharges have	been found during this reporting period?	?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	O Inflow/Infiltration	
O Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows	
O Illegal Dumping	O Straight Pipe Sewer Discharges	
Other:  How many illicit discharges/potentia	None    I illegal connections have been detected d	uring this
reporting period?	i megai connections have been detected a	0
5. How many illicit discharges have bee	en confirmed during this reporting period	1?
<ul><li>6. How many illicit discharges/illegal coperiod?</li><li>7. Has the storm sewershed mapping be If No, approximately what percent was</li></ul>		his reporting  O  Yes  No
8. Is the above information available in Is this information available on the war If Yes, provide URL(s):  Please provide specific address of page URL		<ul><li>Yes ○ No</li><li>O Yes ● No</li><li>age.</li></ul>
URL		

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

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

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

Name of MS4/Coalition Tioga County	N Y R 2 0 A 0 4 7
12. Evaluating Progress Toward Measurable Goals MCM 3	•
Use this page to report on your progress and project plans toward ach identified in your Stormwater Management Program Plan (SWMPP), III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWI	MPP in this reporting period.
Tioga County Public Works continues to follow the best management "Tioga County and Town of Owego Stormwater Management Prograthrough 2020.  No new catch basins or outfalls have been constructed or discovered.	am Plan", which is effective
B. Briefly summarize the observations that indicated the overall Goal.	effectiveness of this Measurable
All catchment basins were cleaned and any repairs needed were com No illicit discharges were observed during biannual inspections of or	
C. How many times was this observation measured or evaluated	in this reporting period?  [ex.: samples/participants/even]
D. Has your MS4 made progress toward this measurable goal du	
E. Is your MS4 on sehedule to meet the deadline set forth in the	SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedul	
Catchment Basins (55) and outfalls (6) will continue to be inspected spring and once in the fall.	
Tioga County will schedule street sweeping of its MS4 area of jurisd with Town of Owego Highway Department per the intermunicipal at	

**SWPPP** process?

## MS4 Annual Report Form

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

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

	ODDEO	775	-				
Nai	me of MS4/Coalition City of Binghamton SPDES  N Y	R 2	?	0 A	3	4	1
	Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control	<u>ol</u>					
Th	ne information in this section is being reported (check one):						
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?						
1a	a. Has each MS4 contributing to this report adopted a law, ordinance or othe mechanism that provides equivalent protection to the NYS SPDES Gener		-				
	Stormwater Discharges from Construction Activities?			<b>9</b> Y	'es	0	No
A IJ	o. Has each Town, City and/or Village contributing to this report document equivalent to a NYSDEC Sample Local Law for Stormwater Managemer Sediment Control through either an attorney cerfification or using the Nanalysis Workbook?	it an	d I E 0	Eros	sion ap		d
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Lo 0 09/2004			w. 3/20	06	• 1	NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?			<b>•</b> Y	'es	0	No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPP) reviewed in this reporting period?	Ps) h	av	e be	en		1
4.	Does your MS4/Coalition have a mechanism for receipt and consideration comments related to construction SWPPPs?	n of ¡ ▶ Yes		blic O N		0 ]	NT
	If Yes, how many public comments were received during this reporting period	<del>1</del> ?					0
5.	Does your MS4/Coalition provide education and training for contractors	abo	ıt	the	loca	I	

• Yes O No

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

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

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

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

# Minimum Control Massures 4 and 5

	Construction Site and Post-Construction Control		
Th	ne information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a	a. Has each MS4 contributing to this report adopted a law, ordinance or other requestion that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?		O No
11	o. Has each Town, City and/or Village contributing to this report documented that equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSDE	Erosion C Gap	and
	Analysis Workbook?   Yes	O No	ONT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La O 09/2004 0 0	aw. 13/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have reviewed in this reporting period?	/e been	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs?	ıblic O No	O NT
	If Yes, how many public comments were received during this reporting period?		0
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	the loca Yes	ıl O No

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

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

		SPI	DES	anı					_
Name of MS4/Coalition	Town of Chenengo	N	Y	R	2	Α	_	2	7

	Minimum Control Measures 4 and 5.	
	Construction Site and Post-Construction Control	
Τh	e information in this section is being reported (check one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1a	a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?	O No
1b	o. Has each Town, City and/or Village contributing to this report documented that the law equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney cerfification or using the NYSDEC Gap	and
	Analysis Workbook? • Yes O No	O NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  O 09/2004 O 03/2006	О NТ
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?  March 10, 2017 March 9, 2019	2
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?  • Yes • No	О ИТ
	If Yes, how many public comments were received during this reporting period?	0
5.	Does your MS4/Coalition provide education and training for contractors about the loca SWPPP process?  • Yes	ol O No

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

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

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

		SPD	ES ID							
Name of MS4/Coalition Town of Conklin		N	Y R	2	0 A	2	5	5		
Minimum Control Measures 4 and 5.										
Construction Site and Post-Constru	uction C	on'	<u>trol</u>							
The information in this section is being reported (check one):										
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition         How many MS4s contributed to this report?     </li> </ul>										
1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?										
1b. Has each Town, City and/or Village contributing to this re equivalent to a NYSDEC Sample Local Law for Stormwa Sediment Control through either an attorney cerfification Analysis Workbook?	ter Mana	gen	ient a	and DE	Eros C G	sion ap		d		
If Yes, Towns, Cities and Villages provide date of equivalent		1ple 19/2(			aw. 03/20	06	01	NT		
2. Does your MS4/Coalition have a SWPPP review procedur	e in plac	e?			<b>9</b> Y	/es	0	No		
3. How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	1 Plans (S	WF	PPPs)	ha	ve bo	en_		3		

Yes

O No

O NT

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public

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

comments related to construction SWPPPs?

Notices of Violation	#		0	O No Authority
o received or violation		<u> </u>		O mornament,
Stop Work Orders	#		0	O No Authority
Criminal Actions	#		0	O No Authority
O Termination of Contracts	#			No Authority
O Administrative Fines	#			No Authority
O Civil Penalties	#			No Authority
O Administrative Orders	#			No Authority
O Enforcement Actions or Sanctions	#			
O Other	#			No Authority

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

		SPI	<u>DES</u>	ID						
Name of MS4/Coalition	TOWN OF DICKINSON	N	Y	R	2	0	Α	1	4	3

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

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

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

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

_		<u>SPE</u>	<u>ES</u>	$^{\mathrm{ID}}$						
Name of MS4/Coalition	Town of Fenton	N	Y	R	2	0	Α	0	7	8
•										

	Minimum Control Measures 4 and 5.		
	Construction Site and Post-Construction Control		
Th	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a	Has each MS4 contributing to this report adopted a law, ordinance or other reg mechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?		O No
1 b	.Has each Town, City and/or Village contributing to this report documented tha equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSDE	Erosion	
	Analysis Workbook?    Yes	O No	О ИТ
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La O 09/2004 ● 0	w. 3/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have reviewed in this reporting period?	e been	2
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs?  • Yes	blic O No	O NT
	If Yes, how many public comments were received during this reporting period?		0
5.	Does your MS4/Coalition provide education and training for contractors about	the loca	
	SWPPP process?	Yes	O No

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

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

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

			SPI	DES	ID						
Name of MS4/Coalition	Town of Kirkwood		N	Y	R	2	0	Α	0	7	2
		•									

	Construction Site and Post-Construction Control		
Th	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a	. Has each MS4 contributing to this report adopted a law, ordinance or other regulate mechanism that provides equivalent protection to the NYS SPDES General Permit 1 Stormwater Discharges from Construction Activities?	for	O No
1b	Has each Town, City and/or Village contribnting to this report documented that the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Eros Sediment Control through either an attorney cerfification or using the NYSDEC Ga	ion :	
	Analysis Workbook?   • Yes ON	o	O NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  • 09/2004 • O 03/200	)6	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	es	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have be reviewed in this reporting period?	en	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?  • Yes • O N	lo '	O NT
	If Yes, how many public comments were received during this reporting period?		0
5.	Does your MS4/Coalition provide education and training for contractors about the I SWPPP process?		O No

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

This report is being submitted for the reporting period ending March 9, 2019

	If submitting this form as part of a joint report on behalf of	a coalition leave S	SPDES ID bl	ank.	J
		SPDES	SID		
Naı	me of MS4/Coalition Town of Owego	NYR2	0A079		
	Minimum Control Measure Construction Site and Post-Const		<u>ol</u>		
Th	e information in this section is being reported (check one):				
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?				
1a	. Has each MS4 contributing to this report adopted a law, mechanism that provides equivalent protection to the NY Stormwater Discharges from Construction Activities?		_	for	O No
1b	Has each Town, City and/or Village contributing to this equivalent to a NYSDEC Sample Local Law for Stormw Sediment Control through either an attorney cerfificatio Analysis Workbook?	ater Manageme n or using the N	nt and Ero	sion ap	
	If Yes, Towns, Cities and Villages provide date of equivalent	nt NYS Sample L		06	ONT
2.	Does your MS4/Coalition have a SWPPP review procedu	re in place?	• Y	'es	O No
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	on Plans (SWPP	Ps) have be	· · · · · · · · · · · · · · · · · · ·	3
4.	Does your MS4/Coalition have a mechanism for receipt a comments related to construction SWPPPs?		n of public ● Yes ○ 1		ONT
	If Yes, how many public comments were received during this	is reporting perio	d?		0
5.	Does your MS4/Coalition provide education and training SWPPP process?	g for contractors	about the		l O No

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

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

**SWPPP** process?

### **MS4 Annual Report Form**

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

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

	SPDES ID	
Nar	me of MS4/Coalition Town of Union NYR20A 0 5	0
	Minimum Control Measures 4 and 5.	
	Construction Site and Post-Construction Control	
Th	ne information in this section is being reported (check one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1a	a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?	) No
1b	o. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion as Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?	
	Analysis Workbook.	/ 141
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  O 09/2004 O 03/2006	NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	) No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	3
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?  • Yes • No • Coalition of public comments related to construction SWPPPs?	) 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

0

• Yes O No

O Notices of Violation	#				O No Authority
Stop Work Orders	#			2	O No Authority
O Criminal Actions	#		:		O No Authority
O Termination of Contracts	#				O No Authority
Administrative Fines	#				No Authority
O Civil Penalties	#				O No Authority
O Administrative Orders	#				O No Authority
O Enforcement Actions or Sanctions	#				
O Other	#				O No Authority

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

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

	SPDES ID
Name of MS4/Coalition Town of Vestal	N Y R 2 0 A 0 6 4
Minimum Control Measures 4 and Construction Site and Post-Construction	
Construction Site and Tost Construction	
The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition         How many MS4s contributed to this report?     </li> </ul>	
1a. Has each MS4 contributing to this report adopted a law, ordina mechanism that provides equivalent protection to the NYS SPD Stormwater Discharges from Construction Activities?	
1b. Has each Town, City and/or Village contributing to this report equivalent to a NYSDEC Sample Local Law for Stormwater M Sediment Control through either an attorney cerfification or us	Sanagement and Erosion and
Analysis Workbook?	• Yes O No O NT
If Yes, Towns, Cities and Villages provide date of equivalent NYS	Sample Local Law. O 09/2004 ● 03/2006 O NT
2. Does your MS4/Coalition have a SWPPP review procedure in p	place? • Yes O No
3. How many Construction Stormwater Pollution Prevention Plan reviewed in this reporting period?	ns (SWPPPs) have been

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public

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

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

Yes

O No O NT

Yes O No

0

comments related to construction SWPPPs?

**SWPPP** process?

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

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

Nan	ne of MS4/Coalition Village of Endicott  SPDES ID  N Y R 2 0
	Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control
The	e information in this section is being reported (check one):
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?
1a	Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?  • Yes • No
1b	.Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?  • Yes • No • NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  ○ 09/2004 ● 03/2006 ○ NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes • No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? ○ Yes ○ No ○ NT
	If Yes, how many public comments were received during this reporting period?
5.	Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? • Yes • No

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

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

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

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

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

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

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

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

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

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

	SPL	DES	IJD						
Name of MS4/Coalition VILLAGE OF PORT DICKINSON	N	Y	R	2	0	Α	0	8	0

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

	Construction Site and Post-Construction Control	
Th	e information in this section is being reported (check one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1a	. Has each MS4 contributing to this report adopted a law, ordinance or other regulator mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?	r
	Test Discharges from Construction Pictures.	<b>O</b> 140
1b	o. Has each Town, City and/or Village contributing to this report documented that the later equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosio Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?  • Yes O No	n and
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  O 09/2004 ● 03/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?   • Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPs) have been reviewed in this reporting period?	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?  • Yes • No	O NT
	If Yes, how many public comments were received during this reporting period?	0
5.	Does your MS4/Coalition provide education and training for contractors about the los SWPPP process? • Yes	eal O No

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

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

**SWPPP** process?

#### **MS4** Annual Report Form

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

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

Name of MCA/Condition BROOME COUNTY	N Y R 2 0 A 3 3 2						
Name of MS4/Coalition BROOME COON 1							
Minimum Control Measures 4 and	<u>15.</u>						
Construction Site and Post-Construction	<u>Control</u>						
The information in this section is being reported (check one):							
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition         How many MS4s contributed to this report?         1     </li> </ul>							
1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?							
1b. Has each Town, City and/or Village contributing to this report dequivalent to a NYSDEC Sample Local Law for Stormwater Massediment Control through either an attorney certification or using	nagement and Erosion and						
Analysis Workbook?	○ Yes ○ No ● NT						
If Yes, Towns, Cities and Villages provide date of equivalent NYS S	Sample Local Law.  ○ 09/2004 ○ 03/2006 ● NT						
2. Does your MS4/Coalition have a SWPPP review procedure in pl	lace? • Yes • No						
3. How many Construction Stormwater Pollution Prevention Plans reviewed in this reporting period?	s (SWPPPs) have been						
4. Does your MS4/Coalition have a mechanism for receipt and conscomments related to construction SWPPPs?	sideration of public • Yes O No O NT						

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

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

0

● Yes ○ No

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

O Notices of Violation	#			0	O No Authority
O Stop Work Orders	#			0	O No Authority
O Criminal Actions	#				No Authority
O Termination of Contracts	#			0	O No Authority
O Administrative Fines	#				No Authority
O Civil Penalties	#			,,,,,	No Authority
O Administrative Orders	#				No Authority
O Enforcement Actions or Sanctions	#	- A.M. 11		0	
O Other	#				O No Authority

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

		SPL	ES I			•		
Name of MS4/Coalition	Tioga County	N	YI	2 0	A	0	4	7

	Minimum Control Measures 4 and 5.	
	Construction Site and Post-Construction Control	
Ti	he 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?	
18	a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for	
	Stormwater Discharges from Construction Activities? • Yes	O No
	equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?  O Yes O No	• NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  © 09/2004 © 03/2006	• NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?  • Yes • No	o nt
	If Yes, how many public comments were received during this reporting period?	0
5.	Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?  • Yes	l O No

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

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

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

Name of MS4/Coalition City of Binghamton SPDES 1D  N Y R 2 0 A	3 4 1
Minimum Control Measure 4. Construction Site Stormwater Runoff Co	<u>ontrol</u>
The information in this section is being reported (check one):	
On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1. How many construction projects have been authorized for disturbances of one acre o during this reporting period?	r more
2. How many construction projects disturbing at least one acre were active in your juri during this reporting period?	sdiction 1
3. What percent of active construction sites were inspected during this reporting period	0 0 %
4. What percent of active construction sites were inspected more than once?	O NT
5. Do all inspectors working on behalf of the MS4s contributing to this report use the N Construction Stormwater Inspection Manual?	
6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention I (SWPPPs) of construction projects that are subject to MS4 review and approval?  ● Yes ○ No	
If your MS4 is Non-Traditional, are SWPPPs of construction projects made available public review?	
If Yes, use the following page to identify location(s) where SWPPPs can be accessed.	

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

SPDES ID Name of MS4/Coalition City of Binghamton 2 0 A Y R 3 4 1 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department E n g i n i n g D а r t m e n t е e r е р Address 3 8 S Н t а r е е Zip City 3 9 NY 1 0 1 В i g Phone 0 7 2 7 0 0 7 6 O Library Address Zip City Phone O Other Address Zip City Phone Please provide specific address where SWPPPs can be accessed - not home page. O Web Page URL(s): URL

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

					,					
If submittin	g this form as part of a joint report on behalf of a coa	alition lea	ve S	SPD	ES	ID	blaı	nk.		
		SP	DES	lD						
	City of Directory	N	v	Б	2	$\cap$	ח	3	Λ	1

City of Binghamton		N Y R 2 0 A 3 4 1
gress Toward Measurable Go	oals MCM 4	
	-	
ize the Measurable Goal ider	ntified in the SWMF	P in this reporting period.
0-15-003 changes. Continued The city stormwater web pages. All construction sites requi	to review all SWPPF se includes the City of ring a SWPPP had be	o's and maintain a database of Binghamton SWMP for the een reviewed and approved.
eview checklist is utilized for :	all SWPPP reviews in	n accordance with newly
	ort on your progress and project or mwater Management Progracional pages as needed.  ize the Measurable Goal identification on the continued reviewing 0-15-003 changes. Continued The city stormwater web pages. All construction sites requi	press Toward Measurable Goals MCM 4  ort on your progress and project plans toward achiever or matter Management Program Plan (SWMPP), in the city as needed.  ize the Measurable Goal identified in the SWMF and in the SWMF

(ex.: samples/participants/events) D. Has your MS4 made progress toward this measurable goal during this reporting period?

1

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

Yes O No

Yes O No

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

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

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

		SPDES ID		
Name of MS4/Coalition Town of Binghamton			2 0 A 0	0 9
Minimum Control Meas	ure 4. Construction Site	Stormwater Ru	noff Cor	<u>itrol</u>
The information in this section is being	g reported (check one):			
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contr</li> </ul>	ributed to this report?			
1. How many construction proje during this reporting period?	ects have been authorized for	disturbances of or	ne acre or	more 0
2. How many construction proje during this reporting period?	ects disturbing at least one ac	ere were active in y	our jurisc	diction 0
3. What percent of active constr	ruction sites were inspected d	uring this reportin	ng period?	● NT
4. What percent of active constr	ruction sites were inspected n	ore than once?		● NT
5. Do all inspectors working on Construction Stormwater Ins		ing to this report ( ● Ye		/ <b>S</b> O NT
6. Does your MS4/Coalition pro- (SWPPPs) of construction pro-	-		oval?	ans O NT
If your MS4 is Non-Tradition public review?	al, are SWPPPs of construct			
If Yes, use the following page to	o identify location(s) where SV	WPPPs can be acces	ssed.	

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID N Y R 2 0 A 0 0 9 Town of Binghamton Name of MS4/Coalition 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department £ С d 0 £ £ i Т Вi m t 0 е С 0 w n h a 0 n n g Address 9 2 7 Ρ а r k Α V е |n|u е Zip City NY 3 9 Вi 0 3 а t n g m О Phone 3 5 0 7 2 0 6 O Library Address City Zip Phone O Other Address City Zip Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

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

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

SPDES ID

Name of MS4/Coalition Town of Binghamton N Y R Z 0 A 0 0 9
7. Evaluating Progress Toward Measurable Goals MCM 4
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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?
(ex.: samples/participants/events, D. Has your MS4 made progress toward this measurable goal during this reporting period?
e Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Review SWPPP plans in accordance with procedures and inspect construction sites according to manual.

