

# Stormwater Coalition of Albany County

## Joint Annual Report

SPDES General Permit for Stormwater Discharges  
from Municipal Separate Storm Sewer Systems (MS4s)  
Permit No. GP-0-10-002

### Reporting Period

March 10, 2013 to March 9, 2014

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### BACKGROUND

A requirement of all regulated “MS4” municipalities is the submission of an Annual Report to the New York State Department of Environmental Conservation (NYSDEC) due in FINAL form by June 1. As stated in SPDES General Permit No. GP-0-10-002, Part V. C. 2 and referenced in the MS4 Annual Report Form, “MS4s” may submit a Joint Annual Report provided they have a legally binding agreement with other regulated “MS4s”.

Each of the regulated “MS4s” included in this report are co-signatories of the necessary agreements, in particular the Stormwater Coalition of Albany County Inter-municipal Agreement, pursuant to Article 5-G of New York State General Municipal Law and other related contracts as described in the inter-municipal agreement.

The submission of a FINAL Joint Annual Report first involves the release of a DRAFT Joint Annual Report, followed by the collection of public comments, if any, to be incorporated into the FINAL Joint Annual Report and used to guide program implementation throughout the year. For this reporting period, neither the Coalition or individual MS4 members received public comments.

In general, the purpose of the MS4 Permit is to prevent stormwater pollution from entering our local waterways. Program activities include: public education; storm system mapping; outfall inspections; pollution track-down; local law adoption and enforcement; oversight of construction activity; green infrastructure implementation; facility audits; and staff training. To better understand Clean Water Act stormwater permit requirements, go to the NYSDEC website. To understand how local MS4/ municipalities are implementing these permits, go to the Stormwater Coalition website: [www.stormwateralbanycounty.org](http://www.stormwateralbanycounty.org)

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### STORMWATER PROGRAM COMMENTS WELCOME!

#### Here’s how:

1. Electronically using the Stormwater Coalition website “Public Comment” interface, [www.stormwateralbanycounty.org](http://www.stormwateralbanycounty.org).
2. By contacting the individuals listed as Public Contacts on the Coalition website (see Member pages) and in the Annual Report, MCC Form.
3. By e-mail, [swcoalition@albanycounty.com](mailto:swcoalition@albanycounty.com) or phone, 447-5645.

### OTHER INFORMATION

1. Hard copies of this Joint Annual Report are located at the Stormwater Coalition office, 112 State Street, Albany, NY 12207 and at local MS4/municipal offices (see Annual Report MCM 2 Page 4 of 6 pages for address information).
2. If you’d like to get involved, there are many ways you can help. Call 447-5645!

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### JOINT ANNUAL REPORT FORMAT

The Annual Report document is a form developed by NYSDEC and as such provides a data driven snapshot of program activities pertaining to individual member and collaborative Coalition activities. All Coalition members contributed to this report and they are listed below, along with their NYSDEC SPDES MS4 Permit No. This Joint Annual Report is a compilation of individual Annual Reports, with Coalition data inserted into each report. The order of presentation is organized numerically, by MS4 type.

#### Traditional Non Land Use Control MS4

1. Albany County (NYR20A359)

#### Non-Traditional MS4

2. University at Albany-SUNY (NYR20A234)

#### Traditional Land Use Control MS4s

3. City of Albany (NYR20A464)
4. Town of Bethlehem (NYR20A208)
5. City of Cohoes (NYR20A243)
6. Town of Colonie (NYR20A190)
7. Village of Colonie (NYR20A076)

8. Village of Green Island (NYR20A377)
9. Town of Guilderland (NYR20A211)
10. Village of Menands (NYR20A144)
11. Town of New Scotland (NYR20A463)
12. City of Watervliet (NYR20A087)





**MS4 Annual Report Cover Page**

**MCC form for period ending March 9,**

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

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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

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Name of MS4 

ALBANY COUNTY
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Each MS4 must submit an MCC form.

**Section 1 - MCC Identification Page**

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

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

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

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y
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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

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Name of MS4 

ALBANY COUNTY
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**Section 2 - Contact Information**

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name 

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**MS4 Municipal Compliance Certification (MCC) Form**

MCC form for period ending March 9, 2014

Name of MS4 ALBANY COUNTY

SPDES ID  
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**Section 3 - Partner Information**

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

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City

A l b a n y

State

N Y

Zip

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Phone

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

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

- MM1 E d u c a t i o n M a t e r i a l s & P r o g r a m s
- MM2 S W M P R e v i e w - W e b s i t e / P u b l i c I N p u t
- MM3 S t o r m S y s t e m M a p ' g - A I M S - O R I
- MM4 P r o c e d u r e s S u p p o r t
- MM5 G I M o d e l L o c a l L a w - G I T r a i n i n g
- MM6 T r a i n i n g S u p p o r t

Additional tasks/responsibilities

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

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4 ALBANY COUNTY

SPDES ID

N Y R 2 0 A 3 5 9

**Section 4 - Certification Statement**

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

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

First Name

D a n i e l

MI

P

Last Name

M c C o y

Title (Clearly print title of individual signing report)

C o u n t y E x e c u t i v e

Signature

*Daniel P. McCoy*

Date

5 / 23 / 2014

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

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





### MS4 Annual Report Form

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

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

Name of MS4/Coalition 

ALBANY COUNTY
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SPDES ID  

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

- Construction Site Operators Trained # Trained 

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- Direct Mailings # Mailings 

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- Kiosks or Other Displays # Locations 

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- List-Serves # In List 

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- Mailing List # In List 

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- Newspaper Ads or Articles # Days Run 

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- Public Events/Presentations # Attendees 

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- School Program # Attendees 

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- TV Spot/Program # Days Run 

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- Printed Materials: Total # Distributed 

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

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Other: 

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

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

ALBANY COUNTY

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**4. Evaluating Progress Toward Measurable Goals MCM 1**

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

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

County implements goals identified in the target audience analysis.  
County employee training meeting will be scheduled

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

Educational material was distributed to residents along 2 county roads within 500 ft. of Krumkill  
Meetings/presentation to County officials and Department reps on the permit history, requirements & compliance measures

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

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

Yes    No

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

Yes    No

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

Will progress goals of target audience analysis in Patroon Creek Watershed by March 9 2015.  
Establish goals for Ann Lee Pond watershed by May 2015.

Create educational displays for the County office building based on target audiences (staff, Legislature etc.) by March 2015



### MS4 Annual Report Form

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

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

Name of MS4/Coalition 

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

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| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>4</td><td>8</td></tr></table>   |   |   |   | 4 | 8 |
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| <input checked="" type="radio"/> Newspaper Ads or Articles           | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td>7</td></tr></table>    |   |   |   |   | 7 |
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| <input checked="" type="radio"/> Public Events/Presentations         | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>4</td><td>4</td><td>0</td></tr></table>  |   |   | 4 | 4 | 0 |
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| <input checked="" type="radio"/> School Program                      | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>1</td><td>6</td><td>1</td></tr></table>  |   |   | 1 | 6 | 1 |
|  |                     | 1   | 6 | 1 |   |   |   |
| <input type="radio"/> TV Spot/Program                                | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>     |   |   |   |   |   |
|  |                     |   |   |   |   |   |   |
| <input checked="" type="radio"/> Printed Materials:                  | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td></td><td>1</td><td>9</td><td>5</td><td>1</td></tr></table> |   | 1 | 9 | 5 | 1 |
|  | 1                   | 9   | 5 | 1 |   |   |   |

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

D	i	s	t	r	i	b	u	t	i	o	n	-							
G	I		T	o	u	r	-	S	c	h	o	o	l		P	r	o	g	-
E	a	r	t	h		D	a	y											

Other:

H	o	s	t		8		C	W	P		W	e	b	c	a	s	t	s	
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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

URL


**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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SPDES ID

N	Y	R	2	0					
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**4. 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.**

By 3/9/2014, using Target Audience Analysis Worksheet, members will update public education and outreach measurable goals, and provide for Coalition staff print orders for brochures and other educational material. Worksheet design and Coalition structure continues to facilitate inter-municipal, watershed based public education initiatives (For Coalition task schedule, see SWMP posted on website: BMP 1-1 Target Audience Analysis Wksheet & BMP 1-1 Publications)

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

Coalition members provided print orders and also developed new educational brochures (pet waste and commercial waste) better suited to geographic areas of concern and pollutants of concern identified in the Target Audience Analysis Worksheet. Identified target audiences included commercial businesses with dumpsters near/in watersheds with 303d impaired segments; property owners with septic systems; residents living on/near streams; pet owners (literature at animal shelter).

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

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

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

Yes  No

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

Yes  No

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

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.









**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

ALBANY COUNTY
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SPDES ID

N	Y	R	2	0	A	3	5	9
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**4.a. If this report was made available on the internet, what date was it posted?**

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

0	5
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0	2
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2	0	1	4
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**4.b. For how many days was/will this report be posted?**

1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

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

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

ALBANY COUNTY
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SPDES ID  

N	Y	R	2	0	A	3	5	9
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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.**

Clarify maintenance needs and responsible parties for Shaker rain garden

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

Re-stocked brochures at rain garden and signed a maintenance agreement with Soil and Water Conservation District to maintain the garden. An inspection and maintenance is scheduled for spring 2014.

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

			1
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(ex.: samples/participants/events)

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

Yes    No

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

Yes    No

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

Continue to monitor need for brochure restocking and maintenance needs of rain garden



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 2. URL(s) con't.:

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

URL

www.stormwateralbanycounty.org

URL

URL

URL

URL

URL

URL



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID									
N	Y	R	2	0					

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

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

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

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

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

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

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

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

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

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

			1
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(ex.: samples/participants/events)

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

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

ALBANY COUNTY
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SPDES ID

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

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

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

Map storm system and any new outfall locations to determine sewershed boundaries Conduct dry weather inspections of outfalls Train relevant employees on illicit discharge detection
--

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

Completed mapping of Kromma Kill sewershed, continued mapping of Patroon Creek sewershed, began mapping of Vly Creek sewershed.
---

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

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

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

Yes    No

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

Yes    No

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

Complete mapping of Vly Creek and Patroon Creek sewershed. May-October 2014 Provide illicit discharge and spill response educational material to 100% of relevant staff by 3/9/2014
--

Complete 100% of dry weather outfall inspections by 3/9/2015
--

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

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

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

Grid for other discharge types

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

Grid for number of discharges

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

Grid for number of confirmed discharges

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

Grid for number of eliminated discharges

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No

If No, approximately what percent was completed in this reporting period?

25%

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

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

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

URL

Grid containing URL: www.aimsgis.org/webmap/

URL

Grid for additional URLs

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**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.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

ALBANY COUNTY
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SPDES ID

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

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

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

How many MS4s contributed to this report? 

		1
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**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

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

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

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

		9
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**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

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

--	--	--

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

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

<input type="radio"/> Notices of Violation	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Stop Work Orders	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Criminal Actions	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Termination of Contracts	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Administrative Fines	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Civil Penalties	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Administrative Orders	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Enforcement Actions or Sanctions	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							
<input type="radio"/> Other	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input type="radio"/> No Authority

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

ALBANY COUNTY
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SPDES ID  

N	Y	R	2	0	A	3	5	9
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

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

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

How many MS4s contributed to this report? 

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

		1
--	--	---

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

		4
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3. What percent of active construction sites were inspected during this reporting period?  NT 

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

 %

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

1	0	0
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 %

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

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

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

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



**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

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

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

Documentation of contractors attending 4hr training

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

3 County employees and 49 local contractors attended 4hr erosion and sediment control training class

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

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

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

Yes    No

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

Yes    No

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

Update written directive to clarify current responsibilities and required documentation by December 2014.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

ALBANY COUNTY
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SPDES ID

N	Y	R	2	0	A	3	5	9
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes  No

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

Yes  No

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

Yes  No

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

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

	2	5
--	---	---

 %

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

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

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

County municipal officials and planning board members receive green infrastructure related training County Staff oversees installation of post construction practices to include implementing procedures outlined in environmental permits issued by NYS DEC related to Article 15 and Article 24.

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

Planning Board members and County Planner attended GI webcasts and trainings and municipal officials attended Green Infrastructure Bus Tour sponsored by Coalition.