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

Name of MS4/Coalition Town of Chenengo	DES ID   Y   R   2   0   A   1   2   7
Minimum Control Measure 4. Construction Site Stormwa	ter Runoff Control
The information in this section is being reported (check one):	
On behalf of an individual MS4 O On behalf of a coalition How many MS4s contributed to this report?	
1. How many construction projects have been authorized for disturbance during this reporting period?	ces of one acre or more
2. How many construction projects disturbing at least one acre were act during this reporting period?	tive in your jurisdiction
3. What percent of active construction sites were inspected during this r	reporting period? ONT
4. What percent of active construction sites were inspected more than of	nce? O NT 1 0 0 %
5. Do all inspectors working on behalf of the MS4s contributing to this Construction Stormwater Inspection Manual?	report use the NYS  • Yes O No O NT
6. Does your MS4/Coalition provide public access to Stormwater Pollut (SWPPPs) of construction projects that are subject to MS4 review and	
If your MS4 is Non-Traditional, are SWPPPs of construction projects public review?	
If Yes, use the following page to identify location(s) where SWPPPs can	be accessed.

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. Y R 2 0 A Town of Chenengo 2 Name of MS4/Coalition 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department Buil d i Ord i n a n d 1 i n g С е а n а n n Address 5 2 19 N Y S R 1 2 0 le Zip City 1 3 Bin Y 9 0 |g |h N 1 m Phone 8 4 8 0 0 6 4 O Library Address City Zip Phone O Other Address City Zip Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

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

Name of MS4/Coalition Town of Chenengo N Y R 2 0 A 1 2 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.
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?  (ex.: samples/participants/events.
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes • O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue training staff on permit updates: continue to review, inspect, and document.

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

	SPDES ID  N Y R 2	0 A 2	5 5
Nar	me of MS4/Coalition Not Comking Not State of MS4/Coalition Not Comking Not State of MS4/Coalition Not	0 1 2	
	Minimum Control Measure 4. Construction Site Stormwater Runo	off Con	<u>trol</u>
The	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one during this reporting period?	acre or i	more 3
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 3
3.	What percent of active construction sites were inspected during this reporting	period?	T 1
4.	What percent of active construction sites were inspected more than once?	1 0	0 NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual?  • Yes	the NY	S O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approved	1?	
	Yes  If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?	O No ailable f O Yes	O NT or O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	·1.	

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

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

SPDES ID NYR20A 2 5 5 Town of Conklin Name of MS4/Coalition 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department Τ o w n Н 1 1 а Address 1 2 7 1 С 1 i R d 0 n k n 0 a City Zip i N Y 1 3 7 4 8 С k o n Phone 6 0 7 7 5 3 4 5 O Library Address City Zip Phone O Other Address City Zip Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL

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

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 4
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Measurable goal is to inventory the number of SWPPP's received and reviewed. Also to document the number of sites and amount of times they are inspected.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
All construction projects with disturbances of one or more acres had an approved SWPPP in place. All active construction projects were inspected multiple times during this reporting period.
C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/event
D. Has your MS4 made progress toward this measnrable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place, have stormwater permit coverage through DEC, and inspect every active construction project at least once a month during construction.

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

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

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

Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2 0 A 1 4 3
6. con't.:	
Submit additional pages as needed.	
O MS4/Coalition Office	
Department	
TOWN HALLL	
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Address	
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Phone	
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O Web Page URL(s): Please provide specific address where SWPPF	Ps can be accessed - not home page.
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URL	

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

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

Name of MS4/Coalition
7. Evaluating Progress Toward Measurable Goals MCM 4
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
THERE WAS ONESWPPP RECEIVED. Measurable goal is to inventory the number of SWPPP'S received and reviewed. Also to document the number and amount of times construction projects are inspected. PROJECT WAS STOPED ALMOST IMMEDIATELY.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
WE ARE PREPARED TO TAKE ACTION WHEN WE RECEIVE A PROJECT.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period?  ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes • O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
REVIEW ANY SWPPP'S AND MAKE AVAILABLE FOR PUBLIC COMMENT Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place, have stormwater permit coverage through DEC, and inspect every active construction

project at least once a month during construction.

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

Nan	SPDES ID     N   Y   R   2   0   A   0   7   8     N   Y   R   2   0   A   0   7   8     N   Y   R   2   0   A   0   7   8     N   Y   R   2   0   A   0   7   8     N   Y   R   2   0   A   0   7   8     N   Y   R   2   0   A   0   0   7   8     N   Y   R   2   0   A   0   0   0   0     N   Y   R   2   0   A   0   0   0   0     N   Y   R   2   0   A   0   0   0     N   Y   R   2   0   A   0   0   0   0     N   Y   R   2   0   A   0   0   0   0     N   Y   R   0   0   0   0   0   0   0   0   0
	Minimum Control Measure 4. Construction Site Stormwater Runoff Control
The	e information in this section is being reported (check one):
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?
1.	How many construction projects have been authorized for disturbances of one acre or more during this reporting period?
2.	How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?
3.	What percent of active construction sites were inspected during this reporting period? O NT $100\%$
4.	What percent of active construction sites were inspected more than once? O NT $100\%$
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?    • Yes O No O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  • Yes O No O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  O Yes O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

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

SPDES ID Y R 2 0 A 0 7 8 N Town of Fenton Name of MS4/Coalition 6. con't.: Submit additional pages as needed. ● MS4/Coalition Office Department  $\mathbf{T}$ f 0 f i o w n t o n С е S е n Address 4 S 4 Ρ k a r t r е е t Zip City NY 1 3 8 3 3 Р t 0 r а е Phone 7 0 6 0 8 4 8 0 O Library Address City Zip Phone O Other Address Zip City Phone • Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. f f t t 0 W n 0 e n 0 n С o m W W W c|r|0|1|1 i d 1 е С t е n g n е е r i i n g a n S е 1 S W Μ Р SW Ρ P Ρ d t 0 r a n s е е URL

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

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

SPDES ID

N Y R 2 0 A 0 7 8

Name of MS4/Coalition Town of Fenton   N   Y   R   2   0   A   0   7   8								
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.								
Conduct SWPPP Reviews Via Planning Bd. inform public of ongoing activities on construction projects Educate owners and contractors on the construction review process								
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.								
Maintenance of ES&C Record Maintenance								
C. How many times was this observation measured or evaluated in this reporting period?								
2								
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No	/even							
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes • O No								
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).								
Address Erosion and Sediment Control rqts. on upcoming Projects (Beer Tree Brewery Expansion, Binghamton Precast Mold Storage Building) and address activity in Flood Hazard Areas with Planning Board and Building Inspector.								

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

Nan	SPDES ID  N Y R 2 0 A 0 7 2	2
	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?   N  9	
4.	What percent of active construction sites were inspected more than once?	
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the NYS  Construction Stormwater Inspection Manual?  Yes O No O N	Τ
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?  See Yes O No O No	Т
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  O Yes O N	0
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed.	

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

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<b>●</b> N	MS4/Coalition Office  Department																														
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This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 9$ 

Name of MS4/Coalition	Town of Kirkwood			N Y R 2	0 A 0	7 2
7. Evaluating Prop	gress Toward Mea	surable Goals I	MCM 4			
Use this page to repidentified in your St III.C.1. Submit addi	ormwater Managen	nent Program Pl		_	_	Part
A. Briefly summar	rize the Measurabl	e Goal identifie	d in the SWMP	P in this repor	rting peri	od.
Measurable goal is the number of proje				eviewed. Also	to docum	ent
B. Briefly summar Goal.	rize the observation	ns that indicate	d the overall eff	ectiveness of t	his Measu	ırable
All construction pro All active construct						ce.
C. How many time	es was this observa	tion measured	or evaluated in	•		1
D. Has your MS4 1	made progress tow	ard this measu	rable goal durin			ticipants/even ?
					Yes	O No
E. Is your MS4 on	schedule to meet t	he deadline set	forth in the SW	'MPP?	Yes	O No
F. Briefly summar the next reporti	rize the stormwater ng cycle (including	-		_		
Continue to verify t in place, have storn project at least once	nwater permit cover	rage through DE				'PPP

This report is being submitted for the reporting period ending March 9, 2019

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

Name of MS4/Coalition Town of Owego	SPDES ID NYR20A079
Minimum Control Measure 4. Construction Site	Stormwater Runoff Control
The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this report?</li> </ul>	
1. How many construction projects have been authorized for during this reporting period?	disturbances of one acre or more
2. How many construction projects disturbing at least one ac during this reporting period?	re were active in your jurisdiction
3. What percent of active construction sites were inspected de	uring this reporting period? ONT
	100 %
4. What percent of active construction sites were inspected m	ore than once? ONT
5. Do all inspectors working on behalf of the MS4s contribution Construction Stormwater Inspection Manual?	<u> </u>
6. Does your MS4/Coalition provide public access to Stormw (SWPPPs) of construction projects that are subject to MS4	review and approval?
If your MS4 is Non-Traditional, are SWPPPs of constructional public review?	● Yes ○ No ○ NT on projects made available for ○ Yes ○ No

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

This report is being submitted for the reporting period ending March 9, 2019

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

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

This report is being submitted for the reporting period ending March 9, 2019

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

SPDES ID

Name of MS4/Coalition Town of Owego	NYR20A079
7. Evaluating Progress Toward Measurable Goals MCM	4
Use this page to report on your progress and project plans towidentified in your Stormwater Management Program Plan (SV III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in t	he SWMPP in this reporting period.
As a result of a recent NYSDEC MS4 audit, the Town has de Procedures (SOPs) for MCM 4 & 5.	veloped Standard Operating
B. Briefly summarize the observations that indicated the Goal.	overall effectiveness of this Measurable
SOPs have been developed and are available in Planning & 2 on Town of Owego webpage - Stormwater page when it is u	
C. How many times was this observation measured or eva	luated iu this reporting period?
D. IV MC4	(ex.: samples/participants/events,
D. Has your MS4 made progress toward this measurable	goal during this reporting period?  • Yes • No
E. Is your MS4 on schedule to meet the deadline set forth	in the SWMPP?  ● Yes ○ No
F. Briefly summarize the stormwater activities planned to the next reporting cycle (including an implementation	
Placement of SOPs for MCM 4 & 5 on the Town of Owego	vebpage

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

Nai	me of MS4/Coalition Town of Union SPDES ID  N Y R 2	0 A 0	5 0
	Minimum Control Measure 4. Construction Site Stormwater Runo	ff Con	<u>trol</u>
Th	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one a during this reporting period?	acre or i	more 3
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 4
3.	What percent of active construction sites were inspected during this reporting [	period?	
4.	What percent of active construction sites were inspected more than once?	1 0	0 NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual?   • Yes	the NY	S O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevent (SWPPPs) of construction projects that are subject to MS4 review and approvation Prevention Projects that are subject to MS4 review and approvation Prevention Preve		ans Ont
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?		
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	i.	

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

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

Name of MS4/Coalition Town of Union N Y R 2 0 A 0 5	О
6. con't.: Submit additional pages as needed.	
● MS4/Coalition Office	
Department	_
Code Enforcement  Address	
3 1 1 1 E Main Street	٦
City Zip	_
E n d w e 1 1 N Y 1 3 7 6 0 -	
Phone	
( 6 0 7 ) 7 8 6 <b>-</b> 2 9 2 0	
O Library	
Address	_
	┙
City Zip	٦
Dt.	╛
Phone  / The state of the state	
O Other	
Address	7
City Zip	٦
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Phone Company of the	
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O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.	
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URL	٦
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Name of MS4/Coalition Town of Union

#### **MS4 Annual Report Form**

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

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

SPDES ID

Y R 2 0 A 0 5 0

Ν

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 3 projects started this period-1301 Un Cen Maine Highway, 243 Twist Run and 2900 Wayne Street. 1301 Un Cen Maine Highway was completed. 3301 County Club road (Visions Credit Union) is still ongoing.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Inspection reports are reviewed weekly, repeat problems are addressed with developer. Computer tracking used for SWPPP. Sites inspected more than once. Complaints investigated.
C. How many times was this observation measured or evaluated in this reporting period?
ex.: samples/participants/even  D. Has your MS4 made progress toward this measurable goal during this reporting period?
● Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
● Yes O No  F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Staff received training on inspection procedures. Promote contractor training availability on website.

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

Nam	me of MS4/Coalition Town of Vestal N Y R 2	0 A 0	6 4
	Minimum Control Measure 4. Construction Site Stormwater Runo	ff Cont	<u>trol</u>
The	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
	How many construction projects have been authorized for disturbances of one a during this reporting period?	cre or n	nore
	How many construction projects disturbing at least one acre were active in your during this reporting period?	r jurisdi	ction 5
3.	What percent of active construction sites were inspected during this reporting p	eriod?	O NT
4.	What percent of active construction sites were inspected more than once?	1 0	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual?    • Yes	the NYS	O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preven (SWPPPs) of construction projects that are subject to MS4 review and approval		ns O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made ava		
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	•	

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. Name of MS4/Coalition Town of Vestal YR 2 0 A 0 6 4 Ν 6. con't.: Submit additional pages as needed. ● MS4/Coalition Office Department i De Town o f е S t a 1 En i n n g Address 1 3 3 F t S t t r е 0 n е City 3 8 5 0 NY V е t S а Phone 8 9 8 0 0 6 0 6 O Library Address City Zip Phone O Other Address Zip City Phone Please provide specific address where SWPPPs can be accessed - not home page. O Web Page URL(s): URL

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

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

Name of MS4/Coalition Town of Vestal SPDES ID

N Y R 2 0 A 0 6 4

#### 7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

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

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

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

$\boldsymbol{C}$	How man	y times was	this ob	servation	measured	or	evaluated	in t	his rei	norting	neriod?
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(ex.: samples/participants/events)

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

Yes O No

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

Yes O No

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

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

This report is being submitted for the reporting period ending March 9, 2019 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID YR Village of Endicott Name of MS4/Coalition Minimum Control Measure 4. Construction Site Stormwater Runoff Control The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1. How many construction projects have been authorized for disturbances of one acre or more 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? ONT lo. 0 4. What percent of active construction sites were inspected more than once?  $\circ$  NT 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  $\bigcirc$  No  $\bigcirc$  NT Yes 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? If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? O Yes O No

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

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Name of MS4/Coalition Village of Endicott N Y R 2 0 6. con t.: Submit additional pages as needed. ● MS4/Coalition Office Department n g n g Address 1 0 0 E M a i n S City 13760-E n d i N Y 0 Phone (607)757 O Library Address City Zip Phone Other Address City Zip Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

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

Name of MS4/Coalition Village of Endicott  SPDES ID  N Y R 2 0 A 1 4 9
7. Evaluating Progress Toward Measurable Goals MCM 4
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Delta Engineering works with the Contractor on controlling the stormwater for Skye View Heights.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Delta Engineering sends the SWPPP Inspection Reports who via email. Then I review them and compare to my observations.
C. How many times was this observation measured or evaluated in this reporting period?
24
(ex.: samples/participants/events)  D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Skye View Heights project is finishing groundcover and remaining drainage work.

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

	SPDES ID
Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
Minimum Control Measure 4. Construction Site S	Stormwater Runoff Control
The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this report?</li> </ul>	
1. How many construction projects have been authorized for during this reporting period?	disturbances of one acre or more
2. How many construction projects disturbing at least one act during this reporting period?	re were active in your jurisdiction
3. What percent of active construction sites were inspected du	ring this reporting period? $\bigcirc$ NT $\boxed{100}$ %
4. What percent of active construction sites were inspected m	ore than once? O NT
5. Do all inspectors working on behalf of the MS4s contribution Construction Stormwater Inspection Manual?	ng to this report use the NYS  ● Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Stormwa (SWPPPs) of construction projects that are subject to MS4	
If your MS4 is Non-Traditional, are SWPPPs of construction public review?	
If Yes, use the following page to identify location(s) where SW	/PPPs can be accessed.

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

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

	SPDES ID													
Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1													
6. con't.:														
Submit additional pages as needed.														
● MS4/Coalition Office														
Department														
Johnson City Public														
Address 2 4 3 Main Street														
2 4 3 Main Street	Zip													
Johnson City NY														
Phone ( C O D ) D D D D D D D														
( 6 0 7 ) 7 9 7 - 3 0 3 1														
O Library														
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This report is being submitted for the reporting period ending March 9, 2 0 1 9

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

SPDES ID

Name of MS4/Coalition	Village of Johnson City	N Y R 2 0 A 1	0 1
7. Evaluating Prop	gress Toward Measurable Goals MCM 4		
identified in your St	ort on your progress and project plans toward formwater Management Program Plan (SWM itional pages as needed.	_ <del>-</del>	Part
A. Briefly summar	rize the Measurable Goal identified in the	SWMPP in this reporting per	iod.
University School of	one project continued under the previous year of Pharmacy project. One new SWPPP was ower separation project.		
B. Briefly summar Goal.	rize the observations that indicated the over	erall effectiveness of this Meas	surable
inspected by JCDP	welly SWPPP inspections by a NYS licensed W personnel. There were minor corrective a sed within a short time of the notification.		
C. How many time	es was this observation measured or evalu		2 6
D. Has your MS4	made progress toward this measurable go		rticipants/events) d?
·		Yes	O No
E. Is your MS4 on	schedule to meet the deadline set forth in	the SWMPP?	O No
•	rize the stormwater activities planned to ning cycle (including an implementation sci	•	ring
The Village will co require Best Manag	ontinue to review projects to determine if SW gement Practices be implemented on projects	PPPs are required and continues not requiring a SWPPP.	to

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

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

Name of MS4/Coalition VILLAGE OF PORT DICKINSON	N         Y         R         2         0         A         0         8         0
Minimum Control Measure 4. Construction Site Stor	mwater Runoff Control
The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>O On behalf of a coalition         How many MS4s contributed to this report?     </li> </ul>	

1.	How many construction projects have been authorized for disturbances of one acre of	rn	nor	e
	during this reporting period?			0
			-,	

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

  Construction Stormwater Inspection Manual?

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

Yes O No O NT

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

O Yes O No

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

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Y R 2 0 A 0 8 0 N VILLAGE OF PORT DICKINSON Name of MS4/Coalition 6. con't.: Submit additional pages as needed. O MS4/Coalition Office Department VILLAG Ε НА L Ъ Address 7 8 6 CH G S Τ T E N A N 0 RΕ Е City Zip NY 1 3 9 0 1 BIN G Η Т Ν Μ 0 Phone 0 7 1 2 3 8 O Library Address Zip City Phone O Other Address City Zip Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL

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

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

SPDES ID
Name of MS4/Coalition VILLAGE OF PORT DICKINSON N Y R 2 0 A 0 8 0
7. Evaluating Progress Toward Measurable Goals MCM 4
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
THERE HAVE BEEN NO SWPPPs RECEIVED. Measurable goal is to inventory the number of SWPPP'S received and reviewed. Also to document the number and amount of times construction projects are inspected.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
WE ARE PREPARED TO TAKE ACTION WHEN WE RECEIVE A PROJECT.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this reporting period?  ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
REVIEW ANY SWPPP'S AND MAKE AVAILABLE FOR PUBLIC COMMENT Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place, have stormwater permit coverage through DEC, and inspect every active construction

project at least once a month during construction.