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

		2	3
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

Green infrastructure training for 100% of County Planning Board members and relevant staff.

Complete 5 inventories of post construction practices.

Training for relevant staff on maintenance of of practices

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**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?**

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*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

ALBANY COUNTY
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SPDES ID  

N	Y	R	2	0	A	3	5	9
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

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

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

How many MS4s contributed to this report? 

		1
--	--	---

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

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
Street Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Bridge Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Other.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

ALBANY COUNTY
---------------

SPDES ID

N	Y	R	2	0	A	3	5	9
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**2. Provide the following information about municipal operations good housekeeping programs:**

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

				0
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

			4	3
--	--	--	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

			4	6
--	--	--	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

				4
--	--	--	--	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

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

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

					.	
--	--	--	--	--	---	--

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

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

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

0	2	/	1	2	/	2	0	1	4
---	---	---	---	---	---	---	---	---	---

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

	5	3
--	---	---

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

	2	0	%
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**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

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

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

Conduct 5 facility inventories and audits by 3/9/2015

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

Facility inventories completed at Department of Health Building and Times Union Center.

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

			2
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

Conduct 3 facility inventories/self-audits by 3/9/2015  
 Clean out 10% of catch basins by 3/9/2015  
 Sweep 100% of jurisdictional roadways 5 times  
 Training on best management practices for facility maintenance and illicit discharge detection will be given to Albany County Department of Health and Department of Public Works employees.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

University at Albany (SUNY Uptown Campus)
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SPDES ID

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

## Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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

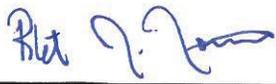




## Signature Authorization Form

Permittee Name University ay Albany SPDES NO. NYR20A

Facility Name University at Albany Date April 5, 2013

Name of person described in paragraph (1): Robert Jones	Title: President 
Signature of person described in paragraph (1):	Date: 4-19-13

**THE PERMITTEE MUST NOTIFY THE DEPARTMENT OF ANY CHANGE IN THIS INFORMATION. THIS FORM SHOULD ONLY BE SENT IN WITH THE ANNUAL REPORT.**

Name and/or Title of person responsible for signing and submitting MS4 Annual Report: Director of Campus Planning	Phone: (518-442-3400)		
Mailing Name: Errol Millington			
Mailing Address: 1400 Washington Ave. Building 25	City: Albany	State: NY	Zip: 12222

Return To: MS4 Coordinator  
Bureau of Water Permits  
New York State Department of Environmental Conservation  
625 Broadway  
Albany, NY 12233-3505

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

University at Albany (SUNY Uptown Campus)
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SPDES ID  

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

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name 

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 Last Name 

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Title 

C	a	m	p	u	s		P	l	a	n	n	e	r	/	S	W	M	P		C	o	o	r	d	i	n	a	t	o	r						
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Address 

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City 

A	l	b	a	n	y																																	
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 State 

N	Y
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 Zip 

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eMail 

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Phone 

(	5	1	8	)		4	4	2	-	3	4	0	0
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 County 

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

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID  
N Y R 2 0 A 2 3 4

**Section 3 - Partner Information**

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 1 2 S t a t e S t . , R o o m 7 2 0

City

A l b a n y

State

N Y

Zip

1 2 2 0 7 -

eMail

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

Phone

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

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

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

- MM1 E d u c a t i o n M a t e r i a l & P r o g r a m s
- MM2 S W M P R e v i e w - W e b s i t e / P u b l i c I n p u t
- MM3 S t o r m S y s t e m M a p ' g - A I M S - O R I
- MM4 P r o c e d u r e s S u p p o r t
- MM5 G I M o d e l L o c a l L a w - G I T r a i n i n g
- MM6 T r a i n i n g S u p p o r t

Additional tasks/responsibilities

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

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID

**Section 4 - Certification Statement**

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

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

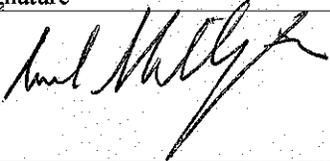
First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature



Date

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

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





### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

University at Albany (SUNY Uptown Campus)
---

SPDES ID  

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

- Construction Site Operators Trained # Trained 

--	--	--	--	--
- Direct Mailings # Mailings 

--	--	--	--	--
- Kiosks or Other Displays # Locations 

				3
--	--	--	--	---
- List-Serves # In List 

--	--	--	--	--
- Mailing List # In List 

--	--	--	--	--
- Newspaper Ads or Articles # Days Run 

--	--	--	--	--
- Public Events/Presentations # Attendees 

		3	0
--	--	---	---
- School Program # Attendees 

--	--	--	--
- TV Spot/Program # Days Run 

--	--	--	--	--
- Printed Materials: Total # Distributed 

--	--	--	--	--

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

O	f	f	i	c	e		o	f		C	a	m	p	u	s		-		
P	l	a	n	n	i	n	g		D	i	s	p	l	a	y				
I	n	d	i	a	n		P	o	n	d		-							
E	d	u	c	a	t	i	o	n		S	i	g	n	s					

Other:

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

URL  

w	w	w	.	a	l	b	a	n	y	.	e	d	u	/	f	a	c	i	l	i	t	i	e	s	/	c	a	m	p	u	s
p	l	a	n	n	i	n	g	/	s	t	o	r	m	w	a	t	e	r													

URL  




**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

University at Albany (SUNY Uptown Campus)
---

SPDES ID

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

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

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

- |  |
|--|
| <ol style="list-style-type: none"> <li>1) Review of procedures for application of pesticides and herbicides, obtain educational material.</li> <li>2) Provide educational information on the website of impacts from discharges into storm sewer system.</li> <li>3) Provide educational material on website of bacterial impacts of wildlife and measures the campus is taking to prevent these impacts.</li> </ol> |
|--|

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

- |   |
|---|
| <ol style="list-style-type: none"> <li>1) There has been some review of procedures for application of pesticides and herbicides. These reviews have assisted the grounds dept. to minimize applications where possible.</li> <li>2) Educational material has been placed on the campus website and have proven effective and it is noticeable on the campus.</li> <li>3) Tour of campus green infrastructure at Liberty Terrace.</li> </ol> |
|---|

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

			2
--	--	--	---

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

Yes    No

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

Yes    No

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

- |   |
|---|
| <ol style="list-style-type: none"> <li>1) Provide educational information on the website of impacts from discharges into storm sewer system.</li> <li>2) Continued review of application procedures for pesticides and herbicides.</li> </ol> |
|---|



### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																			
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SPDES ID  

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

- |  |                     |   |   |   |   |   |   |
|--|---------------------|---|---|---|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>4</td><td>8</td></tr></table>   |   |   |   | 4 | 8 |
|  |                     |   | 4 | 8 |   |   |   |
| <input type="radio"/> Direct Mailings                                | # Mailings          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>     |   |   |   |   |   |
|  |                     |   |   |   |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays            | # Locations         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>1</td><td>0</td></tr></table>   |   |   |   | 1 | 0 |
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| <input checked="" type="radio"/> List-Serves                         | # In List           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>4</td><td>7</td><td>9</td></tr></table>  |   |   | 4 | 7 | 9 |
|  |                     | 4   | 7 | 9 |   |   |   |
| <input type="radio"/> Mailing List                                   | # In List           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>     |   |   |   |   |   |
|  |                     |   |   |   |   |   |   |
| <input checked="" type="radio"/> Newspaper Ads or Articles           | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td>7</td></tr></table>    |   |   |   |   | 7 |
|  |                     |   |   | 7 |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations         | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>4</td><td>4</td><td>0</td></tr></table>  |   |   | 4 | 4 | 0 |
|  |                     | 4   | 4 | 0 |   |   |   |
| <input checked="" type="radio"/> School Program                      | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>1</td><td>6</td><td>1</td></tr></table>  |   |   | 1 | 6 | 1 |
|  |                     | 1   | 6 | 1 |   |   |   |
| <input type="radio"/> TV Spot/Program                                | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>     |   |   |   |   |   |
|  |                     |   |   |   |   |   |   |
| <input checked="" type="radio"/> Printed Materials:                  | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td></td><td>1</td><td>9</td><td>5</td><td>1</td></tr></table> |   | 1 | 9 | 5 | 1 |
|  | 1                   | 9   | 5 | 1 |   |   |   |

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

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Other:

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

URL

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URL


**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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SPDES ID

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**4. Evaluating Progress Toward Measurable Goals MCM 1**

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

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

By 3/9/2014, using Target Audience Analysis Worksheet, members will update public education and outreach measurable goals, and provide for Coalition staff print orders for brochures and other educational material. Worksheet design and Coalition structure continues to facilitate inter-municipal, watershed based public education initiatives (For Coalition task schedule, see SWMP posted on website: BMP 1-1 Target Audience Analysis Wksheet & BMP 1-1 Publications)

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

Coalition members provided print orders and also developed new educational brochures (pet waste and commercial waste) better suited to geographic areas of concern and pollutants of concern identified in the Target Audience Analysis Worksheet. Identified target audiences included commercial businesses with dumpsters near/in watersheds with 303d impaired segments; property owners with septic systems; residents living on/near streams; pet owners (literature at animal shelter).

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

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

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

Yes  No

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

Yes  No

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

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.



### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

University at Albany (SUNY Uptown Campus)
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SPDES ID  

N	Y	R	2	0	A	2	3	4
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#### 2. URL(s) con't.:

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

URL

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URL


URL


URL


URL






**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

University at Albany (SUNY Uptown Campus)																																							
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SPDES ID

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

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

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0	5
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2	0	1	4
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**4.b. For how many days was/will this report be posted?**

1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

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

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

University at Albany (SUNY Uptown Campus)
---

SPDES ID

N	Y	R	2	0	A	2	3	4
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**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.**

Update organization chart and public contact information, prepare a more individual annual report for submission by the Coalition, contribute towards any updates to the SWMP prepared by the Coalition, update hotline information for any pollution impacts to the storm system, cleanup of campus for materials that could impact the performance of the storm system or cause pollution, maintain rain garden, work with Coalition for student involvement in programs and projects.

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

The chart update assists the campus community in knowing the structure of for stormwater management. The Annual Report, although submitted jointly with the coalition, makes it more clear as to the University's policy. Cleanup of the campus aids in the prevention of stormwater pollution and beautifies the campus.

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

			3
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

- 1) Plan more selective cleanups on the campus that focus more on problem areas.
- 2) Development programs or functions that can better involve the campus community and provide awareness of the importance of stormwater management.







**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID									
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**4.a. If this report was made available on the internet, what date was it posted?**

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

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

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

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

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

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

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

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

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

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

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

			1
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(ex.: samples/participants/events)

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

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

University at Albany (SUNY Uptown Campus)
---

SPDES ID

N	Y	R	2	0	A	2	3	4
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**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.**

New facilities when completed will be located and placed on the GIS system. Any new outfalls will be tested in accordance with previous ORI procedures. Obtain written directive from person authorized to sign NOI by 3/9/2015. Assemble 5 annual documents for IDDE by 3/2015. Provide IDDE education material to staff and spill preventative training by 3/2015.
--

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

Some staff have received IDDE training. This training was informative to the staff and helps make them more aware of what to look for in identifying IDDE occurrences.
--

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

			1
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

New facilities when completed will be located and placed on the GIS system. One is anticipated. Any new outfalls will be tested in accordance with previous ORI procedures. Two are anticipated Obtain written directive from person authorized to sign NOI by 3/9/2015. Assemble 5 annual documents for IDDE by 3/2015. Continue to provide IDDE education material to staff and spill preventative training by 3/2015.
--

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

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

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

Grid for other discharge types

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

Grid for number of discharges

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

Grid for number of confirmed discharges

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

Grid for number of eliminated discharges

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No

If No, approximately what percent was completed in this reporting period?

25%

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

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

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

URL

Grid containing URL: www.aimsgis.org/webmap/

URL

Grid for additional URLs

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**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.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

University at Albany (SUNY Uptown Campus)
---

SPDES ID

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

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

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

How many MS4s contributed to this report? 