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

		SPE	ES ID			
Nar	ne of MS4/Coalition BROOME COUNTY	N	Y R 2	0 A 3	3	2
	Minimum Control Measure 4. Construction Site S	Stormwat	er Runo	off Con	<u>itro</u>	<u>I</u>
The	e information in this section is being reported (check one):					
• ( • (	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?					
1.	How many construction projects have been authorized for during this reporting period?	listurbance	es of one :	acre or	mor	<b>e</b>
2.	How many construction projects disturbing at least one acr during this reporting period?	e were acti	ve in you	r jurisd	lictic	0 <b>n</b>
3.	What percent of active construction sites were inspected du	ring this re	eporting <sub>l</sub>	period?		NT %
4.	What percent of active construction sites were inspected mo	ore than on	ce?	1 0	0	nt %
5.	Do all inspectors working on behalf of the MS4s contributing Construction Stormwater Inspection Manual?	ng to this r	eport use • Yes	the NY	$\mathbf{s}$	NT
6.	Does your MS4/Coalition provide public access to Stormwa (SWPPPs) of construction projects that are subject to MS4				ans	NT
	If your MS4 is Non-Traditional, are SWPPPs of construction public review?	n projects	made ava			
	If Yes, use the following page to identify location(s) where SW	PPPs can b	e accessed	<b>1</b> .		

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

SPDES ID

Name	Name of MS4/Coalition BROOME COUNTY																N	Y	R	2	0	А	3	3	2					
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	Submit additional pages as needed.																													
	MS4/Coalition Office																													
♥ IVIX	Department																													
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This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 9 & 1 \end{vmatrix}$ 

Name of MS4/Coalition BROOME COUNTY	SPDES ID    N   Y   R   2   0   A   3   3   2
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
MEASURABLE GOAL #4A To assure that 100% of County C with contractors include appropriate erosion control language - erosion consultants or construction considerations from contractors environmental permits included in the bid documents as part of the which allows inspectors to stop work if projects are in non-complete.	ther requiring design considerations. This includes SWPPP's and other ne legal contract, and language
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
The County has adopted a policy of including erosion control lan involve earth disturbance and the potential for erosion and sedimedisturbed. In addition to the standard notes added to plans and sp "contractors stormwater certification statement" into our bid docuthe bid. Only one DPW project was bid during this reporting per	entation, irregardless of the area secifications, the County added the aments which are returned as part of
C. How many times was this observation measured or evaluate	ted in this reporting period?
	(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal	during this reporting period?  ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	5
Continue as developed and implemented. Work with Purchasing 100% of bid projects have appropriate contractor erosion control	•

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

n submitting un	is form as part of a joint report		in leave of BES ib olding.	
			SPDES ID	2 2
Name of MS4/Coalition BRO	OME COUNTY		N Y R 2 0 A 3	3 2
7. Evaluating Progres	s Toward Measurable Goal	ls MCM 4		
	on your progress and project program all pages as needed.			art
A. Briefly summarize	the Measurable Goal identi	fied in the SWMPP	in this reporting perio	d.
contractor with appropr	L#4B To assure that 100% iately trained staff (NYSDE) d prior to start of work, and t	C Erosion Control Co	ertified), that a copy of the	ne arth
B. Briefly summarize Goal.	the observations that indica	nted the overall effe	ctiveness of this Measu	rable
	nguage has been inserted into contractor's on all applicable orting period).			had
C. How many times wa	as this observation measure	ed or evaluated in tl	his reporting period?	
				1 2
	•		(ex.: samples/part.	icipants/even
D. Has your MS4 mad	e progress toward this mea	surable goal during		○ No
E. Is your MS4 on sch	edule to meet the deadline	set forth in the SWI		
				O No
<u>-</u>	the stormwater activities pl cycle (including an impleme		oals of this MCM duri	ng
	and implemented - however, ates for all projects with earth			

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

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ave SPDES ID blank.
PDES ID
N Y R 2 0 A 3 3 2
measurable goals ing requirements in Part
this reporting period.
o of County projects are rol.
veness of this Measurable
ulting services to the onally, all County DPW ements per stated goals.
reporting period?
(ex.: samples/participants/events)  is reporting period?  ● Yes ○ No
P <b>?</b> ● Yes ○ No
ls of this MCM during
ng for this goal copies nal project files.

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

is businessing with form an part of a joint top of our and of	a control leave of plo 12 claims
Name of MS4/Coalition BROOME COUNTY	SPDES ID    N   Y   R   2   0   A   3   3   2
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
MEASURABLE GOAL #4D To have 100% of County staff vand construction types of projects for the County complete the 4 training for contractors. This includes (at a minimum), County Crew chiefs who are responsible for directing construction activ	1-hour erosion and sediment control Highway Superintendents and Field
B. Briefly summarize the observations that indicated the ove	erall effectiveuess of this Measurable
All applicable DPW staff members are now certified (engineering management, and buildings & grounds construction crew). Sever certified or re-certified during this reporting period. A total of 2 certified through this NYSDEC training.	en (7) staff members were either
C. How many times was this observation measured or evalua	ated in this reporting period?
·	(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goa	al during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in	the SWMPP?  ● Yes ○ No
F. Briefly summarize the stormwater activities planned to m the next reporting cycle (including an implementation sch	eet the goals of this MCM during
Continue as developed and implemented make sure that all ne certified, and make sure that all certified staff members are renew	

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

	BROOME COUNTY	SPDES ID  N Y R 2 0 A 3 3 2
Name of MS4/Coalition	BROOME COUNTY	
7. Evaluating Pro	gress Toward Measurable Goals MCM 4	
identified in your St	ort on your progress and project plans toward formwater Management Program Plan (SWM tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the	SWMPP in this reporting period.
	OAL #4E To track and inspect 100% of Color of compliance at least once, irregardless of w	
B. Briefly summar Goal.	rize the observations that indicated the over	erall effectiveness of this Measurable
	onsored projects are/were inspected and trac SWPPP or not. There were a total of 12 pro d.	
C. How many time	es was this observation measured or evalua	ated in this reporting period?  [
D. Has your MS4 i	made progress toward this measurable goa	
E. Is your MS4 on	schedule to meet the deadline set forth in	the SWMPP?  ● Yes ○ No
-	rize the stormwater activities planned to ming cycle (including an implementation sch	•
Continue as develor period.	oed and implemented - improve record keepi	ng and collation during reporting

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

Name of MS4/Coalition	BROOME COUNTY			N Y R 2	0 A 3 3 2
7. Evaluating Pro	gress Toward Measur	able Goals MCM 4			
identified in your St	ort on your progress an tormwater Management itional pages as needed.	t Program Plan (SW)	,		
A. Briefly summan	rize the Measurable G	oal identified in the	e SWMPP i	n this reporti	ng period.
	OAL #4F To log and rosion and/or sediment				
B. Briefly summar Goal.	rize the observations t	hat indicated the ov	verall effect	iveness of thi	s Measurable
There were no calls projects.	complaints that came	into the County this	year relativo	e to work on a	ny DPW
C. How many time	es was this observation	n measured or evalu	ated in thi	s reporting po	eriod?
·				/au . ==	mples/participants/ev
D. Has your MS4 r	made progress toward	this measurable go	oal during (	this reporting	
E. Is your MS4 on	schedule to meet the	deadline set forth ir	the SWM		● Yes ○ No
· ·	ize the stormwater ac ng cycle (including an	•	_		
include complaints	ped and implemented as a check on inspectio ion to MS4 coordinator	n forms from MCM-			

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

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

	SPL	N Y R 2 0 A 3 3							
Name of MS4/Coalition BROOME COUNTY		Υ	F	2	0		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.

165 total 239 reviews were completed by County Planning, and 149 of these were also reviewed by the Engineering Division for potential impacts to County properties and/or infrastructure. 45 projects with potential storm water related impacts were reviewed, and 5 had SWPP's. DPW has developed standard language for our review memos to include comments pertaining to stormwater management and the use of low impact development and green infrastructure.

C.,	How many	times was	this	observation	measured of	or ev	zaluated i	n th	is reporting	neriod?

(ex.: samples/participants/events)

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

● Yes ○ No

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

● Yes ○ 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 2019.

Name of MS4/Coalition

Tioga County

### **MS4 Annual Report Form**

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

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

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control
The information in this section is being reported (check one):
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this report?</li> </ul>
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

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

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

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.

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

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

No. (CA) (Ca. Hist. Tioga County	SPDES ID   N Y R 2 0 A 0 4 7
Name of MS4/Coalition Toga County	
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward ac identified in your Stormwater Management Program Plan (SWMPP) III.C.I. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
B. Briefly summarize the observations that indicated the overal Goal.	l effectiveness of this Measurable
C. How many times was this observation measured or evaluated	<del>}</del>
	(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal d	uring this reporting period?
	○ Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	SWMPP?  • Yes • No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedu	the goals of this MCM during

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

Name of MS4/Coalition	City of Binghamton			SPDES I	D
Minimum	Control Mea	sure 5. Post	-Constructio	on Stormwater	Management
1. How many and	dividual MS4 dition nany MS4s contr what type of pos	ributed to this t	report?stormwater ma		es has yonr
MS4/Coalition i	nventoried, insp			eporting period?	
		# Inventoried	# Inspections	# Times Maintained	
Alternative Practice	ces	8	1 6	8	
O Filter Systems					
O Infiltration Basins					
O Open Channels					
O Ponds					
O Wetlands					
• Other		0	0	0	
2. Do you use an BMPs, inspecti	electronic tool (	•	ıbase, spreadsl	heet) to track pos	t-construction • Yes O No
3. What types of a Development/E	non-structural j Better Site Desig	•		-	lmpact
<ul><li>Building Codes</li></ul>	Municipal Co	omprehensive P	lans		
O Overlay Districts	O Open Space F	Preservation Pro	ogram		
<ul><li>Zoning</li></ul>	• Local Law or	Ordinance			
O None	Land Use Re	gulation/Zoning	5		
O Watershed Plans	O Other Compre	ehensive Plan			
O Other:					

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

		SP.	DES	ID.						
Nar	me of MS4/Coalition City of Binghamton	N	Y	R	2	0	A	3	4	1
4a.	. Are the MS4s contributing to this report involved in a regional/watersl	ied v	vide	e pl	ann	_	g eff Ye			No
4b.	. Does the MS4 have a banking and eredit system for stormwater manag	geme	nt p	orac	etic	es?				
						0	Ye	:S		No
4c.	. Do the SWMP Plans for each MS4 contributing to this report include a and approval of banking and credit of alternative siting of a stormwater.	•				t pr		ice	?	No
4d.	. How many stormwater management practices have been implemented	as p	art	of t	his	sys	tem	ı in	thi	S
	reporting period?	•							1	
5.	What percent of municipal officials/MS4 staff responsible for program training on Low Impace Development (LID), Better Site Design (BSD)	_					itte	nde	ed	
	Infrastructure principles in this reporting period?							4	3	%

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

SPDES ID
Name of MS4/Coalition City of Binghamton N Y R 2 0 A 3 4 1
6. Evaluating Progress Toward Measurable Goals MCM 5
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Train inspection/enforcement personnel on post construction runoff regulations and inspection procedures. Perform inspections to ensure conformance with specifications. Continue to keep inventory of post construction stormwater practices.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
SWPPP inventory is used to track post construction stormwater practices. A post construction stormwater map has been created and will be updated as needed.
C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Train inspection personnel. Perform inspections when appropriate. Continue to track construction projects and post construction stormwater practices. Continue to develop and implement procedures for inspections, maintenance, and tracking of activities related to post-construction controls.

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

F		,		SPD	ES ID
Name of MS4/Coalition	Town of Bingha	amton		N	Y R 2 0 A 0 0 9
Minimum (	Control N	<u> 1easure 5. Pos</u>	t-Construc	tion Stormwa	ter Management
The information in this	s section is	being reported (ch	eck one):		
<ul><li>On behalf of an indi</li><li>O On behalf of a coali</li><li>How ma</li></ul>	tion	contributed to this	s report?		
1. How many and w MS4/Coalition in	• •	•			
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	:S	0			
O Filter Systems		0	0	0	
O Infiltration Basins		0	0	0	
O Open Channels		0	0	0	
O Ponds		0	0	0	
O Wetlands		0	0	0	
O Other		0	0	0	
2. Do you use an el BMPs, inspectio		` •	tabase, spreac	dsheet) to track	post-construction O Yes ● No
3. What types of n Development/Be		-		•	ow Impact
Building Codes	Municipa	al Comprehensive	Plans		
O Overlay Districts	O Open Spa	ace Preservation P	rogram		
Zoning	Local La	w or Ordinance			
O None	Land Use	e Regulation/Zonir	ıg		
O Watershed Plans	O Other Co	omprehensive Plan			
Other:  Planni	n g i	Board	R e c o	m m e n d	a t i o n

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

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Nan	ne of MS4/Coalition Town of Binghamton	N	Υ	R	2	0	Α	0	0	9
4a.	Are the MS4s contributing to this report involved in a regional/watershe	ed v	vide	e pl	ann	_	•			
							Ye	S	O	No
4b.	Does the MS4 have a banking and credit system for stormwater manage	me	nt p	rac	etic		Ye		<b>~</b>	No
									_	NU
4c.	Do the SWMP Plans for each MS4 contributing to this report include a and approval of banking and credit of alternative siting of a stormwater									
						_	Ye			No
4d.	How many stormwater management practices have been implemented a	s pa	art	of t	his	sys	tem	in	thi	is
	reporting period?								0	
5.	What percent of municipal officials/MS4 staff responsible for program i	-					itte	nde	ed	
	training on Low Impace Development (LID), Better Site Design (BSD) a	nd (	oth	er (	Gre	en [	<del></del>			
	Infrastructure principles in this reporting period?							2	5	%

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

Name of MS4/Coalition Town of Binghamton SPDES ID  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?
(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period?  ● Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue to improve review and inspection procedures.

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

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Name of MS4/Coalition	Town of C	Chenengo											N	Y	R	2	0	Α	1	2	7
<u>Minimum (</u>	Contro	ol Mea	sur	<u>e 5.</u>	Post	t <u>-C</u>	<u>ons</u>	truc	etio	<u>n S</u>	<u>tor</u>	m	\ <b>W</b> 2	ate	er I	<u>Ma</u>	<u>na</u>	gei	<u>me</u>	<u>nt</u>	
The information in th	is section	n is beir	ng rep	orte	d (che	eck o	one):														
<ul><li>On behalf of an inc</li><li>On behalf of a coa</li><li>How m</li></ul>			ribut	ed to	this	rep	ort?														
1. How many and w MS4/Coalition in	what typ nventori	e of po ed, insp	st-co ecte	nstru d and	iction I mai	sto ntai	rmw ined	ater in th	mai is re	1age por	em e ting	nt g P	pra erio	acti od?	ices	ha	s yo	ur			
			Inv	# entor	ied	I	# nspec		S		# Ti [aint										
O Alternative Practic	es																				
O Filter Systems																					
O Infiltration Basins																					
Open Channels																					
<ul><li>Ponds</li></ul>					2			2					1								
O Wetlands																					
O Other										L											
2. Do you use an o BMPs, inspecti					5, dat	aba	ıse, s	prea	adsh	eet	) <b>t</b> o	tr	acl	k p	ost	<b>~c</b> 0		ruc Ye			No
3. What types of a Development/B													ıt I	_O\	v I	mp	act				
<ul><li>Building Codes</li></ul>	• Mun	icipal C	ompi	ehen	sive l	Plan	S														
O Overlay Districts	O Oper	n Space	Prese	ervati	ion Pi	ogra	am														
O Zoning	O Loca	ıl Law c	r Or	dinan	ce																
O None	O Land	l Use R	egula	tion/	Zonin	g															
O Watershed Plans	O Othe	r Comp	reher	sive	Plan																
O Other:										Т											

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

		S	PD	ES	ID						
Nan	ne of MS4/Coalition Town of Chenengo	1	V	Y	R	2	0	А	1	2	7
4a.	Are the MS4s contributing to this report involved in a regional/waters	shed	l w	ide	e pl	ann	_	eff Ye			No
4b.	Does the MS4 have a banking and credit system for stormwater mana	gen	ıen	ıt p	rac	etie	es?				
							0	Ye	es	•	No
4c.	Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormwat						t pr		ice		No
4d.	How many stormwater management practices have been implemented	l as	ра	rt	of t	his	sys	ten	ı in	thi	S
	reporting period?									0	
5.	What percent of municipal officials/MS4 staff responsible for program training on Low Impace Development (LID), Better Site Design (BSD)		-					itte	nd	ed	
	Infrastructure principles in this reporting period?	,			`		[			0	%

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

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

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Name of MS4/Coalition Town of Chenengo N Y F	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 measu identified in your Stormwater Management Program Plan (SWMPP), including red III.C.1. Submit additional pages as needed.	rable goals quirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this 1	reporting period.
Staff continiued to train and improve inspection and maintenance skills.	
B. Briefly summarize the observations that indicated the overall effectiveness Goal.	s of this Measurable
Limited or no problems annually.	
C. How many times was this observation measured or evaluated in this report	rting period?
D. Has your MS4 made progress toward this measurable goal during this rep	(ex.: samples/participants/events) porting period?
2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2	Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	• Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).	
Continue to train employees. Develop GIS and/or spreadsheet to track maintenant	ce, practices, etc.

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

Name of MS4/Coalition Town	n of Conklin		SPDES ID N Y R	2 0 A 2 5 5
Minimum Cor	trol Measure 5. Post	-Construction	on Stormwater M	<u> Ianagement</u>
<ul> <li>On behalf of an individe</li> <li>On behalf of a coalition</li> <li>How many</li> </ul> 1. How many and what		report? stormwater ma		has your
14154/Coantion inven	# Inventoried	# Inspections	# Times  Maintained	
BMPs, inspections 3. What types of non-	ronic tool (e.g. GIS, data	abase, spreads	heet) to track post-	• Yes O No
O Building Codes • N	Municipal Comprehensive F	Plans		
O Overlay Districts O O	Open Space Preservation Pro	ogram		
O Zoning • I	ocal Law or Ordinance			
O None O I	and Use Regulation/Zoning	g		
O Watershed Plans O C	Other Comprehensive Plan			
Other:  Plannin	g Board	Recom	m e n d a t	ion

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

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Nan	ne of MS4/Coalition Town of Conklin		N	Y	R	2	0 1	A 2	5	5
4a.	Are the MS4s contributing to this report involved in a regional/	watershe	d w	ide	pla	nn		effor Yes		No
4b.	Does the MS4 have a banking aud credit system for stormwater	· manage	mei	nt p	rac	tice		Yes	•	No
4c.	Do the SWMP Plans for each MS4 contributing to this report in and approval of banking and credit of alternative siting of a sto	-					pra		?	No
4d.	How many stormwater management practices have been implereporting period?	mented a	s pa	rt (	of t	his	syst	em ii	o thi	is
5.	What percent of municipal officials/MS4 staff responsible for p training on Low Impace Development (LID), Better Site Design Infrastructure principles in this reporting period?	_	_					teud 2	led 5	%

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

Name of MS4/Coalition Town of Conklin SPDES ID  N Y R 2 0 A 2 5 5
6. Evaluating Progress Toward Measurable Goals MCM 5
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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 in/along the downstream receiving waters.
C. How many times was this observation measured or evaluated in this reporting period?
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue to 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.

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

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

	TOWN OF PROVING	(N)		SPDES ID  N Y R 2 0 A 1 4 3
Name of MS4/Coalition	TOWN OF DICKINS	ON		N Y R 2 0 A 1 4 3
<u>Minimum</u>	Control Mea	sure 5. Post-	Constructio	n Stormwater Management
The information in th	is section is being	g reported (chec	k one):	
On behalf of an inc				
O On behalf of a coa How m	ntion any MS4s contr	ibuted to this r	eport?	
1. How many and was MS4/Coalition in				nagement practices has your eporting period?
		#	#	# Times
		Inventoried	Inspections	Maintained
O Alternative Practic	es			
O Filter Systems				
O Infiltration Basins				
O Open Channels				
O Ponds				
O Wetlands				
O Other				
BMPs, inspecti	ons and mainta	anance?		neet) to track post-construction  Yes O No
3. What types of a Development/B		-		implement Low Impact aciples?
O Building Codes	Municipal Co	omprehensive Pl	ans	
O Overlay Districts	O Open Space I	Preservation Pro	gram	
O Zoning	O Local Law or	· Ordinance		
O None	O Land Use Re	gulation/Zoning		
O Watershed Plans	O Other Compr	ehensive Plan		
• Other:				

Recommen

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Boar

a n n i n g

d a

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

	SPDES ID						
Nar	ne of MS4/Coalition TOWN OF DICKINSON NYR	2	0	А	1	4	3
4a.	. Are the MS4s contributing to this report involved in a regional/watershed wide pla	nni		effo Yes			No
4b	. Does the MS4 have a banking and credit system for stormwater management pract	tice		Yes	5	•	No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a protocol fo and approval of banking and credit of alternative siting of a stormwater management		pr		ce?	•	No
4d.	. How many stormwater management practices have been implemented as part of the reporting period?	iis s	syst	em	in	thi 0	S
5.	What percent of municipal officials/MS4 staff responsible for program implementation training on Low Impace Development (LID), Better Site Design (BSD) and other G Infrastructure principles in this reporting period?			Т	nde 2	_	%

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

Name of MS4/Coalition TOWN OF DICKINSON  SPDES ID  N Y R 2 0 A 1 4 3
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.
NO ACTIVITY
C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/ever
D. Has your MS4 made progress toward this measurable goal during this reporting period?  ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
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.

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

			SPDES ID	
Name of MS4/Coalition Town of Fenton			N Y R	
Minimum Control Me	asure 5. Post	-Construction	on Stormwater I	<u>Management</u>
The information in this section is be	ing reported (che	ck one):		
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s con</li> </ul>	tributed to this	report?		
1. How many and what type of po MS4/Coalition inventoried, ins				has your
	# Inventoried	# Inspections	# Times Maintained	
O Alternative Practices				
Filter Systems	1	1		
O Infiltration Basins				
O Open Channels				
<ul><li>Ponds</li></ul>		1	1	
O Wetlands				
O Other				
2. Do you use an electronic tool BMPs, inspections and main	, –	abase, spreads	heet) to track post	-construction O Yes • No
3. What types of non-structura Development/Better Site Des	-		_	npact
O Building Codes • Municipal •	Comprehensive P	lans		
O Overlay Districts • Open Space	e Preservation Pre	ogram		
● Zoning • Local Law	or Ordinance			
O None Delta Land Use F	Regulation/Zoning	œ.		
O Watershed Plans • Other Comp	prehensive Plan			
● Other: A q u i f e r D e	v e l o p	m e n t	P e r m i t	t i n g

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

	SPI	JES IL	)				
Name of MS4/Coalition Town of Fenton	N	ΥR	2	0	A (	) -	7 8
4a. Are the MS4s contributing to this report involved in a regional/v	vatershed v	vide p	lann		effo Yes		• No
4b. Does the MS4 have a banking and credit system for stormwater	manageme	nt pra	ctic		Yes	(	<b>9</b> No
4c. Do the SWMP Plans for each MS4 contributing to this report inc and approval of banking and credit of alternative siting of a stor				t pr		e?	<b>9</b> No
4d. How many stormwater management practices have been implement reporting period?	nented as p	art of	this	sys	tem	in t	7
5. What percent of municipal officials/MS4 staff responsible for pr training on Low Impace Development (LID), Better Site Design of Infrastructure principles in this reporting period?					tten	ded	٦

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

Name of MS4/Coalition Town of Fenton N Y R 2 0 A 0 7 8
6. Evaluating Progress Toward Measurable Goals MCM 5
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Beer Tree Brewery Expansion NOI requires updating original to accommodate changes.
Binghamton Precast Mold Storage Building requires an update to the original NOI based on additional site development
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Continued monitoring of activity at each site as part approval of New Site Plam Approvals and ammending the existing and current NOIs.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/ever
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Inspect and approve or correct any Post Construction activity on completed projects.  2 projects are currently in the Construction Phase.

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

			SPDES ID	
Name of MS4/Coalition Town of Kirkwood			N Y R	2 0 A 0 7 2
Minimum Control Mea	asure 5. Post	-Constructio	on Stormwater M	<u>lanagement</u>
The information in this section is being	ng reported (che	ck one):		
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s cont</li> </ul>	tributed to this	report?		
1. How many and what type of po MS4/Coalition inventoried, insp				has your
	# Inventoried	# Inspections	# Times Maintained	
O Alternative Practices				
O Filter Systems				
O Infiltration Basins				
O Open Channels				
• Ponds	3	3	3	
O Wetlands				
O Other				
2. Do you use an electronic tool BMPs, inspections and maint	, -	abase, spreads	heet) to track post-	construction  ● Yes O No
3. What types of non-structural Development/Better Site Desi	•		=	ipact
● Building Codes ● Municipal C	Comprehensive P	lans		
O Overlay Districts O Open Space	Preservation Pro	ogram		
● Zoning • Local Law o	or Ordinance			
O None Delta Land Use R	egulation/Zoning	g P		
O Watershed Plans O Other Comp	rehensive Plan			
Other:  Planning B	o a r d	R e c o m	m e n d a t	ion

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

			SPL	ES	ID						
Nair	ne of MS4/Coalition Town of Kirkwood		N	Y	R	2	0 .	A	0	7	2
4a.	Are the MS4s contributing to this report involved in a regional	watershe	ed w	/ide	pla	ann		cffo Yes		01	No
4b.	Does the MS4 have a banking and credit system for stormwater	r manage	m ei	nt p	rac	tice				<i>-</i>	
4 -	De the CYNAAD Diese feer each MCA contaileating to this percent is	ualuda a v		to o o	J C			Yes		<b>9</b> 1	No
	Do the SWMP Plans for each MS4 contributing to this report in and approval of banking and credit of alternative siting of a sto						t pra		ce?	<b>9</b> 1	No
	How many stormwater management practices have been imple	mented a	s pa	rt (	of t	his	syst	em	in t	his	;
	reporting period?								(		
	What percent of municipal officials/MS4 staff responsible for p		_					tten	dec	ì	
	training on Low Impace Development (LID), Better Site Design Infrastructure principles in this reporting period?	(BSD) a	nd (	oth€	er (	re	en [	2	2 5	5	%

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

Name of MS4/Coalition Town of Kirkwood
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 in/around receiving waters.
C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schednle to meet the deadline set forth in the SWMPP?  • Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue to 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.

This report is being submitted for the reporting period ending March 9, 2019

	Maria			SPDES	ID
Name of MS4/Coalition	Town of Owego			NYR2	)A079
<u>Minimum</u>	Control Mea	sure 5. Post	t-Constructio	on Stormwater	r Management
The information in the	nis section is bein	ig reported (che	eck one):		
On behalf of an in On behalf of a coa		ributed to this	report?		
1. How many and MS4/Coalition i				anagement praction eporting period?	es has your
		# Inventoried	# Inspections	# Times Maintained	
Alternative Practice	ces	4	2	0	
O Filter Systems					
• Infiltration Basins		2	1	0	
Open Channels					
• Ponds	3	4	4	0	
○ Wetlands					
○ Other					
2. Do you use an BMPs, inspecti	electronic tool (		abase, spreads	heet) to track po	st-construction ○ Yes • No
3. What types of Development/E	non-structural Better Site Desig	-		-	Impact
O Building Codes	O Municipal Co	omprehensive F	lans		
Overlay Districts	Open Space	Preservation Preservation	ogram		
○ Zoning	O Local Law or	r Ordinance			
None	O Land Use Re	egulation/Zonin	g		
O Watershed Plans	Other Compr	ehensive Plan			
Other:					

This report is being submitted for the reporting period ending March 9, 2019

Nar	me of MS4/Coalition Town of Owego NYR2 0A 07			]
4a.	. Are the MS4s contributing to this report involved in a regional/watershed wide planni	_		
		O Yes	• No	0
4b.	. Does the MS4 have a banking and credit system for stormwater management practice	s?		
		O Yes	• No	o
4c.	. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evand approval of banking and credit of alternative siting of a stormwater management			o
		O 1 03		
40.	. How many stormwater management practices have been implemented as part of this s reporting period?		this	

This report is being submitted for the reporting period ending March 9, 2019

Name of MS4/Coalition	Town of Owego	SPDES ID NYR20A079
6. Evaluating Pro	gress Toward Measurable Goals MCM 5	
identified in your S	oort on your progress and project plans towar tormwater Management Program Plan (SWN itional pages as needed.	
A. Briefly summa	rize the Measurable Goal identified in the	SWMPP in this reporting period.
Develop a mechani	ism to track post-construction BMPs and Op	eration & Maintenance (O & M)
B. Briefly summa Goal.	rize the observations that indicated the ov	verall effectiveness of this Measurable
	s an inventory of SWPPPs within the MS4 as filed as a deed covenant, to ensure proper C	
C. How many time	es was this observation measured or evalu	nated in this reporting period?
D. Has vour MS4	made progress toward this measurable go	ex.: samples/participants/events;  al during this reporting period?
,		Yes O No
E. Is your MS4 on	schedule to meet the deadline set forth in	the SWMPP?  ● Yes ○ No
· ·	rize the stormwater activities planned to n ing cycle (including an implementation scl	neet the goals of this MCM during
The Town of Oweg new GP-0-17-002.	go Stormwater ordinance will be updated to r	reflect changes due to adoption of

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

Name of MS4/Coalition	Town of Union			SPDES ID N Y R	
<u>Minimum</u>	Control Mea	sure 5. Post	-Constructio	on Stormwater I	<u> Management</u>
	dividual MS4 lition nany MS4s contr	ibuted to this I	report?		
1. How many and MS4/Coalition i	*			nagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	es				
O Filter Systems					
O Infiltration Basins					
O Open Channels					
Ponds		1 0	1 0		
O Wetlands					
O Other					
2. Do you use an o BMPs, inspecti			base, spreads	heet) to track post	-construction • Yes O No
3. What types of a Development/B				-	npact
<ul><li>Building Codes</li></ul>	Municipal Co	omprehensive P	lans		
O Overlay Districts	O Open Space I	Preservation Pro	gram		
O Zoning	O Local Law or	Ordinance			
O None	Land Use Re	gulation/Zoning	,		
O Watershed Plans	O Other Compr	ehensive Plan			
O Other:					

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

		i.	SF L	)ES	JD						
Nan	ne of MS4/Coalition Town of Union		N	Y	R	2	0	Α	0	5	0
<b>4</b> a.	Are the MS4s contributing to this report involved in a regional/	watershe	d w	⁄ide	pla	ann		effe Yes		?	No
4b.	Does the MS4 have a banking and credit system for stormwater	ınanager	nei	ıt p	rac	etic		Yes	S	•	No
4c.	Do the SWMP Plans for each MS4 contributing to this report in and approval of banking and credit of alternative siting of a sto						t pr		ice?	•	No
4d.	How many stormwater management practices have been impler reporting period?	mented as	s pa	rt (	of t	his	sys:	tem	in	thi	S
5.	What percent of municipal officials/MS4 staff responsible for p training on Low Impace Development (LID), Better Site Design Infrastructure principles in this reporting period?							ittei	nde	e <b>d</b>	%

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

Name of MS4/Coalition Town of Union	N Y R 2 0 A 0 5 0
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	_
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Code enforcement software is used to track SWPPP inspections. maintaining one system.	The Town is only responsible for
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Yearly inspections made to make sure systems are performing pr	operly.
C. How many times was this observation measured or evaluation	ted in this reporting period?  1 2  (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal	• • •
E. Is your MS4 on schedule to meet the deadline set forth in t	● Yes O No he SWMPP?
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
Train additional staff to inspect systems.	

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

	5 1			
Name of MS4/Coalition Town of Vestal			SPDES ID N Y R	2 0 A 0 6 4
Minimum Control Me	asure 5. Post	-Constructio	on Stormwater I	Management
The information in this section is bei  On behalf of an individual MS4 On behalf of a coalition		· 	$\neg$	
How many MS4s con  1. How many and what type of po MS4/Coalition inventoried, ins	st-construction	stormwater ma		has your
	# Inventoried	# Inspections	# Times Maintained	
O Alternative Practices	0	0	0	
Filter Systems	1 8	1 6	1 6	
● Infiltration Basins	2	2	2	
Open Channels	2	2	2	
<ul><li>Ponds</li></ul>	1 8	1 4	1 4	
O Wetlands	0	0	0	
O Other	0	0	0	
2. Do you use an electronic tool BMPs, inspections and main	tanance?			● Yes O No
3. What types of non-structura Development/Better Site Des				npact
Building Codes    O Municipal Codes	Comprehensive P	Plans		
Overlay Districts O Open Space	Preservation Pr	ogram		
● Zoning • Local Law	or Ordinance			
O None O Land Use F	Regulation/Zonin	g		
O Watershed Plans O Other Comp	orehensive Plan			
● Other: S i t e P l a n	R e v i e	w s		

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

	SPDES ID	l					
Nar	me of MS4/Coalition Town of Vestal N Y R	2 (	0 2	A (	) (	5	4
4a.	. Are the MS4s contributing to this report involved in a regional/watershed wide p			effo Yes		1 C	Vo.
4b.	. Does the MS4 have a banking and credit system for stormwater management pra	ctices	?				
			0	Yes		<b>)</b> [	10
4	. Do the SWMP Plans for each MS4 contributing to this report include a protocol t	or ov	. lu	4			
4C.	<u> </u>						
4c.	and approval of banking and credit of alternative siting of a stormwater manager	nent	pra		e?	<b>1</b>	10
	and approval of banking and credit of alternative siting of a stormwater manager . How many stormwater management practices have been implemented as part of	nent <sub>l</sub>	pra O	rctic Yes	e?		
	and approval of banking and credit of alternative siting of a stormwater manager	nent <sub>l</sub>	pra O	rctic Yes	e?		
	and approval of banking and credit of alternative siting of a stormwater manager in the stormwater management practices have been implemented as part of reporting period?  What percent of municipal officials/MS4 staff responsible for program implemented.	ment   this sy tation	pra O yst L n at	Yes em	in t	his	
4d.	and approval of banking and credit of alternative siting of a stormwater manager.  How many stormwater management practices have been implemented as part of reporting period?	ment   this sy tation	pra O yst L n at	Yes em	in ti	his	

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

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

		SPL	ΕŞ	ID						
Name of MS4/Coalition	Town of Westel	N	Y	R	2	0	А	0	6	4

#### 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 any issues are identified that need addressing. The owner is responsible for maintenance of their stormwater 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 no incidents that were reported for corrective actions to owners. If a corrective actions was completed, an inspection is performed and letter to the owner stating that the action is closed or needs additional work is also included in our MS4 records.

C. He	w many times was this observation measured or evaluated in this reporti	ng period?
		2
	(e	x.: samples/participants/events)

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

Yes O No

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

Yes O No

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

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.

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

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

SPDES ID

Name of MS4/Coalition	. Village of	Endicott		N Y	R 2 0 A 14 9
<u>Minimum</u>	Control Meas	sure 5. Post	-Construction	on Stormwate	r Management
The information in the On behalf of an in On behalf of a coal How n	dividual MS4	•			
1. How many and MS4/Coalition i				anagement practi eporting period?	
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces		0		
O Filter Systems			0		
O Infiltration Basins			0		
Open Channels			0		
○ Ponds			0		
O Wetlands			0		
Other			0		
2. Do you use an BMPs, inspect	electronic tool ( ions and mainta		abase, spreads	heet) to track p	ost-construction ○ Yes ● No
3. What types of Development/I	non-structural Better Site Desig	•		-	v Impact
Building Codes	O Municipal Co	omprehensi <b>v</b> e P	lans		
Overlay Districts	Open Space I	Preservation Pre	ogram		
Zoning	Local Law or	Ordinance			
○ None	• Land Use Re	gulation/Zoning	g		
O Watershed Plans	Other Compr	ehensive Plan			
Other:					

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

	SPDES ID		.	<del></del>	T
Nat	me of MS4/Coalition Village of Endicott NYR2	)   <sub> </sub>	4 1	4	9
4a	. Are the MS4s contributing to this report involved in a regional/watershed wide planni	ng	effo	rt?	
		•	Yes	0	No
4b	. Does the MS4 have a banking and credit system for stormwater management practice	s?			
		0	Yes	0	No
4c.	. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evand approval of banking and credit of alternative siting of a stormwater management				
		0	Yes	0	No
4d	. How many stormwater management practices have been implemented as part of this sreporting period?	yst	em	in th	is

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

Name of MS4/Coalition Village of Endicott NY	R 2 0 A 1 4 9
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achieving meas identified in your Stormwater Management Program Plan (SWMPP), including re III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
Post Construction Stormwater Management will be addressed is complete.	when the project
B. Briefly summarize the observations that indicated the overall effectivenes Goal.	ss of this Measurable
See comment above.	
C. How many times was this observation measured or evaluated in this repo	
D. Has your MS4 made progress toward this measurable goal during this re	<pre>(ex.: samples/participants/events)</pre>
D. 11as your 14154 made progress toward this measurable goar during the	○ Yes • No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	◆ Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).	this MCM during
Goals will be evaluated once the project is complete.	

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

				SPDES ID	)
Name of MS4/Coalition	Village of Johnson Cit	у		N Y R	
<u>Minimum (</u>	Control Meas	sure 5. Post	- <u>Constructio</u>	on Stormwater I	<u>Management</u>
The information in th	is section is being	g reported (chec	ck one):		
<ul><li>On behalf of an ind</li><li>On behalf of a coal</li><li>How m</li></ul>		ibuted to this	report?		
1. How many and w MS4/Coalition in					s has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	es	0	0	0	
Filter Systems		1	1	0	
O Infiltration Basins		2	2	0	
O Open Channels		0	0	0	
O Ponds		5	5	0	
O Wetlands		0	0	0	
Other		0	0	0	
2. Do you use an o BMPs, inspecti			abase, spreads	heet) to track pos	t-construction • Yes O No
3. What types of a Development/B		-			mpact
Building Codes	Municipal C	omprehensive P	lans		
Overlay Districts	O Open Space	Preservation Pr	ogram		
Zoning	Local Law of	r Ordinance			
○ None	O Land Use Re	egulation/Zoning	g		
O Watershed Plans	Other Compi	rehensive Plan			
Other:					

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

			SPL	ES.	נו					
Nan	ne of MS4/Coalition Village of Johnson City		N	Y	R 2	2	0 A	1	0	1
4a.	Are the MS4s contributing to this report involved in a regional	/watershe	ed w	ide	plar	ıni				
							Y	es	01	40
4b.	Does the MS4 have a banking and credit system for stormwater	r manage	mei	at p	acti	ice	s?			
				-			OY	es	• ì	Vо
4c.	Do the SWMP Plans for each MS4 contributing to this report i		_							
	and approval of banking and eredit of alternative siting of a sto	)(mwatei	1112	mag	CIII	:11 t	ΟY			No
4d.	How many stormwater management practices have been imple	mented a	s pa	art c	f th	is s	systei	n in	this	3
	reporting period?								1.	
5.	What percent of municipal officials/MS4 staff responsible for p							end	ed	
	training on Low Impace Development (LID), Better Site Design	ı (BSD) a	nd	othe	r G	ree	n			
	Infrastructure principles in this reporting period?						1	0	0	%

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

Name of MS4/Coalition Village of Johnson City SPDES ID  N Y R 2 0 A 1 0 1
6. Evaluating Progress Toward Measurable Goals MCM 5
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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?
(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes • No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes • 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.