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**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

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

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

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

		5
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**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

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

--	--	--

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

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

<input type="radio"/> Notices of Violation	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Stop Work Orders	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Criminal Actions	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Termination of Contracts	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input type="radio"/> No Authority
<input type="radio"/> Administrative Fines	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Civil Penalties	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Administrative Orders	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input checked="" type="radio"/> No Authority
<input type="radio"/> Enforcement Actions or Sanctions	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							
<input type="radio"/> Other	#	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							<input type="radio"/> No Authority

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

University at Albany (SUNY Uptown Campus)
---

SPDES ID  

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

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

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

How many MS4s contributed to this report? 

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

		5
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2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		7
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3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
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 %

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

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

 %

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

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

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

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

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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

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

SPDES ID  
N Y R 2 0 A 2 3 4

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

C a m p u s P l a n n i n g

Address

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

City

A l b a n y

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Zip

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Phone

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Library

Address

City

Zip

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Phone

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Other

Address

City

Zip

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Phone

( ) -

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

URL

URL

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

University at Albany (SUNY Uptown Campus)
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SPDES ID

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

Adoption of stormwater management activities and review procedures and coordination for SWPPP. Continue inspection of projects currently under construction and those that will start. Provide information to contractors at pre-construction meetings on requirements. Obtain written directive from person authorized to sign NOI. Document complaint procedures and post on website. Promote 4-hour training course to site contractors.
---

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

Stormwater policies and SWPPP procedures have been developed and are currently under review for adoption. Information on construction requirements are given to the contractors at pre-construction meetings and have been effective. Contractors have followed the requirements more readily. Obtaining the written directive and promoting 4 hour training courses have not been completed but are on tract for this coming reporting year.
---

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

			5
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Obtain written directive from person authorized to sign NOI. Develop complaint procedures and post on website. Promote 4-hour training course to site contractors.
--

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**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?**

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*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

University at Albany (SUNY Uptown Campus)
---

SPDES ID  

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

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

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

How many MS4s contributed to this report? 

--	--	--

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

	# Inventoried	# Inspections	# Times Maintained									
<input checked="" type="radio"/> Alternative Practices	<table border="1"><tr><td> </td><td>1</td><td>5</td></tr></table>		1	5	<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
	1	5										
		1										
<input type="radio"/> Filter Systems	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
<input checked="" type="radio"/> Infiltration Basins	<table border="1"><tr><td> </td><td> </td><td>6</td></tr></table>			6	<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1	<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1
		6										
		1										
		1										
<input checked="" type="radio"/> Open Channels	<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
		1										
<input checked="" type="radio"/> Ponds	<table border="1"><tr><td> </td><td> </td><td>8</td></tr></table>			8	<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1	<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1
		8										
		1										
		1										
<input type="radio"/> Wetlands	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
<input checked="" type="radio"/> Other	<table border="1"><tr><td> </td><td> </td><td>4</td></tr></table>			4	<table border="1"><tr><td> </td><td> </td><td>3</td></tr></table>			3	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
		4										
		3										

**2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?**  Yes    No

**3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?**

- Building Codes
- Municipal Comprehensive Plans
- Overlay Districts
- Open Space Preservation Program
- Zoning
- Local Law or Ordinance
- None
- Land Use Regulation/Zoning
- Watershed Plans
- Other Comprehensive Plan

Other:

U n i v e r s i t y   P o l i c y

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

University at Albany (SUNY Uptown Campus)																																							
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SPDES ID

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

Yes  No

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

Yes  No

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

Yes  No

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

		2
--	--	---

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

	5	0
--	---	---

 %

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

University at Albany (SUNY Uptown Campus)
---

SPDES ID

N	Y	R	2	0	A	2	3	4
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**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.**

Obtain written directive from the person authorized to sign the NOI by 3/2014. Perform annual inventory of post-construction practices by 3/2014. Perform inspections of all post-construction practices and maintenance information as required by 3/2014. Provide green infrastructure scorecard to Coalition.
---

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

An inventory of current post-construction practices was completed during this report period. Although some of the systems were observed, a more accountable method is being developed for procedures and recording of inspections is needed.
--

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

			3
--	--	--	---

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

Yes    No

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

Yes    No

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

Provide green infrastructure scorecard to Coalition. Obtain written directive from the person authorized to sign the NOI by 3/2015. Perform annual inventory of post-construction practices. Perform inspections on post-construction practices. Develop more detailed inspection schedule and recording method procedures.
---

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

University at Albany (SUNY Uptown Campus)
---

SPDES ID  

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

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

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

How many MS4s contributed to this report? 

--	--	--

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

<u>Operation/Activity/Facility</u>	<u>Self-Assessment</u> <u>Operation/Activity/Facility</u> <u>performed within the past 3</u> <u>years?</u>			
	<u>Addressed in SWMP?</u>			
Street Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Bridge Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
New Municipal Construction and Land Disturbance..	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Right of Way Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Parks and Open Space.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Municipal Building.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Other.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

University at Albany (SUNY Uptown Campus)
---

SPDES ID

N	Y	R	2	0	A	2	3	4
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**2. Provide the following information about municipal operations good housekeeping programs:**

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

			5	9
--	--	--	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

			7	8
--	--	--	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		5	5	0
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

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

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

	1	5	6	0
--	---	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

		7	7	.	6
--	--	---	---	---	---

**3. How many stormwater management trainings have been provided to municipal employees 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?**

		0
--	--	---

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

		0	%
--	--	---	---

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

University at Albany (SUNY Uptown Campus)
---

SPDES ID

N	Y	R	2	0	A	2	3	4
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**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.**

Complete update of facilities. Inspect and clean 100% of catch basins by 3/2015. Sweep 100% of roads 24 times by 3/2015. Keep data of road salt usage. Update chemical applications to lawns by 3/2015, and keep record data of use. Continue staff training. Review status of green infrastructure upgrades.
---

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

Post-construction facilities inventory have been updated as they come online which has assisted maintenance staff. The catch basin cleaning program has progressed. Monitoring of chemical applications has helped to minimize use.
---

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

			3
--	--	--	---

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

Continue schedule for catch basin cleaning. Sweep all roads and parking lots at least once during year. Continue staff training
---

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

City of Albany
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SPDES ID

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

**Section 1 - MCC Identification Page**

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

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

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

If Joint Report, enter coalition name:

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

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID  
N Y R 2 0 A 4 6 4

**Section 2 - Contact Information**

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name  MI  Last Name

Title

Address

City  State  Zip

eMail

Phone  County

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID  
N Y R 2 0 A 4 6 4

**Section 2 - Contact Information**

Important Instructions - Please Read

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

For each contact, select all that apply:

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

First Name  MI  Last Name

Title

Address

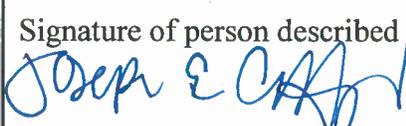
City  State  Zip

eMail

Phone  County

## Signature Authorization Form

Permittee Name City of Albany SPDES NO. NYR20A464  
Facility Name Dept. of Water & Water Supply Date: 05/01/14

Name of person described in paragraph (1): Joseph E. Coffey, Jr., P.E.	Title: Commissioner
Signature of person described in paragraph (1): 	Date: 05/01/14

**THE PERMITTEE MUST NOTIFY THE DEPARTMENT OF ANY CHANGE IN THIS INFORMATION. THIS FORM SHOULD ONLY BE SENT IN WITH THE ANNUAL REPORT.**

Name and/or Title of person responsible for signing and submitting MS4 Annual Report: William D. Simcoe, P.E., Deputy Commissioner	Phone: ( 518-434-5302 )		
Signature (if individual named above): 			
Mailing Address: 10 North Enterprise Drive,	City: Albany	State: NY	Zip: 12204

Return To: MS4 Coordinator  
Bureau of Water Permits  
New York State Department of Environmental Conservation  
625 Broadway  
Albany, NY 12233-3505

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4 City of Albany

SPDES ID

N Y R 2 0 A 4 6 4

**Section 2 - Contact Information****Important Instructions - Please Read**Contact information must be provided for *each* of the following positions as indicated below:

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

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

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

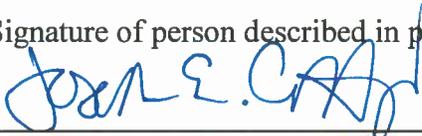
For each contact, select all that apply:

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

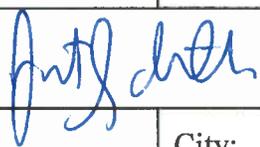
First Name	MI	Last Name
J u s t i n		S c h i e v e l b e i n
Title		
S e w e r F o r e m a n		
Address		
1 0 N o r t h E n t e r p r i s e D r i v e		
City	State	Zip
A l b a n y	N Y	1 2 2 0 4 -
eMail		
s c h i e v e l b e i n j @ c i . a l b a n y . n y . u s		
Phone	County	
( 5 1 8 ) 4 3 4 - 5 3 0 0	A l b a n y	

## Signature Authorization Form

Permittee Name City of Albany SPDES NO. NYR20A464  
Facility Name Dept. of Water & Water Supply Date: 05/01/14

Name of person described in paragraph (1): Joseph E. Coffey, Jr., P.E.	Title: Commissioner
Signature of person described in paragraph (1): 	Date: 05/01/14

**THE PERMITTEE MUST NOTIFY THE DEPARTMENT OF ANY CHANGE IN THIS INFORMATION. THIS FORM SHOULD ONLY BE SENT IN WITH THE ANNUAL REPORT.**

Name and/or Title of person responsible for signing and submitting MS4 Annual Report: Justin Schievelbein, Water & Sewer Foreman	Phone: ( 518-434-5304 )		
Signature (if individual named above): 			
Mailing Address: 10 North Enterprise Drive,	City: Albany	State: NY	Zip: 12204

Return To: MS4 Coordinator  
Bureau of Water Permits  
New York State Department of Environmental Conservation  
625 Broadway  
Albany, NY 12233-3505



## Signature Authorization Form

Permittee Name City of Albany SPDES NO. NYR20A464  
Facility Name Dept. of Water & Water Supply Date: 05/01/14

Name of person described in paragraph (1): Joseph E. Coffey, Jr., P.E.	Title: Commissioner
Signature of person described in paragraph (1): 	Date: 05/01/14

**THE PERMITTEE MUST NOTIFY THE DEPARTMENT OF ANY CHANGE IN THIS INFORMATION. THIS FORM SHOULD ONLY BE SENT IN WITH THE ANNUAL REPORT.**

Name and/or Title of person responsible for signing and submitting MS4 Annual Report: Maryella Davenport, Junior Engineer	Phone: ( 518-434-5104 )		
Signature (if individual named above): 			
Mailing Address: 10 North Enterprise Drive,	City: Albany	State: NY	Zip: 12204

Return To: MS4 Coordinator  
Bureau of Water Permits  
New York State Department of Environmental Conservation  
625 Broadway  
Albany, NY 12233-3505



**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID  
N Y R 2 0 A 4 6 4

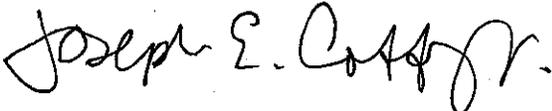
**Section 4 - Certification Statement**

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

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

First Name  MI  Last Name

Title (Clearly print title of individual signing report)

Signature  


Date

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

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





### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Albany
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SPDES ID  

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

- |  |                     |  |   |   |   |   |   |
|--|---------------------|--|---|---|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained           | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">4</td></tr></table>   |   |   |   |   | 4 |
|  |                     |  |   | 4 |   |   |   |
| <input type="radio"/> Direct Mailings                                | # Mailings          | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays            | # Locations         | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">2</td></tr></table>   |   |   |   |   | 2 |
|  |                     |  |   | 2 |   |   |   |
| <input checked="" type="radio"/> List-Serves                         | # In List           | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">6</td><td style="width: 20px; height: 20px; text-align: center;">1</td><td style="width: 20px; height: 20px;"></td></tr></table>                      |   |   | 6 | 1 |   |
|  |                     | 6  | 1 |   |   |   |   |
| <input type="radio"/> Mailing List                                   | # In List           | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Newspaper Ads or Articles                      | # Days Run          | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations         | # Attendees         | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">4</td><td style="width: 20px; height: 20px; text-align: center;">5</td><td style="width: 20px; height: 20px;"></td></tr></table>                      |   |   | 4 | 5 |   |
|  |                     | 4  | 5 |   |   |   |   |
| <input checked="" type="radio"/> School Program                      | # Attendees         | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">2</td><td style="width: 20px; height: 20px; text-align: center;">5</td><td style="width: 20px; height: 20px;"></td></tr></table>                      |   |   | 2 | 5 |   |
|  |                     | 2  | 5 |   |   |   |   |
| <input type="radio"/> TV Spot/Program                                | # Days Run          | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>  |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Printed Materials:                  | Total # Distributed | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">4</td><td style="width: 20px; height: 20px; text-align: center;">5</td><td style="width: 20px; height: 20px; text-align: center;">3</td><td style="width: 20px; height: 20px;"></td></tr></table> |   | 4 | 5 | 3 |   |
|  | 4                   | 5  | 3 |   |   |   |   |

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

P	a	t	r	o	o	n	/	C	r	e	e	k		A	r	e	a			
S	c	h	o	o	l	/	P	u	b	l	i	c	P	r	o	g	r	a	m	
C	i	t	y		o	f		A	l	b	a	n	y		W	a	t	e	r	
D	e	p	a	r	t	m	e	n	t											

Other:

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

URL

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URL

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

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

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

1.) The City of Albany and MS4's in Shared Watershed group will work at developing and acquiring resources including educational materials for measurable goals established (example develop new brochure focusing on dumpsters). 2.) The group will schedule and coordinate field reconnaissance and educational materials distribution over the next 6 to 8 months. Identify 3.) Contacts and meet with State MS4's in the Shared Watersheds

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

1. Developed additional educational materials, i.e. Dumpster Brochure  
2. Group conducted multiple meeting and established areas of distribution for each municipality within the watershed, identified appropriate education materials according to proximity to water body and pollutants of concern.  
3. Distributed resources/education materials to residences and businesses in areas identified above.