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

Name of MS4/Coalition	VILLAGE OF PORT	NY	R 2 0 A 0	8 0		
Minimum	Control Mag	enra 5 Poet	-Constructio	on Stormwat	er Manageme	an f
<u> </u>	Control Mea	sure 3. 1 ost	-construction	JII Stol III wat	er manageme	<u>/11 t</u>
The information in the	nis section is bein	ng reported (che	ck one):			
On behalf of an inc O On behalf of a coa How m		ributed to this	report?			
1. How many and MS4/Coalition i						
		# Inventoried	# Inspections	# Times Maintained		
O Alternative Practic	es					
O Filter Systems						
O Infiltration Basins						
O Open Channels						
O Ponds						
O Wetlands						
O Other						
2. Do you use an BMPs, inspecti			abase, spreads	heet) to track	post-constructio Yes	on O No
3. What types of a Development/E		-		-	w Impact	
O Building Codes	Municipal C	omprehensive P	lans			
O Overlay Districts	O Open Space	Preservation Pre	ogram			
O Zoning	O Local Law or	r Ordinance				
O None	O Land Use Re	egulation/Zoning	2			
O Watershed Plans	O Other Compa	rehensive Plan				
● Other:  N O A C :	r I V I T	Y T H I	S P E R	IOD		

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

		<u>21</u>	$DE_{i}$	<u> 5 IIV</u>					
Nar	ne of MS4/Coalition VILLAGE OF PORT DICKINSON	N	Y	R	2	0 7	0	8	0
4a.	. Are the MS4s contributing to this report involved in a regional/w	vatershed	wid	e pl	anu	_	ffor Yes		No
4b.	. Does the MS4 have a banking and credit system for stormwater	managem	ent	pra	ctic	es?	Ves	•	No
4c.	Do the SWMP Plans for each MS4 contributing to this report inc and approval of banking and credit of alternative siting of a stor	_				valu: t pra	ation	ւ ?	
4d.	. How many stormwater management practices have been implem reporting period?	nented as p	art	of (	this	syste	m in	thi	S
5.	What percent of municipal officials/MS4 staff responsible for protraining on Low Impace Development (LID), Better Site Design (Infrastructure principles in this reporting period?						teud 2	<b>ed</b> 5	%

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

SPDES ID
Name of MS4/Coalition VILLAGE OF PORT DICKINSON N Y R 2 0 A 0 8 0
6. Evaluating Progress Toward Measurable Goals MCM 5
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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.
NO ACTIVITY
C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes • O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes • O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
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.

HAZARD

# **MS4 Annual Report Form**

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

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

n saomu	тотти из р				
Name of MS4/Coalition	BROOME COUNT	Y		SPDES ID  N Y R	
<u>Minimum</u>	Control Mea	asure 5. Post	-Constructio	on Stormwater I	Management
1. How many and	dividual MS4 lition nany MS4s con what type of po	tributed to this	report?	1 nnagement practices eporting period?	s has your
	, ,	# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces				
O Filter Systems			11.00		
O Infiltration Basins					
Open Channels		3	3	1	
Ponds			1		
O Wetlands					
• Other		2	2	1	
2. Do you use an BMPs, inspecti	ions and main	tanance?			● Yes ○ No
3. What types of Development/E					mpact
O Building Codes	Municipal (	Comprehensive P	lans		
Overlay Districts	Open Space	Preservation Pr	ogram		
○ Zoning	O Local Law	or Ordinance			
○ None	O Land Use R	Regulation/Zoning	g		
<ul><li>Watershed Plans</li></ul>	Other Comp	orehensive Plan			
• Other					

PLAN

TION

MITIGA

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

								SPI	DES	ID						
Nan	ne of MS4/Coalition	BROOME COUN	TY					N	Y	R	2	0	Α	3	3	2
4a.	Are the MS4s co	ntribnting to	this report	t involve	ed in a r	egional	/watersl	ıed v	vide	e pla	ann	ing	effo	rt?	,	
												•	Yes	8	O 1	No
4b.	Does the MS4 ha	ve a banking	and credit	t system	for stor	ınwate	r manag	eme	nt p	rac	tice	es?				
				•									Yes	3	<b>9</b> ]	No
4c.	Do the SWMP Pland approval of											t pr		ce?	<b>9</b> ]	Νo
4d.	How many storm		gement pra	actices h	ıave bee	n imple	emented	as p	art	of t	his					
	reporting period	•													0	
5.	What percent of training on Low												tter	ıde	d	
	Infrastructure p					. 2001B	. (200)		_ •••	-• `					0	%

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

	100	S	SPDES ID	
Name of MS4/Coalition	1 BROOME COUNTY		N Y R 2 0 A 3	3 2
6. Evaluating Pro	ogress Toward Measurable Goals I	MCM 5		
_	·-		1 1 5	
identified in your St	oort on your progress and project pla tormwater Management Program Pla itional pages as needed.			Part
A. Briefly summan	rize the Measnrable Goal identifie	ed in the SWMPP in	this reporting per	iod.
	SOAL #5A To develop and mainta Stormwater Management Practices i ments / staff.			
B. Briefly summar Goal.	rize the observations that indicate	d the overall effecti	veness of this Meas	urable
	peen met with existing measures, and 098 no new post-construction measu			
C. How many time	es was this observation measured	or evaluated in this	reporting period?	
				6
D. Has your MS4	made progress toward this measu	rable goal during t		rticipants/events)   <b>?</b>
D. Has your most	made progress to mita this measu	i ubio gour uur ing o	• Yes	○ No
E. Is your MS4 on	schedule to meet the deadline set	forth in the SWMI	PP? ● Yes	○ No
	rize the stormwater activities plan ing cycle (including an implement			
inventory that may	porting period activities to meet this be constructed during each reportin 019-2020 reporting period.			o the

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

Name of MS4/Coalition BROOME COUNTY	SPDES ID  N Y R 2 0 A 3 3 2
6. Evaluating Progress Toward Measurable Goals M	ICM 5
Use this page to report on your progress and project plan identified in your Stormwater Management Program Pla III.C.1. Submit additional pages as needed.	s toward achieving measurable goals n (SWMPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified	l in the SWMPP in this reporting period.
MEASURABLE GOAL #5B To INSEPCT 100% of Management Practices annually.	the County's Post-Construction Stormwater
B. Briefly summarize the observations that indicated	the overall effectiveness of this Measurable
100% of the County's Post-Construction Stormwater I this reporting period.	Management Practices were inspected during
C. How many times was this observation measured o	or evaluated in this reporting period?
	6
D. Has your MS4 made progress toward this measur	ex.: samples/participants/event rable goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set	forth in the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities plant the next reporting cycle (including an implementa	ned to meet the goals of this MCM during
Continue inspections as established and for any new me county staff use, and move inspection responsibilities to	
	and Artifaction and Artifactio

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

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

SPDES ID

rents)

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

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

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

#### 6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

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

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

Staff training was started in 2016 (2 people trained), but goal has not been 100% achieved, and was not progressed as planned during the past reporting period. We want to train additional staff in these areas to make sure that there is coverage beyond just managers. As noted in last year's planned goals, we have formalized the process described in goals 5A, 5B, and 5C.

C	How many	times	was this	observation	measured	or	evaluated	in this	reporting	period?
<b>U.</b>	HOW IIIAIIY	umes	was illis	obsel vation	Illeasur cu	UΙ	Crainateu	TH CHIS	reporting	periou.

(ex.: samples/participants/events)

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

● Yes ○ No

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

● Yes ○ No

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

Although existing staff is providing these functions currently, this goal is to make sure that all staff functioning in these roles (and their support staff) are trained to follow the same (and correct) procedures. It is a priority in 2019-2020 to get this goal completed and functioning in accordance with adopted good-housekeeping documents. Monitoring and inspection will be handled by DPW - Engineering staff.

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

Name of MS4/Coalitio	Tioga County	NY	R 2 0 A 0 4 7		
<u>Minimum</u>	Control Mea	asure 5. Post	-Constructio	on Stormwater	Management
The information in the	his section is bei	ng reported (che	ck one);		
<ul><li>On behalf of an in</li><li>On behalf of a coa</li><li>How n</li></ul>		ributed to this	report?	-	
1. How many and MS4/Coalition i				nagement practic eporting period?	es has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces				
O Filter Systems					
O Infiltration Basins					
Open Channels					
O Ponds					
○ Wetlands					
Other			Samurana wan braman ka en di angkida da da		
2. Do you use an BMPs, inspect			abase, spreads	heet) to track po	st-construction O Yes O No
3. What types of Development/I					Impact
O Building Codes	O Municipal C	omprehensive F	lans		
Overlay Districts	Open Space	Preservation Pr	ogram		
○ Zoning	O Local Law o	r Ordinance			
O None	O Land Use R	egulation/Zonin	g		
<ul><li>Watershed Plans</li></ul>	Other Comp	rehensive Plan			
Other:					

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

Nai	me of MS4/Coalition Broome-Tioga Stormwater Coalition SPDES ID  N Y R 2	0].	A C	4	7
4a	. Are the MS4s contributing to this report involved in a regional/watershed wide planni				
		•	Yes	С	No
4b	. Does the MS4 have a banking and credit system for stormwater management practice				
		О	Yes	•	No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a protocol for evand approval of banking and credit of alternative siting of a stormwater management	pra		e?	• No
4d	. How many stormwater management practices have been implemented as part of this reporting period?			_	- 1-
5.	What percent of municipal officials/MS4 staff responsible for program implementatio training on Low Impace Development (LID), Better Site Design (BSD) and other Gree Infrastructure principles in this reporting period?		tten	ded	] %

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Ν Y R 2 0 A 0 4 Tioga County Name of MS4/Coalition 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? O Yes O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

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

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

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

#### Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

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

		pertorn	iea within	i the past 3
Operation/Activity/Facility	Addressed in	n SWMP?	years?	) -
Street Maintenance	• Yes	O No	. • Yes	O No
Bridge Maintenance	O Yes	• No	. O Yes	No
Winter Road Maintenance		O No	. • Yes	O No
Salt Storage	• Yes	O No	. • Yes	O No
Solid Waste Management		• No	. O Yes	No
New Municipal Construction and Land Disturba		O No	. • Yes	O No
Right of Way Maintenance	• Yes	O No	. O Yes	No
Marine Operations	O Yes	• No	. O Yes	No
Hydrologic Habitat Modification	O Yes	● No	. O Yes	No
Parks and Open Space	• Yes	O No	. • Yes	O No
Municipal Building		O No	. • Yes	O No
Stormwater System Maintenance	_	O No	, • Yes	O No
Vehicle and Fleet Maintenance		O No	. • Yes	O No
Other	O V	● No	. O Yes	<ul><li>No</li></ul>

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

	SPDES ID	
Name of MS4/Coalition City of Binghamton	N Y R 2 0 A 3 4 1	L
2. Provide the following information about municipal operat	tions good housekeeping programs	):
Parking Lots Swept (Number of acres X Number of times swep	ot) # Acres 3 4	1
Streets Swept (Number of miles X Number of times swept)	# Miles 3 5 2 7	7
Catch Basins Inspected and Cleaned Where Necessary	# 7 6 0	)
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#	3
Inspected and Cleaned where recessary		_
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
O Pesticide/Herbicide Applied	# Acres	
(Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	Administration	
3. How many stormwater management trainings have been p	provided to municipal employees	
during this reporting period?		2
4. What was the date of the last training?	02/06/2019	9
4. What was the date of the last training.	0270072011	
5. How many municipal employees have been trained in this	reporting period?	3
6. What percent of municipal employees in relevant positions	s and departments receive	
stormwater management training?	4 3 %	6

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

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

Name of MS4/Coalition City of Binghamton  SPDES ID  N Y R 2 0 A 3 4 1
7. Evaluating Progress Toward Measurable Goals MCM 6
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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 storm water. Prevent hazardous waste material from impacting storm water through proper use, disposal, storage methods. Continue street sweeping and cleaning catchbasins.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
3527 miles of street swept, 34 acres of parking lot swept, and 760 catchbasins cleaned during reporting period.
C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue training as available. Continue the use of BMP's in moving/landscaping operations. Continue to use good house keeping procedures to reduce the impact of vehicle/equipment maintenance and washing.

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

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	SPI	DES	ID						
Name of MS4/Coalition Town of Binghamton	N	Y	R	2	0	Α	0	0	9

## Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

No O Yes

Operation/Activity/Facility performed within the past 3 Addressed in SWMP? Operation/Activity/Facility years? Street Maintenance..... 9 Yes O No ...... • Yes O No O No ...... • Yes O No Bridge Maintenance..... 

Yes O No ...... • Yes O No Winter Road Maintenance..... Yes O No O No ...... • Yes Salt Storage..... • Yes O No ...... • Yes Solid Waste Management..... 

Yes O No O No ..... • Yes O No New Municipal Construction and Land Disturbance.. 

Yes Right of Way Maintenance..... 

Yes O No ..... • Yes O No No Marine Operations..... O Yes ● No ..... O Yes No Hydrologic Habitat Modification..... O Yes No ..... O Yes O No Yes O No Parks and Open Space..... Municipal Building..... • Yes O No Yes O No O No ..... • Yes O No Stormwater System Maintenance..... • Yes O No Vehicle and Fleet Maintenance..... O No Yes Other...... O Yes No

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

	SPDES ID			
Name of MS4/Coalition Town of Binghamton	NYR2	0 A 0	0	9
2. Provide the following information about municipal operati	ons good housekeep	ing pro	gran	ns:
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	2 0	0
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#			0
O Phosphorus Applied In Chemical Fertilizer	# Lbs.			0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.			0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Nutimes applied to the nearest tenth.)	# Acres umber of			
3. How many stormwater management trainings have been p	rovided to municipa	al emplo	yees	3
during this reporting period?				2
4. What was the date of the last training?	10/27	/ 2 (	) 1	7
5. How many municipal employees have been trained in this	reporting period?			4
6. What percent of municipal employees in relevant positions stormwater management training?	and departments r	eceive	0	]%

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

Name of MS4/Coalition Town of Binghamton	N Y R 2 0 A 0 0 9
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMFIII.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Self assess municipal operations and train personnel in procedure	S.
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Self assessment has identified potential pollutants and training has Eight additional training elements were covered.	s promoted proper procedures.
C. How many times was this observation measured or evaluate	ted in this reporting period?
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal	during this reporting period?  Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in t	
E. Is your MIS4 on schedule to meet the deadline set for thin to	• Yes O No
F. Briefly summarize the stormwater activities planued to me the next reporting cycle (including an implementation sche	
Continue training and proper procedures. Implement capital improvement projects to reduce pollutants of c	oncern.

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

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

			SPE	ES	ID						
Name of MS4/Coalition	Town of Chenengo		N	Y	R	2	0	Α	1	2	7
		-					-				

#### 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		
O On behalf of a coalition  How many MS4s contributed to this report?		
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.

			performed within	the past 3
Operation/Activity/Facility	Addressed i	n SWMP?	<u>years?</u>	
Street Maintenance	• Yes	O No	• Yes	O No
Bridge Maintenance	O Yes	● No	O Yes	No
Winter Road Maintenance		O No	• Yes	O No
Salt Storage		O No	• Yes	O No
Solid Waste Management		● No	O Yes	No
New Municipal Construction and Land Disturba		O No	O Yes	No
Right of Way Maintenance	• Yes	O No	O Yes	No
Marine Operations	O Yes	● No	O Yes	No
Hydrologic Habitat Modification		● No	O Yes	No
Parks and Open Space		O No	O Yes	No
Municipal Building		O No	O Yes	<ul><li>No</li></ul>
Stormwater System Maintenance		O No	• Yes	O No
Vehicle and Fleet Maintenance		O No	O Yes	No
Other	O 37	● No	O Yes	<ul><li>No</li></ul>

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

	SPDES ID		
Name of MS4/Coalition Town of Chenengo	N Y R 2	0 A 1	2 7
		***************************************	
2. Provide the following information about municipal operation	s good housekeep	ing prog	grams:
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
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#		2
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		
O Nitrogen Applied In Chemical Fertilizer	# Lbs.		
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Num times applied to the nearest tenth.)	# Acres ber of		•
3. How many stormwater management trainings have been prov	vided to municipa	al emplo	yees
during this reporting period?	-		0
4. What was the date of the last training?	00/00	/ 0 0	0 0
5. How many municipal employees have been trained in this rep	oorting period?		0
6. What percent of municipal employees in relevant positions an stormwater management training?	nd departments r	eceive	0 %

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

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

SPDES ID

Town of Chapters

Name of MS4/Coalition Town of Chenengo	N Y R Z O A I Z 7
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Continue to maintain a clean fleet, hydroseed exposed ares and d sand application, as well as chemical applications (fertilizers, etc.	itches, control wasteful salt and .). Staff training ongoing.
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
No noticeable runoff problems noted or reported associated within	in municipal facilities.
C. How many times was this observation measured or evalua	ted in this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in t	• Yes O No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
Continue to improve on staff training and log of imrovements. Por recreation.	ossible IPM programs for parks and

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

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

		SPI	)ES	ID						
Name of MS4/Coalition	Town of Conklin	N	Y	R	2	0	Α	2	5	5
•										

#### Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> </ul>	
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.

		periornic	vu fficilii	the past c
Operation/Activity/Facility	Addressed in	SWMP?	<u>years?</u>	
Street Maintenance	• Yes	O No	Yes	O No
Bridge Maintenance	• Yes	O No	Yes	O No
Winter Road Maintenance		O No	Yes	O No
Salt Storage	• Yes	O No	Yes	O No
Solid Waste Management		● No	O Yes	No
New Municipal Construction and Land Disturba		O No	Yes	O No
Right of Way Maintenance		O No	Yes	O No
Marine Operations	~ **	● No	O Yes	No
Hydrologic Habitat Modification		• No	O Yes	No
Parks and Open Space		O No	Yes	O No
Municipal Building		O No	Yes	O No
Stormwater System Maintenance		O No	Yes	O No
Vehicle and Fleet Maintenance		O No	Yes	O No
Other	<b>▲ V</b>	O No		O No

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

Name of MS4/Coalition Town of Conklin	N Y R 2	0 A 2	5 5
Name of M154/Coantion	<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·
2. Provide the following information about municipal operation	ions good housekeep	ing prog	rams:
Parking Lots Swept (Number of acres X Number of times swept	t) # Acres		3
• Streets Swept (Number of miles X Number of times swept)	# Miles		4 1
● Catch Basins Inspected and Cleaned Where Necessary	#		3 9
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#		8
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		
O Nitrogen Applied In Chemical Fertilizer	# Lbs.		
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	# Acres umber of		].[]
3. How many stormwater management trainings have been p	rovided to municipa	al employ	ees
during this reporting period?			2
4. What was the date of the last training?	10/27	/ 2 0	1 7
5. How many municipal employees have been trained in this	reporting period?		2
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments r	eceive 5	0 %

Name of

#### MS4 Annual Report Form

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

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

		SPI	ES	ID						
MS4/Coalition	Town of Conklin	N	Y	R	2	0	А	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 Goa	l identified in	the SWMPP i	n this	reporting	period.
----	-----------------------	----------------	-----------------	-------------	--------	-----------	---------

Measurable goal is to reduce pollutants of concern through the use of good housekeeping programs. Also, to ensure that all relevant staff receive good housekeeping training.

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

Since relevant staff have been trained on good housekeeping practices there have been no reported violations.

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

(ex.: samples/participants/events)

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

Yes O No

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

• Yes O No

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

Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern. Continue to attend stormwater management trainings when available.

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

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

		SPL	DES	HD.						
Name of MS4/Coalition	TIOWN OF DICKINSON	N	Y	R	2	0	Α	1	4	3

#### Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
<ul><li>On behalf of an individual MS4</li><li>On behalf of a coalition</li></ul>	r <del></del>
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.

		NO. 101.111.		V
Operation/Activity/Facility	Addressed in	SWMP?	<u>vears?</u>	
Street Maintenance	• Yes	O No	Yes	O No
Bridge Maintenance	O Yes	● No	O Yes	<ul><li>No</li></ul>
Winter Road Maintenance		O No	Yes	O No
Salt Storage	• Yes	O No	Yes	O No
Solid Waste Management		O No	Yes	O No
New Municipal Construction and Land Disturba	nce • Yes	O No	Yes	O No
Right of Way Maintenance	_	O No	Yes	O No
Marine Operations	O 77	● No	O Yes	<ul><li>No</li></ul>
Hydrologic Habitat Modification		● No	O Yes	<ul><li>No</li></ul>
Parks and Open Space		O No	Yes	O No
Municipal Building		O No	<ul><li>Yes</li></ul>	O No
Stormwater System Maintenance		O No	<ul><li>Yes</li></ul>	O No
Vehicle and Fleet Maintenance		O No	Yes	O No
Other	$\sim \tau$	O No	O Yes	O No

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

	SPDES ID			
Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2	0 A	1 4	3
2. Provide the following information about municipal operat	ions good housekeep	oing pro	gran	ns:
Parking Lots Swept (Number of acres X Number of times swep	t) # Acres			5
• Streets Swept (Number of miles X Number of times swept)	# Miles		1	0
Catch Basins Inspected and Cleaned Where Necessary	#		5	5
O 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
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	# Acres Umber of		0.	
3. How many stormwater management trainings have been I	provided to municipa	al emplo	oyees	3
during this reporting period?				3
4. What was the date of the last training?	02/04	/ 2	0 1	9
5. How many municipal employees have been trained in this	reporting period?			7
6. What percent of municipal employees in relevant position stormwater management training?	s and departments r	1 1	0 0	]%

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

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

		SPD	ES	ID						
Name of MS4/Coalition	TJOWN OF DICKINSON	N	Y	R	2	0	Α	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. Also, to ensure that all relevant staff receive good housekeeping training.

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

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

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

6 6
-----

(ex.: samples/participants/events)

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

Yes O No

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

Yes O No

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

#### ALL EMPLOYEES GET GOOD HOUSEKEEPING TRAINING ONCE A YEAR.

Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern. Continue to attend stormwater management training(s) when available.

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

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

		SPE	ES	lD						
Name of MS4/Coalition	Town of Fenton	Ν	Y	R	2	0	Α	0	7	8

#### Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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.

		periorine	CI TYREARING	the past o
Operation/Activity/Facility	Addressed in S	WMP?	<u>vears?</u>	
Street Maintenance	• Yes O	No	Yes	O No
Bridge Maintenance	O Yes •	No	O Yes	<ul><li>No</li></ul>
Winter Road Maintenance		No	Yes	O No
Salt Storage	• Yes O	No	Yes	O No
Solid Waste Management		No	Yes	O No
New Municipal Construction and Land Disturba		No	O Yes	No
Right of Way Maintenance	_	No	Yes	O No
Marine Operations	~ 17 -	No	O Yes	No
Hydrologic Habitat Modification		No	O Yes	<ul><li>No</li></ul>
Parks and Open Space		No	Yes	O No
Municipal Building	A 17 A	No	<ul><li>Yes</li></ul>	O No
Stormwater System Maintenance	_	No	<ul><li>Yes</li></ul>	O No
Vehicle and Fleet Maintenance	<b>-</b>	No	<ul><li>Yes</li></ul>	O No
Other	O Van		O Yes	<ul><li>No</li></ul>

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

	SPDES ID			
Name of MS4/Coalition Town of Fenton	NYR2	0 A	0 7	8
2. Provide the following information about municipal operations	s good housekeer	oing pr	ogra	ms:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres			5
Streets Swept (Number of miles X Number of times swept)	# Miles		4	9
Catch Basins Inspected and Cleaned Where Necessary	#		5	0
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#			2
O Phosphorus Applied In Chemical Fertilizer	# Lbs.			0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.			0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres per of		0	.0
3. How many stormwater management trainings have been prov	ided to municipa	l emp	loyee	s
during this reporting period?				0
4. What was the date of the last training?	1 1 / 0 5	<b>/</b> 2	0 1	5
5. How many municipal employees have been trained in this repo	orting period?			0
6. What percent of municipal employees in relevant positions and stormwater management training?	d departments r	eceive	0	]%

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

Name of MS4/Coalition Town of Fenton		N Y R 2 O A	0 / 8
7. Evaluating Progress Toward Measurable Goals MC	CM 6		
Use this page to report on your progress and project plans identified in your Stormwater Management Program Plan III.C.1. Submit additional pages as needed.	toward achiev (SWMPP), in	ving measurable goals scluding requirements i	n Part
A. Briefly summarize the Measurable Goal identified i	in the SWMI	PP in this reporting pe	riod.
New Staff orientation to include operations and methods			
B. Briefly summarize the observations that indicated t	the overall ef	fectiveness of this Mea	asurable
No issues			
C. How many times was this observation measured or	evaluated in	this reporting period	
		(ex.: samples/p	O participants/events)
D. Has your MS4 made progress toward this measural	ble goal duri		od?
		• Yes	
E. Is your MS4 on schedule to meet the deadline set fo	orth in the SV		: O No
F. Briefly summarize the stormwater activities planne the next reporting cycle (including an implementati	ed to meet the ion schedule)	e goals of this MCM d	uring
Additional Staff Training			

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

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

		SPL	ES	ID						
Name of MS4/Coalition	Town of Kirkwood	N	Y	R	2	0	Α	0	7	2

#### Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> </ul>	
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.

		periorn	icu milli	the past 5
Operation/Activity/Facility	Addressed in	1 SWMP?	<u>years?</u>	
Street Maintenance	Yes	O No	. 🛡 Yes	O No
Bridge Maintenance	O Yes	● No	. O Yes	No
Winter Road Maintenance		O No	. • Yes	O No
Salt Storage	🖲 Yes	O No	. 🖲 Yes	O No
Solid Waste Management		• No	. O Yes	No
New Municipal Construction and Land Disturba	<b>-</b>	O No	. • Yes	O No
Right of Way Maintenance	🕒 Yes	O No	. 🛡 Yes	O No
Marine Operations	O Yes	● No	. O Yes	No
Hydrologic Habitat Modification		● No	. O Yes	No
Parks and Open Space	- T T	O No	. • Yes	O No
Municipal Building		O No	. • Yes	O No
Stormwater System Maintenance		O No	, ● Yes	O No
Vehicle and Fleet Maintenance		O No	. • Yes	O No
Other	<b>▲ 17</b> .	O No	. • Yes	O No

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

	SPDES ID			
Name of MS4/Coalition Town of Kirkwood	NYR2	0 A	0 7	2
2. Provide the following information about municipal operat	ions good housekeep	oing pr	ograi	ms:
Parking Lots Swept (Number of acres X Number of times swep	t) # Acres			5
Streets Swept (Number of miles X Number of times swept)	# Miles		4	4
Catch Basins Inspected and Cleaned Where Necessary	#		2	3
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#			3
O Phosphorus Applied In Chemical Fertilizer	# Lbs.			0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.			0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	# Acres [ lumber of		0.	. 0
3. How many stormwater management trainings have been p	provided to municipa	al emp	loyee	s
during this reporting period?				2
4. What was the date of the last training?	12/05	/ 2	0 1	9
5. How many municipal employees have been trained in this	reporting period?		1	. 2
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments r	eceive	0 0	]%

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

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	
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.  Also, to ensure that all relevant staff receive good housekeeping training.	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.	
Since staff have been trained on good housekeeping practices there have been no reported violations.	
C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/even)  D. Has your MS4 made progress toward this measurable goal during this reporting period?	ts)
■ Yes O No  E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  ■ Yes O No  F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	
Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern. Continue to attend stormwater management training(s) when available.	

This report is being submitted for the reporting period ending March 9, 2019

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

SPDES ID

Name of MS4/Coalition

Town of Owego

NYR2 0A 07 9

## Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> </ul>	
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) Plau 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.

		pertorn	ned Withir	the past 3
Operation/Activity/Facility	Addressed in	n SWMP?	<u>years?</u>	-
Street Maintenance	• Yes	○ No	., • Yes	O No
Bridge Maintenance	● Yes	○ No	• Yes	O No
Winter Road Maintenance	• Yes	○ No	• Yes	○ No
Salt Storage	• Yes	○ No	• Yes	O No
Solid Waste Management	O Yes	• No	O Yes	$\bigcirc$ No
New Municipal Construction and Land Disturbation	nce • Yes	○ No	• Yes	O No
Right of Way Maintenance	● Yes	○ No	• Yes	$\bigcirc$ No
Marine Operations	O Yes	• No	O Yes	○ No
Hydrologic Habitat Modification		○ No	• Yes	O No
Parks and Open Space	• Yes	○ No	• Yes	O No
Municipal Building	• Yes	○ No	• Yes	○ No
Stormwater System Maintenance	• Yes	○ No	• Yes	O No
Vehicle and Fleet Maintenance	• Yes	○ No	• Yes	O No
Other	O Yes	○ No	O Yes	○ No

This report is being submitted for the reporting period ending March 9, 2019

Name of MS4/Coalition Town of Owego	NYR20A079
2. Provide the following information about municipal operation	ons 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 44
© Catch Basins Inspected and Cleaned Where Necessary	# 280
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	# 4
O Phosphorus Applied In Chemical Fertilizer	# Lbs. 0
O Nitrogen Applied In Chemical Fertilizer	# Lbs. 0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Nutimes applied to the nearest tenth.)	# Acres 0
3. How many stormwater management trainings have been produring this reporting period?	covided to municipal employees
4. What was the date of the last training?	10/07/2018
5. How many municipal employees have been trained in this r	reporting period?
6. What percent of municipal employees in relevant positions stormwater management training?	and departments receive 50 %

This report is being submitted for the reporting period ending March 9, 2019

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20A079 Town of Owego Name of MS4/Coalition 7. Evaluating Progress Toward Measurable Goals MCM 6 Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. Provide educational material and training opportunities to municipal work crews to keep them informed of local, state and/or federal regulations. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. The Town is in the process of creating self assessment material to insure compliance with stormwater regulations. 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? O No Yes E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O No Yes F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). The Town will create inventory of landscaping and lawncare areas, municipal owned vehicles, maintenance activities, and road maintenance activities.

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

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

		SPL	ES	ID						
Name of MS4/Coalition	Town of Union	N	Y	R	2	0	Α	0	5	0

#### Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
<ul><li>On behalf of an individual MS4</li><li>On behalf of a coalition</li></ul>	
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.

		POLICIA	cu milli	the past o
Operation/Activity/Facility	Addressed in	n SWMP?	<u>years?</u>	
Street Maintenance	● Yes	O No	. O Yes	No
Bridge Maintenance	O Yes	O No	. O Yes	O No
Winter Road Maintenance		O No	. O Yes	No
Salt Storage		O No	. O Yes	No
Solid Waste Management		O No	O Yes	No
New Municipal Construction and Land Disturba		O No	O Yes	No
Right of Way Maintenance		O No	. O Yes	No
Marine Operations		O No	O Yes	O No
Hydrologic Habitat Modification		O No	O Yes	O No
Parks and Open Space		O No	O Yes	No
Municipal Building	A 17	O No	O Yes	No
Stormwater System Maintenance		O No	O Yes	No
Vehicle and Fleet Maintenance		O No	O Yes	No
Other	O V	O No	O Yes	O No

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

		SPDI	ES ID					
Name of MS4/Coalition Town of Union		N	Y R	2	0 A	0	5	0
2. Provide the following information about municipal operat	ions good	ł ho	usek	eepi	ing p	rog	ran	18:
O Parking Lots Swept (Number of acres X Number of times swep	ot)	ī	# Acr	es [				
• Streets Swept (Number of miles X Number of times swept)		;	# Mil	es [			9	9
<ul> <li>Catch Basins Inspected and Cleaned Where Necessary</li> </ul>				# [		1	0	1
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary				# [				
				-				
O Phosphorus Applied In Chemical Fertilizer			# Lb	s. [				0
O Nitrogen Applied In Chemical Fertilizer			# Lb	s.				0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N	Jumber of		Acres					
times applied to the nearest tenth.)	, 4,1110-01-01							
3. How many stormwater management trainings have been p	orovided	to n	nunic	ipa	l em	oloy	ees	
during this reporting period?								3
4. What was the date of the last training?	0	3	<b>/</b> [1	0	/ 2	0	1	6
5. How many municipal employees have been trained in this	reporting	g pe	riod:	?				
6. What percent of municipal employees in relevant positions	s and dep	artı	ment	s re		: 		
stormwater management training?					1	0	0	%

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

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

SPDES ID

Name of MS4/Coalition	Town of Union			N Y R 2	0 A 0	5 0
7. Evaluating Pro	gress Toward M	easurable Goals	MCM 6			
Use this page to repidentified in your St III.C.1. Submit addi	tormwater Manag	ement Program Pl	ns toward ach an (SWMPP),	nieving measurabl , including require	e goals ements in F	Part
A. Briefly summar	rize the Measura	ble Goal identific	ed in the SWN	MPP in this repo	rting peri	od.
Provided ewaste co disposal at landfill. Eliminate use of ga	Continue to pro	mote good housek	eeping efforts	tions to prevent in at municipal faci	mproper lities.	
B. Briefly summan Goal.	rize the observat	ions that indicate	ed the overall	effectiveness of	this Measu	ırable
Amount of e waste	collected. Amoun	nt of roads swept a	and storm drai	ns cleaned		
C. How many time	es was this obser	vation measured	or evaluated			1
D. Has your MS4	made progress to	oward this measu	ırable goal du	iring this reporti	iug period ● Yes	? O No
E. Is your MS4 on						• No
F. Briefly summan the next reporti	rize the stormwa ing cycle (includ	ter activities plai ing an implemen	ined to meet t tation schedu	the goals of this le).	MCM dur	ing
Increase staff traini	ing on BMP and s	self evaluations. I	nstall storm dr	ain markers.		

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

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

	SPDES ID
Name of MS4/Coalition Town of Vestal	N Y R 2 0 A 0 6 4
Minimum Control Measure 6. Stormwater Managen	nent for Municipal Operations
The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this report?</li> </ul>	

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>periorine</u>	ea within	the past 3
Operation/Activity/Facility	Addressed i	<u>n SWMP?</u>	<u>years?</u>	
Street Maintenance	• Yes	O No	Yes	O No
Bridge Maintenance		O No	Yes	O No
Winter Road Maintenance		O No	Yes	O No
Salt Storage		O No	Yes	O No
Solid Waste Management		• No	O Yes	No
New Municipal Construction and Land Disturba		O No	Yes	O No
Right of Way Maintenance		O No	Yes	O No
Marine Operations	O 17	• No	O Yes	No
Hydrologic Habitat Modification	_	• No		<ul><li>No</li></ul>
Parks and Open Space	<b>—</b> 17	O No	Yes	O No
Municipal Building	A 77	O No	<ul><li>Yes</li></ul>	O No
Stormwater System Maintenance	_	O No		O No
Vehicle and Fleet Maintenance				O No
Other	O V.	O No	O Yes	O No
Other		***************************************		

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

	SPDES ID				
Name of MS4/Coalition Town of Vestal	N Y R 2	0 A	0	6	4
2. Provide the following information about municipal operations go	ood housekeep	ing p	rogi	an	15:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres				8
• Streets Swept (Number of miles X Number of times swept)	# Miles			8	0
Catch Basins Inspected and Cleaned Where Necessary	#		3	3	3
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#			3	6
O Phosphorus Applied In Chemical Fertilizer	# Lbs.				
O Nitrogen Applied In Chemical Fertilizer	# Lbs.				
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres			].[	
3. How many stormwater management trainings have been provide	ed to municipa	ıl emp	oloy	ees	
during this reporting period?					2
4. What was the date of the last training?	1 1 / 0 1	/ 2	0	1	8
5. How many municipal employees have been trained in this report	ting period?				8
6. What percent of municipal employees in relevant positions and o stormwater management training?	departments r	eceive	3	3	%

This

his report is being submitted for the reporting period ending March 9,	2	0	1	9
If submitting this form as part of a joint report on hehalf of a coalition leave SPDI	ES I	DΕ	lan	ık.

if stibiliting this form as part of a joint report of behalf of a coantion leave of DES in blank.
Name of MS4/Coalition Town of Vestal SPDES ID  N Y R 2 0 A 0 6 4
7. Evaluating Progress Toward Measurable Goals MCM 6
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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?
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  • Yes • O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
The Town will continue to train employees responsible for municipal operations to identify issues and problem areas as well as improve management of the MS4 system. The Town will continue its operations of brush and leaf pick up, street sweeping, catch basin cleaning, open ditch maintenance.

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

		SPDE	2 ID	
Name of MS4/Coalition Village of Endioatt		N Y	R 2 0	A149
•				
Minimum Control Measure 6. Stormy	<u>vater Mana</u>	agement for M	unicipal (	<u>Operations</u>
The information in this section is being reported (cho	eck one):			
On behalf of an individual MS4				
On behalf of a coalition	40			
How many MS4s contributed to this	report?			
1. Choose/list each municipal operation/facil				
Pollutants of Concern to the MS4 system.				
operation/facility has been addressed in th	ie MS4's/Coa	ilition's Stormwa	ter Manag	ement
Program(SWMP) Plan and whether a self reporting period. A self-assessment is per-				
potentially generated by the permittee's or				Officancs
effectiveness of existing programs and 3)				acilities
that will be addressed by the pollution pre				
not done already.		·		
			Self-Assess	ment
			ation/Activi	
			<u>med withir</u>	
Operation/Activity/Facility	Addressed i	n SWMP?	<u>years?</u>	, -
Street Maintenance		O No		O No
Bridge Maintenance		O No		O No
Winter Road Maintenance		○ No		O No
Salt Storage		O No		O No
Solid Waste Management		O No		O No
New Municipal Construction and Land Disturba		O No		O No
Right of Way Maintenance		○ No		○ No <b>®</b> No
Marine Operations			O Yes	NO INO
Hydrologic Habitat Modification	○ Yes	• No		
Parks and Open Space		• No		No
2 2	<b>9</b> Yes	● No ○ No	• Yes	• No O No
Municipal Building	<b>②</b> Yes	• No ○ No ○ No	• Yes	<ul><li>No</li><li>No</li><li>No</li></ul>
Municipal BuildingStormwater System Maintenance		• No ○ No ○ No	• Yes • Yes • Yes	<ul><li>No</li><li>No</li><li>No</li><li>No</li><li>No</li></ul>
Municipal Building	<ul><li> Yes</li><li> Yes</li><li> Yes</li><li> Yes</li><li> Yes</li></ul>	• No ○ No ○ No	• Yes • Yes • Yes • Yes	<ul><li>No</li><li>No</li><li>No</li></ul>

This report is being submitted for the reporting period ending March 9, 2019

	SPDE	ES ID					
Name of MS4/Coalition Village of & Endicott	N Y	R 2	0	Λ	l	4	9
2. Provide the following information about municipal operations g	good ho	usekee	pin	g pr	ogi	ran	15:
● Parking Lots Swept (Number of acres X Number of times swept)	#	# Acres				4	0
• Streets Swept (Number of miles X Number of times swept)	#	# Miles			1	2	0
● Catch Basins Inspected and Cleaned Where Necessary		#	6	5	0		
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>		#					
O Phosphorus Applied In Chemical Fertilizer		# Lbs.					
O Nitrogen Applied In Chemical Fertilizer		# Lbs.					
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)		Acres				_].	
3. How many stormwater management trainings have been provide	ded to m	nuniciț	oal e	mp	loy	ees	
during this reporting period?		-					3
4. What was the date of the last training?	1 2	/	<del>]</del> /	2	0	1	7
5. How many municipal employees have been trained in this report	rting pe	riod?					Q
6. What percent of municipal employees in relevant positions and stormwater management training?	departi	ments	rece	ive		ı	%

This report is being submitted for the reporting period ending March 9,2019

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20A149 Village of Endicott Name of MS4/Coalition 7. Evaluating Progress Toward Measurable Goals MCM 6 Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. 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?  $\bigcirc$  No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

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

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

Name of MS4/Coalition Village of Johnson City		SPDES ID           N Y R 2 0 A 1 0 1
Minimum Control Measure 6. Stormwater	<u>Management</u>	for Municipal Operations
The information in this section is being reported (check one	):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this report</li> </ul>	?	
1. Choose/list each municipal operation/facility tha Pollutants of Concern to the MS4 system. For ea		

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 doue already.