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

			3
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes    No

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

Yes    No

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

1.) Identify common pollutant of concerns across all City water bodies for broader/mass audience education.  
2.) Identify and develop as necessary additional educational materials & resources for mass distribution/media.  
3.) Identify 4 City wide activities/dates for education materials distribution and education programs.





**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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SPDES ID

N	Y	R	2	0					
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**4. 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.**

By 3/9/2014, using Target Audience Analysis Worksheet, members will update public education and outreach measurable goals, and provide for Coalition staff print orders for brochures and other educational material. Worksheet design and Coalition structure continues to facilitate inter-municipal, watershed based public education initiatives (For Coalition task schedule, see SWMP posted on website: BMP 1-1 Target Audience Analysis Wksheet & BMP 1-1 Publications)

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

Coalition members provided print orders and also developed new educational brochures (pet waste and commercial waste) better suited to geographic areas of concern and pollutants of concern identified in the Target Audience Analysis Worksheet. Identified target audiences included commercial businesses with dumpsters near/in watersheds with 303d impaired segments; property owners with septic systems; residents living on/near streams; pet owners (literature at animal shelter).

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

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

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

Yes  No

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

Yes  No

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

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.









**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID  

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

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

0	5	/	0	2	/	2	0	1	4
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**4.b. For how many days was/will this report be posted?**

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

City of Albany

SPDES ID

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

Continue work on the SWMP, continue on education, grant writing and acceptance of GI Projects in the City of Albany, coordinate and conduct meetings with universities, school groups, and other volunteer groups for participation in GI projects, activities, and monitoring.

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

1.) Continued work on the SWMP and continue to review and update SWMP.  
2.) Advanced GI projects, continue to involve public by speaking at multiple public meetings and boards including Neighborhood Associations to develop residential input in GI designs and volunteer maintenance of rain gardens, 3.) Continued participation and support with Buckingham Pond Conservancy and support grant activities by Conservancy.

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

			3
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

1.) Coordinate and conducted one meeting with universities, student environmental groups, school groups, and other volunteer organizations for input on design of Quail Street Project.  
2.) Continue with SWMP work and update as necessary. 3.) Coordinate and conducted one meeting/training with residents and other volunteers for development of signage to be included in North Swan Street Park and park GI maintenance education.







**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID  

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

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

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

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**  Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

 Yes  No
**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**  Yes  No

If No, is one planned for each?

 Yes  No
**6. Were comments received during this reporting period?**  Yes  No

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

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

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

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

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

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

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

			1
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(ex.: samples/participants/events)

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

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

City of Albany
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SPDES ID  

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

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

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

1. Utilizing the Stormwater Coalition and in house materials continue to provide training and information on Spill prevention (Spills and Skills Video) and Illicit discharge (stormwatch and/or IDDE videos) materials to department staff. 2. Continue to perform, update and enhance ORI field work, mapping and documentation. 3. Read educational/reference materials for staff and update forms related to IDDE program.

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

1. Continued to utilize Coalition training materials, used new materials "After the Rain"  
 2. Dedicate time to staffing training for ORI screening.  
 3. Time needed to train staff and perform ORI screenings prevented review of Coalition materials and EPA reference guidance materials for use in field. Unable to develop additional forms and procedures.

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

			1
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(ex.: samples/participants/events)

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

Yes     No

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

Yes     No

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

1. Continue to perform in-house training with " Rain Check".  
 2. Due to nearly complete turnover of administration and ORI staffing perform additional staff training and ORI screening.  
 3. Advance department forms and procedures in conformance with EPA IDDE Guidance Manual in the next year.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

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

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

Grid for other discharge types

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

Grid for number of discharges

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

Grid for number of confirmed discharges

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

Grid for number of eliminated discharges

#### 7. Has the storm sewershed mapping been completed in this reporting period?

Yes  No

If No, approximately what percent was completed in this reporting period?

25%

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

Yes  No

Is this information available on the web?

Yes  No

If Yes, provide URL(s):

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

URL

Grid containing URL: www.aimsgis.org/webmap/

URL

Grid for additional URL information

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

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

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

None previously.

**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?**

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*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Albany
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SPDES ID

N	Y	R	2	0	A	4	6	4
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

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

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

How many MS4s contributed to this report? 

--	--	--

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

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

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

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

		8
--	--	---

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

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

		0
--	--	---

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

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

- Notices of Violation # 

					2
--	--	--	--	--	---

 ○ No Authority
- Stop Work Orders # 

					2
--	--	--	--	--	---

 ○ No Authority
- Criminal Actions # 

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

 ● No Authority
- Termination of Contracts # 

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

 ● No Authority
- Administrative Fines # 

					0
--	--	--	--	--	---

 ○ No Authority
- Civil Penalties # 

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

 ● No Authority
- Administrative Orders # 

					0
--	--	--	--	--	---

 ○ No Authority
- Enforcement Actions or Sanctions # 

					0
--	--	--	--	--	---

 ○ No Authority
- Other # 

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

 ○ No Authority

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
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**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? 

		3
--	--	---

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

		7
--	--	---

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

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

 %

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

		0
--	--	---

 %

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

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

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

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



**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Albany
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SPDES ID

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

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

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

1. Continue to evaluate the need for training of additional department staff in State and local E and S Control to increase awareness of field staff conducting other routine inspections.
2. Continue to evaluate documents and update documentation forms for SWPPP reviews for erosion and sediment controls.
3. Evaluate the need to create, promote and post construction activity procedures reference material.

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

1. More Department staff bring issues or conditions noticed to Engineering Department, increased coordination with DGS inspection staff.

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

			1
--	--	--	---

*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

1. Develop additional reference materials on E&SC.
2. Continue to update documentation of SWPPP Reviews and Forms.
3. Look at posting reference materials procedures and receiving comments on effectiveness.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Albany
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SPDES ID  

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

Yes  No

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

Yes  No

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

Yes  No

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

--	--	--

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

	7	5
--	---	---

 %

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Albany

SPDES ID

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

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

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

1. Close gaps in communication, and procedures, document new procedures over the next 12 months.
2. Identify at least 5 major resources needed for inventory and maintenance of post-construction controls (ie staffing, mapping, software, etc.)

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

1. Evaluation identified need for software licenses and training is required to build and maintain mapping and documentation. Purchased a second "shared" license, however does not work as planned, frequently two staff needing access need to be on at same time.
2. Additional staffing or reassignment of responsibilities was reviewed.
3. Determined that additional hardware/equipment is needed.

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

			1
--	--	--	---

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

Yes    No

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

Yes    No

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

1. Purchase separate license for GIS software.
2. Provide additional GIS training to staff.
3. Evaluate possibility of additional Trimble unit/ pads for electronic recording of field work.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  

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

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

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

How many MS4s contributed to this report? 

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

<u>Operation/Activity/Facility</u>	<u>Self-Assessment</u> <u>Operation/Activity/Facility</u> <u>performed within the past 3</u>			
	<u>Addressed in SWMP?</u>		<u>years?</u>	
Street Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Bridge Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Other.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No

### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Albany
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SPDES ID  

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

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

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

2	3	3	7	4
---	---	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		1	9	8
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

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

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

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

					.	
--	--	--	--	--	---	--

  
 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

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

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

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

1	0
---	---

 / 

3	0
---	---

 / 

2	0	1	3
---	---	---	---

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

	6	6
--	---	---

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

	5	0
--	---	---

 %

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Albany

SPDES ID

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

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

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

1. Produce documents and spreadsheets to assist in tracking and conducting inventory.
2. Assign Engineering staffing to research and populate inventory database.
3. Prioritize city departments and strive to inventory departments with the most responsibilities for streets, bridge, public buildings, and parks for inventory of fixed facilities and/or operations

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

1. Inventory of City Departments Facilities was developed, still adding facilities.
2. Some mapping, documentation, records developed.

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

			1
--	--	--	---

*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

1. Update mapping of facilities and locations based on Combined Sewer System /Separate Storm System.
2. Audit 20% of the City Facilities in the Separate Storm System.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).





**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID  
N Y R 2 0 A 2 0 8

**Section 2 - Contact Information**

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name  MI  Last Name

Title

Address

City  State  Zip

eMail

Phone  County





**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID  
N Y R 2 0 A 2 0 8

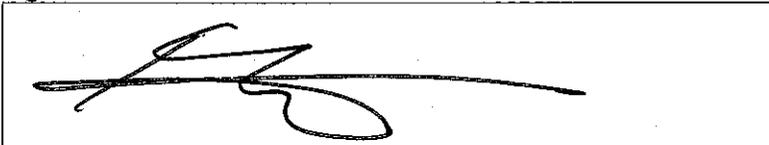
**Section 4 - Certification Statement**

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

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

First Name  MI  Last Name

Title (Clearly print title of individual signing report)

Signature  


Date

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

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









**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Bethlehem
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SPDES ID

N	Y	R	2	0	A	2	0	8
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**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.**

Incorporate target audience and POC maps into Town website, allowing users to view specific geographic areas throughout Town.
---

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

Town website was just upgraded and GIS overhauled delaying progress of measurable goal completion. Currently in process of coordinating with GIS on developing maps for placement on both Town website and new bulletin board display.
--

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

			2
--	--	--	---

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

Continue coordination efforts with Coalition to develop program for implementing public presentation program. Start development of program by end of 2014 calendar year.
--





**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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SPDES ID

N	Y	R	2	0					
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**4. 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.**

By 3/9/2014, using Target Audience Analysis Worksheet, members will update public education and outreach measurable goals, and provide for Coalition staff print orders for brochures and other educational material. Worksheet design and Coalition structure continues to facilitate inter-municipal, watershed based public education initiatives (For Coalition task schedule, see SWMP posted on website: BMP 1-1 Target Audience Analysis Wksheet & BMP 1-1 Publications)

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

Coalition members provided print orders and also developed new educational brochures (pet waste and commercial waste) better suited to geographic areas of concern and pollutants of concern identified in the Target Audience Analysis Worksheet. Identified target audiences included commercial businesses with dumpsters near/in watersheds with 303d impaired segments; property owners with septic systems; residents living on/near streams; pet owners (literature at animal shelter).

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

Yes  No

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

Yes  No

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

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of Bethlehem
-------------------

SPDES ID  

N	Y	R	2	0	A	2	0	8
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**Minimum Control Measure 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? 