		1/2	I TOT INCO WICHIN	the page o
Operation/Activity/Facility	Addressed in	ı SWMP?	<u>years?</u>	
Street Maintenance	• Yes	O No	• Yes	O No
Bridge Maintenance	O Yes	● No	○ Yes	No
Winter Road Maintenance	• Yes	○ No	• Yes	O No
Salt Storage	• Yes	○ No	• Yes	O No
Solid Waste Management		O No	• Yes	O No
New Municipal Construction and Land Disturba		O No	Yes	O No
Right of Way Maintenance	A	O No	• Yes	O No
Marine Operations	~	No	Yes	No
Hydrologic Habitat Modification		• No	○ Yes	No
Parks and Open Space	<b>A</b> 17	○ No	● Yes	$\bigcirc$ No
Municipal Building		○ No	• Yes	O No
Stormwater System Maintenance		○ No	Yes	O No
Vehicle and Fleet Maintenance	<b>A</b> 77	○ No	• Yes	O No
Other	$\bigcirc$ Voc	O No		O No

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

N Y R 2 0 A 1 0 1 Name of MS4/Coalition Village of Johnson City 2. Provide the following information about municipal operations good housekeeping programs: # Acres Parking Lots Swept (Number of acres X Number of times swept) # Miles 2 • Streets Swept (Number of miles X Number of times swept) 0 8 # 5 Catch Basins Inspected and Cleaned Where Necessary 0 0 Post Construction Control Stormwater Management Practices # Inspected and Cleaned Where Necessary # Lbs. O Phosphorus Applied In Chemical Fertilizer # Lbs. 0 O Nitrogen Applied In Chemical Fertilizer 0 0 O Pesticide/Herbicide Applied # Acres (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) 3. How many stormwater management trainings have been provided to municipal employees during this reporting period? 1 4. What was the date of the last training? 7 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 0 0 % stormwater management training?

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

ii sudinittii	ng this form as part of a Joint R	eport on benan or a	SPDES ID	ED ID OIGHN
Name of MS4/Coalition	Village of Johnson City		N Y R	2 0 A 1 0 1
7. Evaluating Pro	gress Toward Measurable	Goals MCM 6		
identified in your S	oort on your progress and pro tormwater Management Prop itional pages as needed.			
A. Briefly summa	rize the Measurable Goal i	dentified in the S	WMPP in this rep	porting period.
The Village contin contribute POCs to	ues to train employees regar the MS4 system.	ding municipal op	perations that could	possibly
B. Briefly summa Goal.	rize the observations that i	ndicated the ove	rall effectiveness o	of this Measurable
400 hours for clear ditches and a total markers are contin	ng period the street sweeper ning catchbasins, the loader/of 2400 manhours were utili ued to be placed at catchbasinstruction projects CBs are r	backhoe were utilized for this Measins that state; "No	ized 296 hours for eurable Goal. Also, Dumping Drains to	cleaning creeks &   storm drainage o River". Also,
C. How many tim	es was this observation me	easured or evalua		ng period?  176  x.: samples/participants/event
D. Has your MS4	made progress toward this	s measurable goa	•	• • •
E. Is your MS4 or	n schedule to meet the dead	lline set forth in	the SWMPP?	Yes ○ No
	rize the stormwater activit			s MCM during
potentially contrib	ontinue to train employees re ute to the MS4 system. The sin cleaning, creek/open ditc	Village will conti	nue its operations	of street

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

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

		SPL	ES	ID						
Name of MS4/Coalition	VILLAGE OF PORT DICKINSON	N	Y	R	2	0	А	0	8	0

## Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (cl	neck one):			
<ul> <li>On behalf of an individual MS4</li> <li>O On behalf of a coalition</li> <li>How many MS4s contributed to this</li> </ul>				
1. Choose/list each municipal operation/faci Pollutants of Concern to the MS4 system. operation/facility has been addressed in the Program(SWMP) Plan and whether a self-reporting period. A self-assessment is perpotentially generated by the permittee's of effectiveness of existing programs and 3) that will be addressed by the pollution prinot done already.	For each open to the MS4's/Coal frassessment of the formed to: 1) operations and open to the formed the formed to the formed the for	eration/facili dition's Storn has been per determine t facilities; 2) municipal op	ty indicate whet nwater Manage formed during t he sources of po evaluate the erations and fac	ther the ement the ellutants
·			Self-Assessn Operation/Activit	y/Facility
Operation/Activity/Facility	Addressed i	<u>p</u>	Operation/Activiterformed within	y/Facility
Operation/Activity/Facility Street Maintenance	Addressed i ● Yes	n SWMP?	Operation/Activit erformed within years?	y/Facility
Street Maintenance	• Yes	<u>p</u> n SWMP? O No	Deration/Activiterformed within years?	y/Facility the past 3
Street Maintenance Bridge Maintenance	• Yes	n SWMP?  O No  No	Deration/Activiterformed within years?	y/Facility the past 3 O No
Street Maintenance Bridge Maintenance Winter Road Maintenance	<ul><li>Yes</li><li>O Yes</li><li>Yes</li></ul>	n SWMP?  O No  ◆ No  O No	Dperation/Activiterformed within  years?  Yes  O Yes  Yes  Yes	y/Facility the past 3  O No No
Street Maintenance	<ul><li>Yes</li><li>O Yes</li><li>Yes</li><li>Yes</li><li>Yes</li></ul>	n SWMP?  O No  No  O No  O No	peration/Activiterformed within years?	y/Facility the past 3  O No No No O No
Street Maintenance	<ul><li>Yes</li><li>O Yes</li><li>Yes</li><li>Yes</li><li>Yes</li><li>Yes</li></ul>	D NO	Deration/Activiterformed within  years?  Yes  O Yes  Yes  Yes  Yes  Yes  Yes	y/Facility the past 3  O No No No O No O No O No
Street Maintenance  Bridge Maintenance  Winter Road Maintenance  Salt Storage  Solid Waste Management  New Municipal Construction and Land Disturbe	<ul> <li>Yes</li> <li>O Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> </ul>	P n SWMP?  O No  O No  O No  O No  O No  No No	peration/Activiterformed within  years?  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Y	y/Facility the past 3  O No No No O No O No O No O No
Street Maintenance	<ul> <li>Yes</li> <li>O Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> </ul>	D NO	Dperation/Activiterformed within  years?  Yes  O Yes  Yes  Yes  Yes  Yes  Yes  O Yes  O Yes	y/Facility the past 3  O No No No O No O No O No O No O No
Street Maintenance	<ul> <li>Yes</li> <li>O Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>O Yes</li> <li>Yes</li> <li>O Yes</li> </ul>	P NO	Deration/Activiterformed within  years?  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Y	y/Facility the past 3  O No No No O No O No O No O No O No O
Street Maintenance  Bridge Maintenance  Winter Road Maintenance  Salt Storage  Solid Waste Management  New Municipal Construction and Land Disturbance and Land Di	<ul> <li>Yes</li> <li>O Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> </ul>	P NO	Dperation/Activiterformed within  years?  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Y	y/Facility the past 3  O No No No O No O No O No O No O No O
Street Maintenance	<ul> <li>Yes</li> <li>O Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> <li>Yes</li> </ul>	D NO	Dperation/Activiterformed within  years?  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Y	y/Facility the past 3  O No No O No O No O No O No O No O No
Street Maintenance  Bridge Maintenance  Winter Road Maintenance  Salt Storage  Solid Waste Management  New Municipal Construction and Land Disturbance and Land Di	<ul> <li>Yes</li> <li>O Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> </ul>	D NO	Deration/Activiterformed within  years?  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Y	y/Facility the past 3  O No No No O No O No O No O No O No O
Street Maintenance  Bridge Maintenance  Winter Road Maintenance  Salt Storage  Solid Waste Management  New Municipal Construction and Land Disturbent Right of Way Maintenance  Marine Operations  Hydrologic Habitat Modification  Parks and Open Space  Municipal Building	<ul> <li>Yes</li> <li>O Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> <li>O Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> <li>Yes</li> </ul>	P   No   No   No   No   No   No   No	Dperation/Activiter           erformed within           years?           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes           • Yes	y/Facility the past 3  O No No O No O No O No O No O No O No

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

	SPDES ID			
Name of MS4/Coalition VILLAGE OF PORT DICKINSON	NYR2	0 A	0 8	0
2. Provide the following information about municipal operat	ions good housekeep	oing pr	ogran	ns:
• Parking Lots Swept (Number of acres X Number of times swep	t) # Acres			2
• Streets Swept (Number of miles X Number of times swept)	# Miles			9
Catch Basins Inspected and Cleaned Where Necessary	#		1	8
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#			
Phosphorus Applied In Chemical Fertilizer	# Lbs.			0
Nitrogen Applied In Chemical Fertilizer	# Lbs.			0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	# Acres [ Jumber of		,	
3. How many stormwater management trainings have been p	provided to municipa	al empl	oyees	3
during this reporting period?				2
4. What was the date of the last training?	06/20	/ 2	0 1	9
5. How many municipal employees have been trained in this	reporting period?	[		4
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments r	eceive	0 0	]%

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

	1 3 1	SPDES ID
Name of MS4/Coalition	VILLAGE OF PORT DICKINSON	N Y R 2 0 A 0 8 0
7. Evaluating Pro-	gress Toward Measurable Goals MCM 6	
identified in your St	ort on your progress and project plans toward tormwater Management Program Plan (SW) itional pages as needed.	
A. Briefly summan	rize the Measurable Goal identified in the	e SWMPP in this reporting period.
GOOD HOUSEKE	TREETS AND PARKING LOTS, INSPECTEPING. Measurable goal is to reduce poll programs. Also, to ensure that all relevant	utants of concern through the use of
B. Briefly summar Goal.	rize the observations that indicated the ov	verall effectiveness of this Measurable
INSPECTED. Ther	WAS DONE MORE THAN ONCE AND To the has been a decrease in migration of mater vert cleaning. YARD WASTE PICK-UP WAYS.	ials to the streams and rivers due to
C. How many time	es was this observation measured or evalu	5 0
D. Has your MS4	made progress toward this measurable go	ex.: samples/participants/events  cal during this reporting period?  • Yes O No
E. Is your MS4 on	schedule to meet the deadline set forth in	n the SWMPP?  Street Yes O No
	rize the stormwater activities planned to a	
Continue to evaluat	S GET GOOD HOUSEKEEPING TRAINING to good housekeeping programs and implemue to attend stormwater management training	nent new practices to reduce pollutants

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

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

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

#### Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
<ul><li>On behalf of an individual MS4</li><li>On behalf of a coalition</li></ul>	and delivery.

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 Addressed in SWMP? years? Operation/Activity/Facility Street Maintenance..... 9 Yes ○ No ...... • Yes O No Bridge Maintenance.... • Yes ○ No ..... • Yes O No Winter Road Maintenance..... • Yes ○ No ...... • Yes  $\bigcirc$  No O No Salt Storage..... 9 Yes ○ No ...... • Yes Solid Waste Management..... • Yes ○ No ...... • Yes O No ○ No ...... • Yes O No New Municipal Construction and Land Disturbance.. 

Yes ○ No ..... • Yes Right of Way Maintenance..... 9 Yes  $\bigcirc$  No O No ● No Yes Marine Operations..... O Yes ○ No ..... • Yes Hydrologic Habitat Modification.....  $\bigcirc$  No Parks and Open Space..... 9 Yes ○ No ...... • Yes O No O No ○ No ..... • Yes Municipal Building..... O No ○ No ...... • Yes Stormwater System Maintenance..... • Yes ○ No ..... • Yes  $\bigcirc$  No Vehicle and Fleet Maintenance..... 

Yes ○ No • Yes O No Other.....

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

	SPDES ID	)				
Name of MS4/Coalition BROOME COUNTY	N Y R	2	0 A	3	3	2
	La classical High					
2. Provide the following information about municipal operations	good housek	кеер	ing p	rog	ran	18:
Parking Lots Swept (Number of acres X Number of times swept)	# Ac	res			1	9
<ul><li>Streets Swept (Number of miles X Number of times swept)</li></ul>	# Mi	les		3	4	3
<ul> <li>Catch Basins Inspected and Cleaned Where Necessary</li> </ul>		#			5	5
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary		#				6
Phosphorus Applied In Chemical Fertilizer	# L	bs.				0
<ul><li>Nitrogen Applied In Chemical Fertilizer</li></ul>	# L	bs.	2	3	9	0
Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acre per of	s	6	1	9].	
3. How many stormwater management trainings have been providuring this reporting period?	ided to muni	cipa	l em	oloy	ees	4
4. What was the date of the last training?	0 2 / 1	3	/ 2	0	1	9
5. How many municipal employees have been trained in this repo	orting period	?			8	1
6. What percent of municipal employees in relevant positions and stormwater management training?	d departmen	ts re	eceive	8	0	%

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

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

		SPI	DES	ID						
Name of MS4/Coalition	BROOME COUNTY	N	Y	R	2	0	А	3	3	2

#### 7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

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

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

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

$\mathbf{C}$	How many	times was	this	observation	measured	or e	evaluated i	in this	reporting	period?
·	TTO ALL BY SELECT A	HILLOS TEAD	CHIES .	ODSCI THEORY	mousurea	~ ,	DIMINUTE COM		, reporting	P

(ex.: samples/participants/events)

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

● Yes ○ No

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

● Yes ○ No

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

Complete the next 3-year assessment of County Facilities during the 2019-2020 reporting period, and using results from the on-site inspections and self-assessment analysis, develop individualized reporting checklists for each facility to use based on their individual needs and functions.

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

II SUDMIIUN	ng this form as part of a	a joint report on o	chan of a coantio	SPDES ID	iD biank.
Name of MS4/Coalition	BROOME COUNTY				0 A 3 3 2
'. Evaluating Prop	gress Toward Meas	urable Goals M	CM 6		
dentified in your Ŝt	ort on your progress tormwater Managemo itional pages as needo	ent Program Plai			
A. Briefly summar	rize the Measurable	Goal identified	in the SWMPI	P in this repor	ting period.
	OAL #6B To swee once annually in acce				thin the MS4
3. Briefly summar Goal.	rize the observation	s that indicated	the overall effe	ectiveness of th	is Measurable
infrastructure mapp	king on this goal by to bing, and the develop ots, we did not get th	ment of good ho	usekeeping reco	ords. Although	we did sweep
C. How many time	es was this observat	ion measured o	r evaluated in t	this reporting	period?
					3 4 3
). Has your MS4 i	made progress towa	ard this measur:	able goal durin	·	amples/participants/ g period? ● Yes ○ No
E. Is your MS4 on	schedule to meet th	ne deadline set f	orth in the SW	MPP?	
	rize the stormwater ing cycle (including			goals of this M	● Yes ○ No [CM during
	as established, but co ormation for Highwa				daries and

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

	SPDES ID
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
MEASUREABLE GOAL #6C To clean and inspect 50% of ca MS4 boundary annually.	tch basins and drop inlets within the
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Cleaning / inspection is occurring by County Highway Division confirmation whether 50% of structures as denoted in this goal as inspected due to the lack of good mapping.	each year, however, we do not have re actually being cleaned and
C. How many times was this observation measured or evaluation	ted in this reporting period?  [
D. Has your MS4 made progress toward this measurable goal	l during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	he SWMPP?  ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
Continue program as established. And priority within 2019-20 systems within the MS4 boundary and identifying CB structures.	

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

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

SPDES ID

The this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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?  (ac.: samples/participants/)  D. Has your MS4 made progress toward this measurable goal during this reporting period?  (ac.: samples/participants/)  Persono  E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  Persono  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.	Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.  A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.  MEASUREABLE GOAL #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?  C. How many times was this observation measured or evaluated in this reporting period?  One is your MS4 made progress toward this measurable goal during this reporting period?  One is your MS4 on schedule to meet the deadline set forth in the SWMPP?  One is your manife the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	7. Evaluating Progress Toward Measurable Goals MCM 6	
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?  [Acc.: samples/participants/s]  D. Has your MS4 made progress toward this measurable goal during this reporting period?  [Acc.: samples/participants/s]	identified in your Stormwater Management Program Plan (SWMI	achieving measurable goals PP), including requirements in Part
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?  D. Has your MS4 made progress toward this measurable goal during this reporting period?  Yes O No  E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  Yes O No  F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
C. How many times was this observation measured or evaluated in this reporting period?  C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/starticip		osphorus and nitrogen applied in
C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/streep.  D. Has your MS4 made progress toward this measurable goal during this reporting period?  Yes O No  F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).  Continue as developed and implemented, and continue to monitor materials for phosphorus /		rall effectiveness of this Measurable
D. Has your MS4 made progress toward this measurable goal during this reporting period?  Yes O No  E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  Yes O No  F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).  Continue as developed and implemented, and continue to monitor materials for phosphorus /		colf course, they are no longer used
D. Has your MS4 made progress toward this measurable goal during this reporting period?  Yes O No  E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  Yes O No  F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).  Continue as developed and implemented, and continue to monitor materials for phosphorus /	C. How many times was this observation measured or evalua-	ted in this reporting period?
D. Has your MS4 made progress toward this measurable goal during this reporting period?  Yes ○ No  E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  Yes ○ No  F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).  Continue as developed and implemented, and continue to monitor materials for phosphorus /		
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 /	D. Has your MS4 made progress toward this measurable goal	during this reporting period?
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).  Continue as developed and implemented, and continue to monitor materials for phosphorus /	E. Is your MS4 on schedule to meet the deadline set forth in t	
		eet the goals of this MCM during
		r materials for phosphorus /

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

Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
MEASUREABLE GOAL #6E To minimize the acreage of her MS4 boundaries.	bicide/pesticide usage within the
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Herbicides are only being used along County roadways at guide course.	rail locations, and at En Joie golf
C. How many times was this observation measured or evalua-	ted in this reporting period?
D. Has your MS4 made progress toward this measurable goal	ex.: samples/participants/even during this renorting neriod?
D. Has your Most made progress toward this measurable goal	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	he SWMPP?  ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation scho	eet the goals of this MCM during
Continue minimization to the greatest extent possible and monitor	or products used.

their job responsibilities.