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

- Cleanup Events # Events 

				4
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- Comments on SWMP Received # Comments 

--	--	--	--	--
- Community Hotlines Phone # ( 

5	1	8
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4	3	9
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4	9	5	5
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- Phone # ( 

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Phone # ( 

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Phone # ( 

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- Phone # ( 

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Phone # ( 

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- Community Meetings # Attendees 

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- Plantings Sq. Ft. 

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- Storm Drain Markings # Drains 

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- Stakeholder Meetings # Attendees 

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- Volunteer Monitoring # Events 

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- Other: 

K	r	u	m	k	i	l	l		L	i	t	e	r	a	t	u	r	e		D	r	o	p	o	f	f			
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**2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?  Yes  No**

- List-Serve # In List 

--	--	--	--	--
- Newspaper Advertising # Days Run 

--	--	--	--	--
- TV/Radio Notices # Days Run 

--	--	--	--	--
- Other: 

P	o	s	t	e	d		o	n		T	o	w	n		H	a	l	l		B	u	l	l	e	t	i	n			
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Web Page URL: Enter URL(s) on the following two pages.







**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition <table border="1" style="display: inline-table;"><tr><td>Town of Bethlehem</td></tr></table>	Town of Bethlehem	SPDES ID <table border="1" style="display: inline-table;"><tr><td>N</td><td>Y</td><td>R</td><td>2</td><td>0</td><td></td><td></td><td></td><td></td></tr></table>	N	Y	R	2	0				
Town of Bethlehem											
N	Y	R	2	0							

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

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

0	5	/	0	2	/	2	0	1	4
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**4.b. For how many days was/will this report be posted?**

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes  No

If Yes, what was the date of the meeting?

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

If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

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

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Bethlehem

SPDES ID

N	Y	R	2	0	A	2	0	8
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**7. Evaluating Progress Toward Measurable Goals MCM 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.**

Complaint procedures will be reviewed and adapted to help integrate a better tracking mechanism

Town will attempt to coordinate community clean up events

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

New complaint management system has been implemented allowing complainants and Town staff to track progress of complaint and see when issued has been addressed and closed out.

Town performed four (4) community clean up events

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

			4
--	--	--	---

*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

Town will attempt to place twenty (20) new stormdrain markers in areas of concern.

Town will attempt to continue to implement community clean up events.







**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID  

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

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

0	5	/	0	2	/	2	0	1	4
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**4.b. For how many days was/will this report be posted?**

	1	4
--	---	---

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

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

Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

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

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

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

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

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

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

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

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

			1
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(ex.: samples/participants/events)

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

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of Bethlehem
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SPDES ID  

N	Y	R	2	0	A	2	0	8
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**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.**

Town attempted to integrate stormwater complaint procedures with new GIS platform to better track and record historic complaints.

Town attempted to screen 30% of known outfalls

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

Town is the process of developing and implementing a data collection program utilizing a data collector application for outfall screening and IDDE, which delayed progress on completing measurable goal.

All known illicit discharges were investigated and eliminated.

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

			3
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(ex.: samples/participants/events)

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

Yes    No

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

Yes    No

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

Town will attempt to inspect 20% of all known outfalls the upcoming reporting period with 100% being inspected in the current permit cycle.

Town will attempt to map 20% of known collection system during the upcoming reporting period with 100% being inspected in the current permit cycle.

Town will attempt to map new outfalls as they are installed or discovered based on system mapping.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

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

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

Grid for other discharge types

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

Grid for number of discharges

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

Grid for number of confirmed discharges

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

Grid for number of eliminated discharges

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No

If No, approximately what percent was completed in this reporting period?

25%

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

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

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

URL

Grid containing URL: www.aimsgis.org/webmap/

URL

Grid for additional URLs

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**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.**

None previously.

**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?**

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(ex.: samples/participants/events)

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

Yes    No

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

Yes    No

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

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of Bethlehem
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SPDES ID

N	Y	R	2	0	A	2	0	8
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

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

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

How many MS4s contributed to this report? 

--	--	--

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

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

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

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

	1	0
--	---	---

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

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

		0
--	--	---

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

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

- Notices of Violation # 

					2
--	--	--	--	--	---

 No Authority
- Stop Work Orders # 

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

 No Authority
- Criminal Actions # 

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

 No Authority
- Termination of Contracts # 

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

 No Authority
- Administrative Fines # 

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

 No Authority
- Civil Penalties # 

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

 No Authority
- Administrative Orders # 

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

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--	--
- Other # 

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

 No Authority

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of Bethlehem
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SPDES ID  

N	Y	R	2	0	A	2	0	8
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

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

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

How many MS4s contributed to this report? 

--	--	--

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

	1	4
--	---	---

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

	1	1
--	---	---

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

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

 %

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

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

 %

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

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

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

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



**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Bethlehem

SPDES ID

N	Y	R	2	0	A	2	0	8
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**7. Evaluating Progress Toward Measurable Goals MCM 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.**

Develop electronic tracking form and database for SWPPP comments and resident complaints.

Upgrade complaint hotline to better track and follow up on active complaints

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

Town recently upgraded online complaint database to allow complainants and Town staff to better track progress of complaint resolution.

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

			2
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

Town will begin to develop and implement an electronic/paperless approach for construction site inspections with the anticipated roll out by the end current reporting period.

Town will inspect 100% active construction sites multiple times during the current reporting period.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**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?**

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*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of Bethlehem
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SPDES ID  

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

Yes     No

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

Yes     No

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

Yes     No

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

		0
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**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

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

 %

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Town of Bethlehem

SPDES ID

N	Y	R	2	0	A	2	0	8
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

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

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

Town issued letters to privately owned post construction practices to be inspected by a licensed professional.

Town is developing a database and electronic solution for tracking post construction practice O&M and inspections.

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

Town issued letters to all private practice owners with deadline for inspection to be June 1, 2014.

GIS department currently working on developing electronic procedure and protocols for multiple Town inspection and field data collection.

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

			1
--	--	--	---

*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

Town will continue to develop electronic solutions for field data collection and will attempt to have post construction practice inspection procedures ready for implementation by the end of the current reporting period.

Town will issue letters to all private practice Owners by February 1, 2015.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**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?**

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*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	2	0	8
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

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

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

How many MS4s contributed to this report?

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

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Right of Way Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,** 2014

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

Name of MS4/Coalition Town of Bethlehem

SPDES ID  
NYR20A208

**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres     7
- Streets Swept (Number of miles X Number of times swept) # Miles   125
- Catch Basins Inspected and Cleaned Where Necessary #
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #     4
- Phosphorus Applied In Chemical Fertilizer # Lbs.
- Nitrogen Applied In Chemical Fertilizer # Lbs.   600
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres  218.0

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**     2

**4. What was the date of the last training?** 12 / 11 / 2013

**5. How many municipal employees have been trained in this reporting period?**  15

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?** 100 %

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Bethlehem
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SPDES ID

N	Y	R	2	0	A	2	0	8
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**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.**

Develop tracking system for catch basin cleaning and maintenance.

Perform self audits of Town facilities.

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

All Town facilities audited and responsible parties notified of corrective actions and possible BMPs for implementation.

Town Highway Department is analyzing all catch basins throughout Town for compliance with confined space requirements and in conjunction with this effort will assist Town GIS staff with system mapping.

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

			2
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

Ensure all appropriate staff (Managers, Foreman, Field Operations Staff, etc.) are trained in basic stormwater maintenance procedures.

Coordinate with Highway Department to develop a database to track pesticide usage and standard Highway Department practices.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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

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

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

None previously.

**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?**

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*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

City of Cohoes
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SPDES ID

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

**Section 1 - MCC Identification Page**

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

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

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

If Joint Report, enter coalition name:

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









### MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID

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

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

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

First Name

G	e	o	r	g	e														
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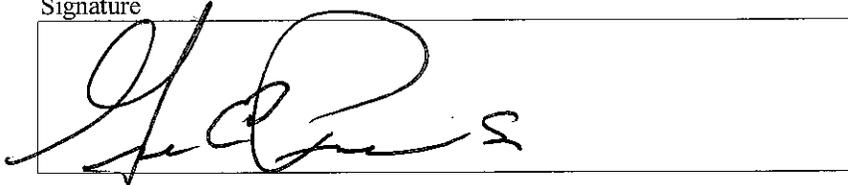
Last Name

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Title (Clearly print title of individual signing report)

M	a	y	o	r															
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Signature



Date

0	5	/	1	9	/	2	0	1	4
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Send completed form and any attachments to the DEC Central Office at:

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





### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Cohoes
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SPDES ID  

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

- |  |                     |  |   |   |   |   |   |
|--|---------------------|--|---|---|---|---|---|
| <input type="radio"/> Construction Site Operators Trained    | # Trained           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Direct Mailings             | # Mailings          | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td>5</td></tr></table> |   |   |   |   | 5 |
|  |                     |  |   | 5 |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays    | # Locations         | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td>3</td></tr></table> |   |   |   |   | 3 |
|  |                     |  |   | 3 |   |   |   |
| <input type="radio"/> List-Serves                            | # In List           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Mailing List                | # In List           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td>4</td><td>5</td><td>0</td><td>0</td></tr></table> |   | 4 | 5 | 0 | 0 |
|  | 4                   | 5  | 0 | 0 |   |   |   |
| <input checked="" type="radio"/> Newspaper Ads or Articles   | # Days Run          | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees         | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td>4</td><td>7</td><td>3</td></tr></table> |   |   | 4 | 7 | 3 |
|  |                     | 4  | 7 | 3 |   |   |   |
| <input checked="" type="radio"/> School Program              | # Attendees         | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td>1</td><td>1</td><td>5</td><td>7</td></tr></table> |   | 1 | 1 | 5 | 7 |
|  | 1                   | 1  | 5 | 7 |   |   |   |
| <input type="radio"/> TV Spot/Program                        | # Days Run          | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Printed Materials:          | Total # Distributed | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td>3</td><td>1</td><td>0</td></tr></table> |   |   | 3 | 1 | 0 |
|  |                     | 3  | 1 | 0 |   |   |   |

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

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s	t	r	e	a	m		c	o	r	r	i	d	o	r					

Other:



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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

City of Cohoes

SPDES ID

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

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

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

Insert Stormwater information into 4 utility mailings per year.

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

Included a link to the Stormwater Education facebook page with the stormwater information. Number of likes on facebook page increased over time.

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

			4
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

Continue to include stormwater information in mailings and encourage residents to look at facebook page for weekly posts about stormwater, pollution prevention, green infrastructure and upcoming events.



### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																			
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SPDES ID  

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

- |  |                     |   |   |   |   |   |   |
|--|---------------------|---|---|---|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>4</td><td>8</td></tr></table>   |   |   |   | 4 | 8 |
|  |                     |   | 4 | 8 |   |   |   |
| <input type="radio"/> Direct Mailings                                | # Mailings          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>     |   |   |   |   |   |
|  |                     |   |   |   |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays            | # Locations         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>1</td><td>0</td></tr></table>   |   |   |   | 1 | 0 |
|  |                     |   | 1 | 0 |   |   |   |
| <input checked="" type="radio"/> List-Serves                         | # In List           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>4</td><td>7</td><td>9</td></tr></table>  |   |   | 4 | 7 | 9 |
|  |                     | 4   | 7 | 9 |   |   |   |
| <input type="radio"/> Mailing List                                   | # In List           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>     |   |   |   |   |   |
|  |                     |   |   |   |   |   |   |
| <input checked="" type="radio"/> Newspaper Ads or Articles           | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td>7</td></tr></table>    |   |   |   |   | 7 |
|  |                     |   |   | 7 |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations         | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>4</td><td>4</td><td>0</td></tr></table>  |   |   | 4 | 4 | 0 |
|  |                     | 4   | 4 | 0 |   |   |   |
| <input checked="" type="radio"/> School Program                      | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>1</td><td>6</td><td>1</td></tr></table>  |   |   | 1 | 6 | 1 |
|  |                     | 1   | 6 | 1 |   |   |   |
| <input type="radio"/> TV Spot/Program                                | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>     |   |   |   |   |   |
|  |                     |   |   |   |   |   |   |
| <input checked="" type="radio"/> Printed Materials:                  | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td></td><td>1</td><td>9</td><td>5</td><td>1</td></tr></table> |   | 1 | 9 | 5 | 1 |
|  | 1                   | 9   | 5 | 1 |   |   |   |

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

D	i	s	t	r	i	b	u	t	i	o	n	-							
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Other:

H	o	s	t		8		C	W	P		W	e	b	c	a	s	t	s	
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URL






### MS4 Annual Report Form

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

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

Name of MS4/Coalition 

City of Cohoes
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SPDES ID  

N	Y	R	2	0	A	2	4	3
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#### 2. URL(s) con't.:

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

URL

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**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Cohoes									
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SPDES ID  

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

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

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2	0	1	4
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**4.b. For how many days was/will this report be posted?**

1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes  No

If Yes, what was the date of the meeting?

0	5
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 / 

1	4
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 / 

2	0	1	3
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If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

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

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

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

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

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

Host Beautification Day and Spring Clean Up/Household Hazardous Waste day. Literature regarding water quality is handed out at Hazardous Waste collection site.

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

Public participation has been strong and other groups have contacted the City for assistance with organizing beautification projects.

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

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

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

Yes    No

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

Yes    No

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

Continue these programs and implement new programs to involve more residents and business owners.







**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Stormwater Coalition of Albany County																			
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SPDES ID									
N	Y	R	2	0					

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

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

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

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

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

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

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

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

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

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

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

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

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Name of MS4/Coalition

City of Cohoes

SPDES ID

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

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

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

Complete, distribute and file IDDE program procedures and track detected and eliminated illicit discharges.

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

Written procedures lead to an organized tracking system and faster documentation and elimination of illicit discharges.

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

			3
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

Periodically review procedures to ensure they are accurate. Continue to document illicit discharges and educate residents on the effects of illicit discharges.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

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

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

Grid for other discharge types

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

Grid for number of discharges

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

Grid for number of confirmed discharges

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

Grid for number of eliminated discharges

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No

If No, approximately what percent was completed in this reporting period?

25%

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

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

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

URL

Grid containing URL: www.aimsgis.org/webmap/

URL

Grid for additional URLs

**MS4 Annual Report Form**

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

2	0	1	4
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Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

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

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

None previously.

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

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

--	--	--	--

(ex.: samples/participants/events)

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

Yes    No

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

Yes    No

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

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

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

2	0	1	4
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Name of MS4/Coalition

City of Cohoes

SPDES ID

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

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

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

How many MS4s contributed to this report? 

		1
--	--	---

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

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

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

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

		3
--	--	---

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

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

--	--	--

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

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

- Notices of Violation # 

					1
--	--	--	--	--	---

 No Authority
- Stop Work Orders # 

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

 No Authority
- Criminal Actions # 

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

 No Authority
- Termination of Contracts # 

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

 No Authority
- Administrative Fines # 

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

 No Authority
- Civil Penalties # 

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

 No Authority
- Administrative Orders # 

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

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--	--
- Other # 

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

 No Authority

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

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

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

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

How many MS4s contributed to this report? 

		1
--	--	---

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

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

		6
--	--	---
  3. What percent of active construction sites were inspected during this reporting period?  NT 

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

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

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

 %
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

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



**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Document construction site inspection and enforcement procedures.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Streamlines procedures by identifying who is responsible for what parts of inspections and enforcement. Problems noted in inspections were corrected more quickly.

**C. How many times was this observation measured or evaluated in this reporting period?**

			8
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Continue to save all inspection reports and resolve construction site issues as quickly as possible. Periodically review procedures to ensure they are accurate.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

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Name of MS4/Coalition 

City of Cohoes
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SPDES ID  

N	Y	R	2	0	A	2	4	3
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**Minimum Control Measure 5. Post-Construction Stormwater Management**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?**

	# Inventoried	# Inspections	# Times Maintained									
<input checked="" type="radio"/> Alternative Practices	<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1
		1										
		1										
<input type="radio"/> Filter Systems	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
<input type="radio"/> Infiltration Basins	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
<input type="radio"/> Open Channels	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
<input checked="" type="radio"/> Ponds	<table border="1"><tr><td> </td><td> </td><td>3</td></tr></table>			3	<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1	<table border="1"><tr><td> </td><td> </td><td>1</td></tr></table>			1
		3										
		1										
		1										
<input type="radio"/> Wetlands	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
<input type="radio"/> Other	<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			

**2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?**

Yes    No

**3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?**

- Building Codes    Municipal Comprehensive Plans
- Overlay Districts    Open Space Preservation Program
- Zoning    Local Law or Ordinance
- None    Land Use Regulation/Zoning
- Watershed Plans    Other Comprehensive Plan

Other:

I	n	c	e	n	t	i	v	e		z	o	n	'	g		f	o	r		C	l	u	s	t	e	r	i	n	g
---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	--	---	---	---	--	---	---	---	---	---	---	---	---	---	---

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Cohoes
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SPDES ID  

N	Y	R	2	0	A	2	4	3
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**

Yes    No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**

Yes    No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**

Yes    No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**

		0
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**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

	5		0		%
--	---	--	---	--	---

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

N	Y	R	2	0	A	2	4	3
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Coalition has completed and distributed model local law.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

City has reviewed model local law and shared it with other City staff to see how to utilize it. Staff agreed the model local law should be used to update Cohoes local law to include green infrastructure practices in new construction projects.

**C. How many times was this observation measured or evaluated in this reporting period?**

			3
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

City Planner discussed plan to revise local law with TDE and will work together to form a group to implement revisions.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	2	4	3
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>	<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>
Street Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Bridge Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Solid Waste Management.....	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Right of Way Maintenance.....	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Other.....	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Cohoes
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SPDES ID

N	Y	R	2	0	A	2	4	3
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

				3
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

	1	4	7	4
--	---	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		2	2	3
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

				2
--	--	--	--	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--	--
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

					.	
--	--	--	--	--	---	--

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				5
--	--	--	--	---

**4. What was the date of the last training?**

1	1	/	1	5	/	2	0	1	3
---	---	---	---	---	---	---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

	2	4
--	---	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

	7	0	%
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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Cohoes

SPDES ID

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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Host Household Hazardous Waste Collection Day event.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Several interested residents called looking for more information on the event. The City's Stormwater Education facebook page posted the event flyer, which is followed by many residents.

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Continue to hold these events and encourage residents to participate. Educate residents on how pollution impacts water quality, how this event helps to maintain water quality and what can be done at home throughout the year to help. Stormwater pamphlets will be passed out at the event.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

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**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.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

Town of Colonie
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SPDES ID

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Each MS4 must submit an MCC form.

**Section 1 - MCC Identification Page**

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y
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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

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Name of MS4 

Town of Colonie
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SPDES ID  

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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name 

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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

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Name of MS4 

Town of Colonie
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SPDES ID  

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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name 

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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID  
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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  MI  Last Name

Title (Clearly print title of individual signing report)

Signature  


Date

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505









**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	A	1	9	0
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

- 1) The Town will include a water quality message in our Hazardous Waste Clean Up literature for our Hazardous Waste Drop Off days held three times a year.
- 2) Maintain the public demonstration rain garden at the Public Operation Center with volunteers.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

- 1) Approximately 1000 people participated in the Household Hazardous Waste Day event in this reporting period.
- 2) The public demonstration garden is being modified this Spring and continues to attract a large amount of walk up traffic.

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

- 1) The Town will have three more Household Hazardous Waste Drop-off events in 2014.
- 2) The bottom of the rain garden is being raised this Spring with a combination of municipal staff and volunteers to ensure that the plants thrive and the garden remains attractive.













### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

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SPDES ID  

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### 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department  

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Please provide specific address of page where report can be accessed - not home page.

eMail  Comments


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of Colonie
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SPDES ID  

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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

- 1) Incorporate a water quality message into Clean up event promotions.
- 2) The Town of Colonie will reach out to volunteers to participate in the NYSDEC WAVE program.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

- 1) A water quality message was included in the promotion of the Household Hazardous Waste clean up events with approximately 1000 people participating.
- 2) The Town still feels the WAVE program is a good way to get the public involved with water quality awareness and promotion.

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

- 1) A water quality message will be included in the promotions for three Household Hazardous Waste Clean Up events in 2014.
- 2) The Town of Colonie is currently reaching out to potential volunteers for a June 14, 2014 WAVE training session.







**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

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.**

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

**C. How many times was this observation measured or evaluated in this reporting period?**

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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

- 1) The Town will provide illicit discharge related materials to 50% of relevant staff via Rain Check and Spills and Skills videos.
- 2) By 3/9/2014 the Town of Colonie will complete and file an electronic and hard copy of IDDE Program Procedures.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

- 1) 38 staff members were trained using the Rain Check and Spills and Skills video.
- 2) The Town now has an electronic and hard copy of our IDDE Program Procedures.

**C. How many times was this observation measured or evaluated in this reporting period?**

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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

- 1) Another training session with Pure Waters staff is planned for May of 2014.
- 2) We will continue to do dry weather ORI inspections following the formal procedures.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**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.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	A	1	9	0
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
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**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

	1	3
--	---	---

**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

		0
--	--	---

**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- |  |   |   |  |   |  |  |   |                                    |
|--|---|---|--|---|--|--|---|------------------------------------|
| <input checked="" type="radio"/> Notices of Violation  | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td>3</td></tr></table> |  |   |  |  | 3 | <input type="radio"/> No Authority |
|  |   |   |  | 3 |  |  |   |                                    |
| <input type="radio"/> Stop Work Orders                 | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Criminal Actions                 | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Termination of Contracts         | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Administrative Fines             | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Civil Penalties                  | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Administrative Orders            | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |
| <input type="radio"/> Other                            | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>  |  |   |  |  |   | <input type="radio"/> No Authority |
|  |   |   |  |   |  |  |   |                                    |

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	A	1	9	0
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

	1	4
--	---	---
  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

	4	2
--	---	---
  3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
---	---	---

 %
  4. What percent of active construction sites were inspected more than once?  NT 

1	0	0
---	---	---

 %
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	A	1	9	0
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) By 3/9/2014 the Town of Colonie updates in writing formal SWPPP review procedures

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) The Town has reviewed and updated its formal written SWPPP review procedures.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) The Town will review all new submitted SWPPP for conformance with NYSDEC standards using the new SWPPP review procedures.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of Colonie
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SPDES ID  

N	Y	R	2	0	A	1	9	0
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**

Yes     No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**

Yes     No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**

Yes     No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**

		0
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**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

	8	0
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	A	1	9	0
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.**

- 1) By 3/9/2014 the Town will evaluate Local Laws and site plan design criteria with regards to promoting GI, LID, and BSD and make a list of areas of potential improvement.
- 2) The Town of Colonie will train Planning and Town board members regarding green infrastructure.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

- 1) The Town has conducted an evaluation of it's existing local laws and site plan design and has flagged areas of potential improvement.
- 2) Town staff participated in a green infrastructure bus tour on 9/24/2013 where approximately 100 people attended many of which were Planning and Town board members including several elected officials.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

- 1) The Town will inspect 100% of both public and private stormwater practices and generate an inspection report calling out maintenance that is required.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of Colonie
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SPDES ID  

N	Y	R	2	0	A	1	9	0
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of Colonie
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SPDES ID  

N	Y	R	2	0	A	1	9	0
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

			1	5
--	--	--	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

		2	1	5
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		3	2	0
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

			1	0
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

		1	0	0
--	--	---	---	---
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

	9	0	5	6
--	---	---	---	---
- Pesticide/Herbicide Applied # Acres 

					.	
--	--	--	--	--	---	--

  
(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				2
--	--	--	--	---

**4. What was the date of the last training?**

0	1
---	---

 / 

2	3
---	---

 / 

2	0	1	4
---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

	3	9
--	---	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

	6	0
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of Colonie

SPDES ID

N	Y	R	2	0	A	1	9	0
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) Continue to remove and quantify sediment removed from our conveyance system. Continue to prevent sediment from entering out watercourses.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) Approximately 500 cubic yards of sediment was cleaned out of catch basins and swept up from roadways keeping sediment from entering waters of the US.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) Town staff will continue to clean the MS4 conveyance system and sediment will be quantified.  
2) Town staff will be trained on how to keep pollutants out of the MS4.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

Village of Colonie
--------------------

SPDES ID

N	Y	R	2	0	A	0	7	6
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Each MS4 must submit an MCC form.