#### **MS4 Annual Report Form**

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

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

Name of MS4/Coalition	n BROOME COUNTY	•	SPDES ID  N Y R 2 0 A 3 3 2
7. Evaluating Pro	ogress Toward Measurable	Goals MCM 6	
identified in your S	port on your progress and prostormwater Management Prostitional pages as needed.	oject plans toward gram Plan (SWMI	achieving measurable goals PP), including requirements in Part
A. Briefly summa	rize the Measurable Goal i	dentified in the S	SWMPP in this reporting period.
and good housekee this goal. This goal	eping measures, and to have	100% of County s art by the BTSC a	d to the stormwater program, IDDE, staff educated in accordance with as part of MCM-1 and MCM-2, they portunities.
B. Briefly summa Goal.	rize the observations that i	ndicated the over	rall effectiveness of this Measurable
A general power po and good housekee employees this rep	eping measures. This was pr	ped to educate em esented to 63 Buil	nployees about stormwater, IDDE Idings & Grounds and other DPW
C. How many tim	es was this observation me	asured or evalua	ted in this reporting period?
			(ex.: samples/participants/
D. Has your MS4	made progress toward this	measurable goa	l during this reporting period?  ● Yes ○ No
E. Is your MS4 on	n schednle to meet the dead	line set forth in t	the SWMPP?  ● Yes ○ No
	rize the stormwater activiti ing cycle (including an imp		eet the goals of this MCM during
			cally targeting those identified workers). Begin to develop more

targeted training materials related to Good Housekeepng measures for different groups depending on

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

Name of MS4/Coalition BROOME COUNTY SPDES ID  N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 6
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
MEASUREABLE GOAL #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.
Goal for 2016 was to develop printed material - which was accomplished. Our subsequent goal was to distribute this to all new employees during orientation - this was not accomplished.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal during this reporting period?  ○ Yes ● No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  O Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Goal this reporting period is to make new training pamphlets available to all new employees during their orientation with the Personnel Department.

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

If submitting this form as part of a joint report on ber	
Name of MS4/Coalition BROOME COUNTY	SPDES ID  N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MC	CM 6
Use this page to report on your progress and project plans identified in your Stormwater Management Program Plan III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified i	n the SWMPP in this reporting period.
MEASUREABLE GOAL #6H To maintain the County established and to keep these plans current with any change	's existing PBS/SPCC plans and training as ges in state and/or federal regulations.
B. Briefly summarize the observations that indicated t	he overall effectiveness of this Measurable
Existing SPCC plans are reviewed annually for compliant regulations. During this reporting period 12 staff member addition, County SPCC plans were reviewed and updated	rs completed updated SPCC training. In
C. How many times was this observation measured or	evaluated in this reporting period?
•	1 2
D. Has your MS4 made progress toward this measural	(ex.: samples/participants/ev ole goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set fo	rth in the SWMPP?  • Yes • No
F. Briefly summarize the stormwater activities planne the next reporting cycle (including an implementati	d to meet the goals of this MCM during
Continue program as established tracking that 100% of stawithin the SPCC plan documents. During this next report all staff members at each facility or within each department	aff training is being completed as stipulated ing period the County will develop a list of

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

Name of MS4/Coalition BROOME COUNTY	N         Y         R         2         0         A         3         3         2
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
MEASUREABLE GOAL #6I To complete an updated and deta and facilities within the MS4 boundaries (including updated map specific good housekeeping programs for each.	ailed inventory of County buildings ping), and to develop facility
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
There are 16 County facilities, 4 County parks, and 1 County Gol boundary. Two (2) new facilities were added to the County inverfacility checklists were progressed.	If Course located within the MS4 ntory in 2018, and individual
C. How many times was this observation measured or evaluat	ted in this reporting period?
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
During the 2019-2020 reporting period, mapping/survey is planne within the MS4 boundary not yet mapped, creation of individual added, and completion of the individualized MS4 housekeeping of	SWPP's for the 2 new facilities

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

Name of MS4/Coalition	n BROOME COUNTY	SP N	Y R 2 0 A 3	3 2
7. Evaluating Pro	ogress Toward Measurable Goals l	МСМ 6		
identified in your S	port on your progress and project pla Stormwater Management Program Pl litional pages as needed.			art
A. Briefly summa	rize the Measurable Goal identific	ed in the SWMPP in	this reporting perio	d
individualized for accordance with th	GOAL #6J To implement programment County facility based on the goine NYSDEC tracking system and for named reporting method once it is improved.	ood housekeeping docums so that the County	uments and in will be in a position	to
B. Briefly summa Goal.	rize the observations that indicate	d the overall effectiv	eness of this Measu	rable
	ogram goal in 2016. Individualized to report on parameters measured in			ed
				AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
C. How many time	es was this observation measured	or evaluated in this i	reporting period?	1
			(ex.: samples/parti	 icipants/events)
D. Has your MS4	made progress toward this measu	rable goal during thi	_	○ No
E. Is your MS4 on	n schedule to meet the deadline set	forth in the SWMPI		○ No
	rize the stormwater activities plan ting cycle (including an implement		s of this MCM duri	ng
	ing reporting period our goal is to up nd institute monthly and quarterly re			EC

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

Name of MS4/Coalition Tioga County			SPDES ID  N Y R 2 0 F	0 4 7			
			~~				
Minimum Control Measure 6. Stormy	<u>vater Mana</u>	gement fo	<u>r Municipal O</u>	perations			
The information in this section is being reported (che	eck one):						
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this</li> </ul>	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/Activit erformed within				
Operation/Activity/Facility	<u>Addressed</u> i	_	<u>years?</u>	<del></del>			
Street Maintenance	● Yes	○ No	O Yes	No			
Bridge Maintenance		○ No	• Yes	<ul><li>No</li></ul>			
Winter Road Maintenance		○ No	O Yes	<ul><li>No</li></ul>			
Salt Storage		○ No	O Yes	No			
Solid Waste Management		○ No	○ Yes	No			
New Municipal Construction and Land Disturba		○ No	○ Yes	<ul><li>No</li></ul>			
Right of Way Maintenance	9 Yes	○ No	○ Yes	No			
Marine Operations		● No	○ Yes	No			
Hydrologic Habitat Modification		● No	• Yes	<ul><li>No</li></ul>			
Parks and Open Space		No	○ Yes	No			
Municipal Building		○ No	Yes	<ul><li>No</li></ul>			
Stormwater System Maintenance		○ No	O Yes	<ul><li>No</li></ul>			
Vehicle and Fleet Maintenance		○ No		<ul><li>No</li></ul>			
	O Yes	● No	O Yes	No			

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

·	SPDES ID			<del></del>	,
Name of MS4/Coalition Tioga County	NYR2	0 2	A 0	4	7
2. Provide the following information about municipal operation	ons good housekee	ping	prog	ran	ns:
O Parking Lots Swept (Number of acres X Number of times swept	t) # Acres				
O Streets Swept (Number of miles X Number of times swept)	# Miles				
Catch Basins Inspected and Cleaned Where Necessary	#			5	5
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#				
O Phosphorus Applied In Chemical Fertilizer	# Lbs.				
O Nitrogen Applied In Chemical Fertilizer	# Lbs.				
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Nutimes applied to the nearest tenth.)	# Acres [ umber of			].	
3. How many stormwater management trainings have been p	rovided to municip	al em	ıploy	ees	
during this reporting period?					0
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 stormwater management training?	and departments r	eceiv	e		%

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

Name of MS4/Coalition	Tioga County	VANA-A		N Y R 2 0	A 0 4 7
7. Evaluating Pro	gress Toward Measur	able Goals MCN	M 6		
identified in your St	oort on your progress an tormwater Management itional pages as needed.	t Program Plan (S			
A. Briefly summa	rize the Measurable G	oal identified in	the SWMPP	in this reporti	ng period.
	ic Works continues to f Town of Owego Storm				
B. Briefly summan Goal.	rize the observations t	hat indicated the	e overall effe	ctiveness of this	s Measurable
No illicit discharge	s or spills, leaks observ	ed			
C. How many time	es was this observation	n measured or ev	valuated in th	nis reporting pe	eriod?
D II . 3404		1 4h.! 1			ples/participants/eve
D. Has your MS4 i	made progress toward	i this measurable	e goat during		Yes O No
E. Is your MS4 on	schedule to meet the	deadline set fort	h in the SWN	_	Yes O No
	rize the stormwater acing cycle (including an			oals of this MC	M during
	EPA/OSHA self audit to ted into the Tioga Court.				
		····-			

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

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

			<u>SPD</u>	<u>)ES</u>	ID						
Name of MS4/Coalition	City of Binghamton	•	N	Y	R	2	0	Α	3	4	1

#### **Additional Watershed Improvement Strategy Best Management Practices**

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

#### 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

	Non-traditional	1,2,3,4,/a-d,9	5.6.8a.85.10.11.12	Patt	logens	
1.	Does your MS4/Coalition phosphorus/nitrogen/pat			•	O No	O N/A
2.	Has 100% of the MS4/Co. If N/A, go to question 3.	oalition conveya	nce system been mapped	in GIS? ● Yes	O No	O N/A
	If No, estimate what percentage	C	•	apped so far.		% %

Na	me of MS4/Coalition City Of Binghamton	ſ	N Y R 2	0 A .	3 4 1
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (in	n <b>frastruct</b> u ● Yes	r <b>e) Ins</b> p O No	oection O N/A
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report			n inspec	
5.	Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Discharg (GP-0-08-001) to reduce pollutants in stormwater runoff fr disturb five thousand square feet or more?	ges from (	Constructio	on Activ	ities
6.	Has your MS4/Coalition developed a program to address prunoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Actithe New York State Stormwater Design Manual Enhanced Standards?	that distue NYS DE vities (GF	urb greater C SPDES ( P-0-08-001)	than or General , includi	•
7a.	Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?	duce eros	on or O Yes	• No	O N/A
7b.	How many projects have been sited in this reporting period	1?			0
7 <b>c.</b>	What percent of the projects included in 7b have been com	pleted in	this report	ing peri	od?
7d.	What percent of projects planned in previous years have be	een comp	leted?		%
8a.	Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper fertilizer application lands?	_	nent practi		Planned O N/A
	Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper disposal of grass communicipally owned lands?	_	_		O N/A

	SPDES ID		
Name of MS4/Coalition City of Binghamton	NYR2	0 A .	3 4 1
9. Has your MS4/Coalition developed and implemented a program of			
	Yes	O No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste			
prohibiting goose feeding?	O Yes	• No	O N/A
11. Does your MS4/Coalition have a pet waste bag program?	• Yes	O No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	O Yes	• No	O N/A

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

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

		SPI	DES	ID						
Name of MS4/Coalition	Town of Fenton	N	Y	R	2	0	Α	0	7	8
'										

#### Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):	
<ul><li>On behalf of an individual MS4</li><li>On behalf of a coalition</li></ul>	1
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	-	<del>-</del>	-
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	-	<u>-</u>	-
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
LI 27 Embayments	-		<del>-</del>
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

Non-Traditional 1.2	.3.4./a-d.9	5.6.88.80, (0.11, 12	Pain	ogens	
· ·			_	● No	O N/A
Has 100% of the MS4/Coal	ition conveya	nce system been mapped in		• No	O N/A
If N/A, go to question 3.					
If No, estimate what percenta	ge of the conve	eyance system has been map	pped so far.		0 %
Estimate what percentage was	s mapped in th	is reporting period.			0 %
	Does your MS4/Coalition has phosphorus/nitrogen/pathorus/nitrogen/	Does your MS4/Coalition have an educat phosphorus/nitrogen/pathogens on water  Has 100% of the MS4/Coalition conveyant of the MS4/Coalition conveyant of the MS4/Coalition conveyant of the conve	Does your MS4/Coalition have an education program addressing in phosphorus/nitrogen/pathogens on waterbodies?  Has 100% of the MS4/Coalition conveyance system been mapped in If N/A, go to question 3.	Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?  O Yes  Has 100% of the MS4/Coalition conveyance system been mapped in GIS?  O Yes  If N/A, go to question 3.  If No, estimate what percentage of the conveyance system has been mapped so far.	Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?  O Yes  Has 100% of the MS4/Coalition conveyance system been mapped in GIS?  O Yes  No  If N/A, go to question 3.  If No, estimate what percentage of the conveyance system has been mapped so far.

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

		SPDES ID		
Na	me of MS4/Coalition Town of Fenton	NYR2	0 A 0	7 8
3.	Does your MS4/Coalition have a Stormwater Conveyance System and Maintenance Plan Program?	em (infrastructu ● Yes	re) Insp O No	ection O N/A
4.	Estimate the percentage of on-site wastewater treatment system and maintained or rehabilitated as necessary in this reporting		n inspect	
5.	Has your MS4/Coalition developed a program that provides provided in NYSDEC SPDES General Permit for Stormwater Discharges for (GP-0-08-001) to reduce pollutants in stormwater runoff from disturb five thousand square feet or more?	rom Construction	on Activi	ities
6.	Has your MS4/Coalition developed a program to address post- runoff from new development and redevelopment projects that equal to one acre that provides equivalent protection to the NY Permit for Stormwater Discharges from Construction Activities the New York State Stormwater Design Manual Enhanced Phot Standards?	t disturb greater 'S DEC SPDES ( es (GP-0-08-001)	than or General , includi	
7a	Does your MS4/Coalition have a retrofitting program to reduct phosphorus/nitrogen/pathogen loading?	e erosion or O Yes	No	O 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 complet	ed in this report	ing peri	od?
7d	.What percent of projects planned in previous years have been			0 %
		• No	Projects	Planned
8a	Has your MS4/Coalition developed and implemented a turf ma procedures policy that addresses proper fertilizer application of lands?	nagement praction municipally o  • Yes	ices and wned O No	O N/A
8b	Has your MS4/Coalition developed and implemented a turf ma, procedures policy that addresses proper disposal of grass clipp	ings and leaves	from	
	municipally owned lands?	Yes	O No	O N/A

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

Name of MS4/Coalition Town of Fenton	N Y R 2	0 A 0	7 8
9. Has your MS4/Coalition developed and implemented a program of	_	_	• N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste of prohibiting goose feeding?			rties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	Yes	O No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	O Yes	• No	O N/A

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

	SPI	DES	ID						
FMS4/Coalition Town of Union	Α	0	5	0	И	Y	R	2	0

4			STDES ID
ame of MS4/Coalition Town of U	nion		A 0 5 0 N Y R 2
<del></del>			
Additional Water	rshed Improvemen	t Strategy Best Mai	nagement Practices
he information in this section	n is heing reported (check	cone).	
On behalf of an individual NO On behalf of a coalition	AS4		
	4s contributed to this re	enort?	
110w many Mis-	45 COMMIDUICU TO MIS TO	port:	
MS4s must answer the que	estions or check NA a	s indicated in the table	below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed			Phonhous
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus Phosphorus
Traditional Non-Land Use Non-Traditional	1,2,3,4,7a-d,8a,8b,9 1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	1,2,774*4,04,05,7	-	-
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	1 4 70 40 10 11 12	2,3,5,6,8a,8b	Pathogens
Traditional Land Use Traditional Non-Land Use	1,4,7a-d,9,10,11,12 1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9 1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary	1,51,74 0,7	2,5,1,5,54,501,51,11,1	-
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	-		-
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
	1,2,5,7,74 4,7,10,11,12	5.6,8a.8b,10.11.12	Pathogens

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

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

SPDES ID YR 2 0 Α 0 Town of Union Name of MS4/Coalition 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection No ON/A and Maintenance Plan Program? 4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period? % 5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that Yes O No O N/A disturb five thousand square feet or more? 6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal O No O N/A Yes Standards? 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? O N/A O Yes No 7b. How many projects have been sited in this reporting period? 7c. What percent of the projects included in 7b have been completed in this reporting period? % 7d. What percent of projects planned in previous years have been completed? % No Projects Planned 8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned O Yes No O N/A lands? 8b.Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? O Yes No O N/A

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

	SEDES ID		
Name of MS4/Coalition Town of Union	NYR2	0 A 0	5 0
9. Has your MS4/Coalition developed and implemented a program	n of native plant	ing?	
	O Yes	No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet was prohibiting goose feeding?	<del>-</del>		rties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	• Yes	O No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	O Yes	● No	O N/A

if additioning this form as part of a joint report on senan of a	
	SPDES ID

s contributed to this re	A lamour law and particular and part	below.
Angwar	Answer Check NA	
Allsakt	CHECKINA	(POC)
1.2.3.4.5.6.7a-d.8a.8b.9	10.11.12	Phosphorus
		Phosphorus
	3,4,5,10,11,12	Phosphorus
*	•	*
1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
•		
1,4,6,7a-d,8a,9		Phosphorus
1,4,6,7a-d,8a,9		Phosphorus
1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
<b>*</b>		*
		Pathogens
		Pathogens
1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
	•	
		Pathogens and Nitrogen
		Pathogens and Nitrogen
1,4,7a-đ,8u,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
-	20501 1011 10	DI
		Phosphorus
		Phosphorus
1,4,6,7a-4,8a,9	2,3,5,80,10,11,12	Phosphorus
10242-40101112	5 6 00 0h	Pathogens
		Pathogens Pathogens
		Pathogens
	Answer  1,2,3,4,5,6,7a-d,8a,8b,9 1,2,3,4,7a-d,8a,8b,9 1,2,77a-d,8a,8b,9 1,6,7a-d,8a,9 1,6,7a-d,8a,9 1,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9	Scontributed to this report?  Stions or check NA as indicated in the table  Answer Check NA  1,2,3,4,5,6,7a-d,8a,8b,9 10,11,12 1,2,77a-d,8a,8b,9 3,4,5,10,11,12 1,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,7a-d,9,10,11,12 1,4,7a-d,9,10,11,12 1,4,7a-d,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,6,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,2,3,5,8b,10,11,12 1,2,3,4,7a-d,9,10,11,12

Na	me of MS4/Coalition Tioga County	]	NYR2	0 A 0	4 7	
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (	infrastructu • Yes	re) Insp ○ No	ection O N/A	
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report			n inspec	ted           	
5.	Has your MS4/Coalition developed a program that provid NYSDEC SPDES General Permit for Stormwater Dischar (GP-0-08-001) to reduce pollutants in stormwater runoff for disturb five thousand square feet or more?	ges from	Construction	on Activ	ities	
6.	Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards?					
7a.	Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?	educe ero	osion or O Yes	O No	● N/A	
7b	.How many projects have been sited in this reporting perio	d?			0	
7c.	What percent of the projects included in 7b have been con	npleted ir	ı this report	ing peri	od?	
7d	. What percent of projects planned in previous years have b	een com	pleted?		<u></u> %	
			No	Projects	Planned	
8a.	Has your MS4/Coalition developed and implemented a tur procedures policy that addresses proper fertilizer applicat lands?			wned	● N/A	
<b>8</b> b	Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper disposal of grass of municipally owned lands?	f manag clippings	ement pract and leaves O Yes	ices and from O No	● N/A	

Name of MS4/Coalition Tioga County	SPDES ID	7
9. Has your MS4/Coalition developed and implemented a progra	am of native planting? ○ Yes ○ No ● N	I/A
10. Has your MS4/Coalition enacted a local law prohibiting pet w prohibiting goose feeding?	vaste on municipal properties ○ Yes ○ No ● N	
11. Does your MS4/Coalition have a pet waste bag program?	O Yes O No ● N	I/A
12. Does your MS4/Coalition have a program to manage goose populations?	○Yes ○No ●N	I/A