## Section 1 - MCC Identification Page

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y
C	o	u	n	t	y																								

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

Village of Colonie
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SPDES ID  

N	Y	R	2	0	A	0	7	6
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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name 

F	r	a	n	k															
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 MI 

A
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 Last Name 

L	e	a	k																
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Title 

M	a	y	o	r															
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Address 

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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

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Name of MS4 

Village of Colonie
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SPDES ID  

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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name 

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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

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Name of MS4 

Village of Colonie
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SPDES ID  

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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name 

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### MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2014

Name of MS4

SPDES ID

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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

F r a n k

MI

A

Last Name

L e a k

Title (Clearly print title of individual signing report)

M a y o r

Signature

*Frank A. Leak*

Date

0 5 / 1 7 / 2 0 1 4

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505









**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Colonie

SPDES ID

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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Distribute literature at public events. Include reminders and educational advertisements in local news letter "The Villager", mailed to homes. Hand out literature with building permit issuance, fire/code inspections. Post information at Village facilities (Village Hall, Rec Center, kiosks, etc)

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Increased awareness of storm water related issues via public educational materials and events. Stormwater hotline calls received.

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village proposes utilizing the CBI MS4 software to track reporting and continue the measurable goal





**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

By 3/9/2014, using Target Audience Analysis Worksheet, members will update public education and outreach measurable goals, and provide for Coalition staff print orders for brochures and other educational material. Worksheet design and Coalition structure continues to facilitate inter-municipal, watershed based public education initiatives (For Coalition task schedule, see SWMP posted on website: BMP 1-1 Target Audience Analysis Wksheet & BMP 1-1 Publications)

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Coalition members provided print orders and also developed new educational brochures (pet waste and commercial waste) better suited to geographic areas of concern and pollutants of concern identified in the Target Audience Analysis Worksheet. Identified target audiences included commercial businesses with dumpsters near/in watersheds with 303d impaired segments; property owners with septic systems; residents living on/near streams; pet owners (literature at animal shelter).

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.









**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Colonie
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SPDES ID

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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**
 Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

 Yes  No
**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**
 Yes  No

If No, is one planned for each?

 Yes  No
**6. Were comments received during this reporting period?**
 Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Colonie

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.**

Pet waste program continues to be utilized  
Village recycling days are well attended and numerous recyclables are collected  
Misc garbage collection from streets

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Pet waste dog bags continue to be collected  
Recycling includes TV's, monitors, printers, misc.

**C. How many times was this observation measured or evaluated in this reporting period?**

2	5	7	5
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP's are evaluated on an annual basis. An increase in posting and better tracking of distribution of items and collection is proposed. Use of MS4 software.





### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

### 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department

S t o r m w a t e r C o a l i t i o n - A l b a n y C n t y

Address

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Library  Annual Report  SWMP Plan  Comments

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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

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.**

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

**C. How many times was this observation measured or evaluated in this reporting period?**

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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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Name of MS4/Coalition

Village of Colonie

SPDES ID

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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Storm sewer map updated, dry weather screening continues on all out falls yearly. A portion of the storm sewer is video inspected each year leading to 100% inspection.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Inspections lead to the cleaning of 80 catch basins and the repair of 1

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Continued public education, video inspections of storm sewers, distribution of IDDE literature in utility bills, posting and advertisements.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:
- None

Grid for other discharge types

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

Grid for number of discharges

5. How many illicit discharges have been confirmed during this reporting period?

Grid for number of confirmed discharges

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

Grid for number of eliminated discharges

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No

If No, approximately what percent was completed in this reporting period?

25%

8. Is the above information available in GIS?  Yes  No

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

Grid containing URL: www.aimsgis.org/webmap/

URL

Grid for additional URLs

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

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**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.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Colonie
--------------------

SPDES ID

N	Y	R	2	0	A	0	7	6
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

		2
--	--	---

**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

		0
--	--	---

**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- Notices of Violation # 

					3
--	--	--	--	--	---

 No Authority
- Stop Work Orders # 

--	--	--	--	--	--

 No Authority
- Criminal Actions # 

--	--	--	--	--	--

 No Authority
- Termination of Contracts # 

--	--	--	--	--	--

 No Authority
- Administrative Fines # 

--	--	--	--	--	--

 No Authority
- Civil Penalties # 

--	--	--	--	--	--

 No Authority
- Administrative Orders # 

--	--	--	--	--	--

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--	--
- Other # 

--	--	--	--	--	--

 No Authority

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village Of Colonie

SPDES ID

N	Y	R	2	0	A	0	7	6
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		1
--	--	---
  
  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		1
--	--	---
  
  3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
---	---	---

 %
  
  4. What percent of active construction sites were inspected more than once?  NT 

1	0	0
---	---	---

 %
  
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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 Colonie

SPDES ID  
N Y R 2 0 A 0 7 6

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

[Empty grid for Department]

Address

[Empty grid for Address]

City

[Empty grid for City]

Zip

[Empty grid for Zip]

Phone

( [ ] [ ] [ ] ) [ ] [ ] [ ] - [ ] [ ] [ ] [ ]

Library

Address

[Empty grid for Address]

City

[Empty grid for City]

Zip

[Empty grid for Zip]

Phone

( [ ] [ ] [ ] ) [ ] [ ] [ ] - [ ] [ ] [ ] [ ]

Other

Address

2 T h u n d e r R o a d

City

V . o f C o l o n i e

N Y

Zip

1 2 2 0 5 -

Phone

( 5 1 8 ) 8 6 9 - 7 5 6 2

Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

[Empty grid for URL]

[Empty grid for URL]

[Empty grid for URL]

URL

[Empty grid for URL]

[Empty grid for URL]

[Empty grid for URL]

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village Of Colonie

SPDES ID

N	Y	R	2	0	A	0	7	6
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village's Designated Engineer (VDE) will continue to review SWPPP in accordance with the NYS Stormwater Design Manual and the NYS DEC Erosion and Sediment Control Manual.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

All SWPPPs were reviewed by the VDE in accordance with the NYS Stormwater Design Manual and the NYS DEC Erosion and Sediment Control Manual.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

All SWPPPs have been reviewed by the VDE and will continue to be reviewed.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Colonie
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SPDES ID

N	Y	R	2	0	A	0	7	6
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**

Yes  No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**

Yes  No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**

Yes  No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**

		0
--	--	---

**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

	2	0
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Colonie

SPDES ID

N	Y	R	2	0	A	0	7	6
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Inspected the post construction storm water management practices and required practices operation and maintenance manuals before issuance of certificate of occupancy.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Post storm water management practices were inspected. Owners of those found to be unsatisfactory were issued a notice with a dead line to remedy any deficiency prior to the follow up inspection. All notified owners have complied with requests and upon re-inspection all found in compliance.

**C. How many times was this observation measured or evaluated in this reporting period?**

		2	4
--	--	---	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Post construction inspection were completed in mid 2013. Re-inspection is planned for mid 2014. Develop a spread sheet to list owner, type of facility/practice, inspection dates and results, and other.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Colonie
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SPDES ID  

N	Y	R	2	0	A	0	7	6
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Colonie
--------------------

SPDES ID  

N	Y	R	2	0	A	0	7	6
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

			4	6
--	--	--	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

		2	5	6
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		1	1	0
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

			2	4
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

			2	5
--	--	--	---	---
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

		1	8	4
--	--	---	---	---
- 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?**

				4
--	--	--	--	---

**4. What was the date of the last training?**

0	9
---	---

 / 

2	4
---	---

 / 

2	0	1	3
---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

		9
--	--	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

	4	1
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Colonie

SPDES ID

N	Y	R	2	0	A	0	7	6
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village's streets are routinely swept clean, May, June, July. Catch basins are also cleaned on a revolving basis. Storm drains are routinely inspected and repaired as needed.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The number of catch basins clean was 110. The amount of sediment removed from the basins was measured at 23 cubic yards. Street sweeping netted 64 cubic yards and storm drain cleaning 12 cubic yards. Basin, storm drainage and repairs are recorded on the Village's "Storm Sewer System Maintenance Program General Plan" Which is updated each year indicating sections cleaned and new or repaired.

**C. How many times was this observation measured or evaluated in this reporting period?**

	1	1	0
--	---	---	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village will continue to sweep streets, parking lots, and clean and maintain the storm sewer system. Records of the amount of sediment removed will be kept.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

Village of Green Island
-------------------------

SPDES ID

N	Y	R	2	0	A	3	7	7
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Each MS4 must submit an MCC form.

## Section 1 - MCC Identification Page

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y
C	o	u	n	t	y																								







### MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 4

SPDES ID

Name of MS4

#### Section 4 - Certification Statement

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature

*Celen M. McNulty-Ryan*

Date

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505









**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

VILLAGE OF GREEN ISLAND

SPDES ID

N	Y	R	2	0	A	3	7	7
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

BMP brochures that instructed of BMP's specific to different businesses were available in the Village Office this past year. Approximately 100 are sent out direct to businesses every other year. Brochures cover different topics specific to auto repair, restaurants, medical facilities, food service businesses, etc.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

We did not hear much feedback about them receiving the letter but after distribution next year plan on following up with a survey to help determine effectiveness in late Summer or early Fall.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

See B. above





**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID

N	Y	R	2	0				
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**4. 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.**

By 3/9/2014, using Target Audience Analysis Worksheet, members will update public education and outreach measurable goals, and provide for Coalition staff print orders for brochures and other educational material. Worksheet design and Coalition structure continues to facilitate inter-municipal, watershed based public education initiatives (For Coalition task schedule, see SWMP posted on website: BMP 1-1 Target Audience Analysis Wksheet & BMP 1-1 Publications)

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Coalition members provided print orders and also developed new educational brochures (pet waste and commercial waste) better suited to geographic areas of concern and pollutants of concern identified in the Target Audience Analysis Worksheet. Identified target audiences included commercial businesses with dumpsters near/in watersheds with 303d impaired segments; property owners with septic systems; residents living on/near streams; pet owners (literature at animal shelter).

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.









**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

VILLAGE OF GREEN ISLAND
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SPDES ID

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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

0	5
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2	0
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2	0	1	3
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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**SPDES General Permit for Stormwater Discharges from  
Municipal Separated Storm Sewer Systems (MS4s)  
Permit No. GP-0-10-002  
JOINT ANNUAL REPORT**

**Reporting Period  
March 10, 2013 to March 9, 2014**

**Minimum Control Measure 2  
Public Involvement/Participation**

**Public Comment Information**

**From Annual Report Form MCM 2 Page 5 of 6**

*Question 6. Were comments received during this reporting period? Yes/No* None

*If yes, attach comments, responses and changes made to SWMP in response to comments to this report.*

**List of Attachments:**

Minutes from Public Meeting held on May 19, 2014 to explain 2013-14 annual report and to solicit comments.

**Comments (if no Attachments):**

No comments were received from the general public.

The minutes of the **annual MS4 Presentation** by Sean E. Ward, Exec. Assistant to the Mayor held on Monday, **May 19, 2014** at 5:30 p.m. at the Green Island Municipal Center, 19 George Street, Green Island, NY.

In attendance: Sean E. Ward, Mayor Ellen M. McNulty-Ryan, Trustee Sterling, Trustee Jones, Trustee Belokopitsky, Trustee Siegel, Peter DeMento, Kristin Swinton, Trustee Files and Anne Strizzi.

Sean thanked everyone for coming to the Annual Stormwater Meeting and this is a requirement as part of our permit with NYS DEC for storm water. We get to talk about our annual report and the draft report is available on the website, which he will note later in the presentation. This is a culmination of our activities from March 10, 2013 until March 9, 2014. We have to do a pretty extensive annual report on what our activities are during that period and then report it to you, the residents and board members and ask for any comments.

Sean noted that this is the 10<sup>th</sup> year of presenting the annual MS4 report to the residents.

Sean went on to state that the Village is part of the Stormwater Coalition of Albany County, which is a culmination of 11 municipalities in Albany County. The coalition was formed to manage this program and we have 11 municipalities plus SUNY of Albany that are members of it. We were actually formed as a public benefits corporation, which is a separate form of government. They are actually overseen by the County of Albany with all of the municipalities having members on the Board of Directors that oversee and actually operate the board. We meet on a regular basis and he himself has been elected Chairperson of that Board and he has been Chair since its inception six years ago. He is here to report that it is working out very well and the Village contributes into it and it costs us about \$5,000.00 a year to be a part of it and that is up about \$1,500.00 this year and that is because we added one (1) staff member to meet the demands of some of the requirements of the permit. We pay that \$5,000.00 as part of an allocation formula that is based a lot on population and area and obviously, the larger members such as Colonie, Albany and Bethlehem are the being the biggest contributors and then, the Village of Green Island is the smallest contributor at about \$5,000.00. We do a lot of shared joint ventures together in order to comply with the permit. We have an Executive Director, Nancy Heinzen and she has an office in the Albany County Office Building, the Stormwater Coalition Office is located at 112 State Street, Room 710, Albany, NY.

Sean stated that we have continued to have this partnership and we participate in environmental cleanup programs together including the street sweeping that was just completed and we also have Spring clean-up which was held the last three (3) Saturdays here in May, but he is reporting on last year to say that we did it last year as well, where you can empty out your basement of waste and bring it the DPW at no charge, that is a good program for clean-up, that gets the waste out of the stream, chemicals, hazardous waste and we did have a Hazardous Waste program and we had 44 cars, but again we are reporting on last year's activities and last year we did not have a Hazardous Waste Day because we had had it the previous year. We hold these programs at no charge to the residents because it gets these hazardous chemicals out of the waste stream which could get into the river, into our sewer system. We also have the Street Sweeping which is very important it gets all of the sediment and dirt off the street so that they do not get into our catch

basin system. We usually do two (2) of those a year now, one in the Spring and one in the Fall and then for special events the guys are out their sweeping as well.

Sean noted that the Village has passed laws for the detection and elimination of illicit discharges and storm water management erosion and sediment control. This was part of our permit and we have complied. It was done approximately six (6) years ago and it has been tweaked over the years. We have recently been part of a grant and hired an engineering firm to give us some guidelines that we can use in our planning process and we have talked with developers in storm water management throughout the process. We are still meeting on it and it has been tweaked a few times but we haven't seen a final product yet, but it is due out very soon. We have also developed an outfall and catch basin mapping system. We hired one of the County employees that works for the Storm Water Coalition and hired her and put her on payroll a year ago to map our own system and what we did, in addition to the fact that she works for the Storm Water Coalition which is part of the MS4 permit, but we also had similar requirements for the CSO permit, which is our Combined Sewer Overflow permit and we hired her to map out our whole MS4 and CSO. We have the paper copy and also some PDF files that show those, but she has also entered that on the GIS system with the County and also a storm water mapping system called AIMS (Albany Internet Mapping System), it is proprietary and it is not something that we offer to the public because there is some sensitive data on their and would not want the public to have total knowledge of it.

Sean stated that we have continued to review all commercial development projects, with the new regulations that went into place six (6) years ago, which required an extensive review of any projects over five (5) acres and we didn't have any until last year and the 85 Cohoes Avenue which was a good size project and it required a very extensive review from the Planning Board and it also required a SWMPP (Storm Water Management Plan), to handle the storm water both before, during and after construction on that site. This is the first one that we have overseen and Kristin Swinton, as Chair of the Planning Board worked with CHA on the review of that project and it actually added a lot to the review process, but it is also a good process because it makes them put good storm water practices in place and it allows for public comment as well.

Sean noted that the Village Board and staff and also the Planning and Zoning Boards have been attending workshops, as you know for the last couple of years. The Zoning and Planning Boards have attended and our staff has attended but the new requirement a couple of years ago was that the Village Board and the Mayor are now required to attend some storm water training, approximately four (4) hours a year is what the guideline states from DEC. There are several avenues that we can take to get that done many of the board members of the Zoning and Planning and the Village Board Members have attended the Capital District Regional Planning Commission (CDRPC) training; but there are also some webcasts and other educational opportunities that we have used to accomplish that. It is very important that everyone understand the impact that these regulations have on our community and the impact of storm water issues on our community. We have coordinated with the Capital District Regional Planning Commission not only with MS4 issues but also with CSO issues, which we have both in this community. We seek outside help and we share services and coordinate services together to keep costs down and number one to be more efficient. We have worked very closely with our Public Works and Recreation and Water and Sewer Depts. and all of our staff on all of our facilities in municipal

operations. How do we wash vehicles? How do we handle oil borne issues? We have petroleum based products at the garage and we have over the last few years under the direction of our former Deputy Mayor Mike Cocca have instituted a “green oil” program which is a substitute for petroleum based oil, that program has worked very well. We used it on many of our vehicles, not all because you can’t use it on diesel vehicles but most of our fuel vehicles use “green oil” which has worked out very well. We have tested it at that the lab and the viscosity, he does not want to get into the technical issues but all has come out very well that it is safe for the vehicles. We also have a catch basin cleaning cooperative effort with the Albany County Sewer District. We do not own a vacuum truck but we do use the Albany County Sewer District to come up and periodically clean out our systems and problem areas and they also do regular maintenance as well. They are a great resource for us.

Sean stated that highlights to the Village’s Stormwater Management Program for this year are that we will continue to develop educational efforts and outreach programs as part of the multi-municipal partnership. The Stormwater Coalition has trained staff in all of the municipalities on some educational components, which again are a requirement of our permit and Maggie Alix has attended a couple of those training sessions and has become a trainer, especially in “Project Wet”. She and Tom Mullins have implemented that program in the park and they do it every couple of years. We don’t want to do it every year because it loses its effectiveness but we do it every other year so that everybody is aware that storm water issues are a part of it and it is fun for the children to participate in that kind of a way. We have also mailed out business brochures, approximately 100 of them to the businesses and Maggie, as the Building Inspector and Code Enforcement Officer will hand out brochures to any building permit applicants that may be affected by these requirements. The brochures pertain to items such as: pesticide applications or moving dirt, there are many. We also put little tidbits in our monthly newsletter regarding storm water, pollution prevention, be careful about feeding animals because that produces waste that gets into our waste stream and we also promote the Village and the Stormwater Coalition websites, which have a lot of other information on them. We also sponsor a “Day in the Life of the Hudson River” and unfortunately, our local school does not participate in that, but the Robert C. Parker School in Wynantskill brings a class here on the “Day in the Life of the Hudson River” Day, which he believes is in September. One year the DEC Commissioner showed up and they were all down at the riverbank taking samples of the river. We regularly enforce the local laws to control runoff and reduce pollutants. Maggie Alix, our Building Inspector, when she is doing inspections, she is checking to make sure that they have no illicit discharges and she has been trained in that as well. Tony Cesare and the DPW crew every year does samplings of our outfalls and inspect them and we have 10 around the village to make sure that there is nothing illegal coming out of them. They have sample kits where they actually take samples and bring them down to the Albany County Sewer District and test them and see if there is any detection of illicit chemicals or anything else.

Sean stated that construction sites, which he mentioned 85 Cohoes Avenue was the first SWMPP Program that we have encountered and Maggie and the inspectors from Albany County have stayed on top of that project to make sure that they have done everything properly. There will also be post-construction management of that project as well, which is occurring now.

Sean stated that we will also continue to review and provide opportunities for public comments, which we are doing today with this annual meeting, and we will also allow for public comment on all commercial development projects to maintain compliance with our Phase II Stormwater Regulations through the Planning Board process. We will continue to assess current field inspection and record practices for related construction activities. We also invite any contractors that work in the Village, we provide through the Coalition storm water training and erosion and sediment control and construction training and we invite and most of all of them have attended those trainings. We will also continue to evaluate the current Village practices for municipal operations through training and through auditing of our facilities to be sure that we are compliant with EPA Compliance Audit manual.

Sean also noted that our Stormwater Management Program is comprised of two (2) binders that we put together and it is available for viewing at the Village Office during business hours.

Sean restated that this report is for the period covering March 10, 2013 to March 9, 2014 and our annual report is available on the websites: [www.villageofgreenisland.com](http://www.villageofgreenisland.com) and [www.stormwateralbanycounty.org](http://www.stormwateralbanycounty.org). If you go on the [www.stormwateralbanycounty.org](http://www.stormwateralbanycounty.org), you will find our SWMPP, our organizational chart; you will find the brochures that he just showed, as well as the annual report. It is a wealth of knowledge on that website if you are interested.

Sean stated that comments, written or verbal, will be taken until 4:00 p.m. tomorrow, May 20<sup>th</sup>, 2014 and they can be submitted via email at [seanw@villageofgreenisland.com](mailto:seanw@villageofgreenisland.com).

Sean stated that he would take any comments at this time.

No public comments.

Mayor Ellen McNulty-Ryan wanted to thank Sean for all the work that he does, not only on this presentation, but what you do year round especially on the sewer. She knows how much time you put in to it and she really appreciates it.

Sean stated that it is a lot of work for a small community to do this but we have an organizational chart and every department has a little part of this. He attends the meetings and he presents but every department has a little part and no one complains about it.

No further comments.

The annual hearing was closed at 5:52 p.m.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

VILLAGE OF GREEN ISLAND
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SPDES ID

N	Y	R	2	0	A	3	7	7
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

UPLOAD SWMP INTO CBI SYSTEM; PUT WATER QUALITY MESSAGE INTO CLEAN UP EVENT LITERATURE; ADD TO VILLAGE WEBSITE
---

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

TRAINED ON CBI DURING 2013; STARTING TO CROSS LINK COALITION AND VILLAGE WEBSITE INFORMATION
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**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

SEE B. ABOVE
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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID									
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

VILLAGE OF GREEN ISLAND
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SPDES ID

N	Y	R	2	0	A	3	7	7
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

UPLOAD 100% OF NEW OUTFALLS INTO GIS; COALITION PROVIDED HARD COPIES OF STORM SYSTEM/SEWER SHED MAPS; STORMWATCH AND IDDE TRAINING VIDEO SHOWN TO RELEVANT VILLAGE STAFF AND SPILL PREVENTION AND RESPONSE TRAINING COMPLETED AS WELL;
--

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

NEW OUTFALLS WERE UPLOADED TO GIS IN LATE FALL 2012 AND HARD COPY AND PDF FILE MAPS WERE PROVIDED TO THE VILLAGE; TRAINING OF DPW, GIPA, WATER/SEWER, PARKS & RECREATION AND ADMINISTRATIVE STAFF WAS COMPLETED IN JANUARY 2014; QUIZZES AND FURTHER ROUNDTABLE DISCUSSION EVALUATED THE EFFECTIVENESS OF THE TRAINING.
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**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

FURTHER MAPPING UPDATES TO INCLUDE NEW (GREEN) INFRASTRUCTURE IN THE SOUTH END AND TRAINING WILL OCCUR IN 2014-15.
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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

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**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.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

VILLAGE OF GREEN ISLAND
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SPDES ID

N	Y	R	2	0	A	3	7	7
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
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**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

		1
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**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

		0
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**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- Notices of Violation # 

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 ○ No Authority
- Stop Work Orders # 

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 ○ No Authority
- Criminal Actions # 

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 ○ No Authority
- Termination of Contracts # 

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 ○ No Authority
- Administrative Fines # 

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 ○ No Authority
- Civil Penalties # 

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 ○ No Authority
- Administrative Orders # 

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 ○ No Authority
- Enforcement Actions or Sanctions # 

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 ○ No Authority
- Other # 

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 ○ No Authority

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

VILLAGE OF GREEN ISLAND
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SPDES ID  

N	Y	R	2	0	A	3	7	7
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		1
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2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		1
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3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
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 %

4. What percent of active construction sites were inspected more than once?  NT 

1	0	0
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 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: VILLAGE OF GREEN ISLAND

SPDES ID: N Y R 2 0 A 3 7 7

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

C O D E E N F O R C E M E N T O F F I C E

Address

2 0 C L I N T O N S T R E E T

City

G R E E N I S L A N D

N Y

Zip

1 2 1 8 3 -

Phone

( 5 1 8 ) 2 7 3 - 2 2 0 1

Library

Address

City

Zip

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Phone

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Other

Address

City

Zip

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Phone

( ) -

Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

VILLAGE OF GREEN ISLAND

SPDES ID

N	Y	R	2	0	A	3	7	7
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

VILLAGE DOCUMENTS COMPLAINT PROCEDURES IN WRITING AND POSTS ON SW COALITION WEBSITE; VILLAGE DOCUMENTS CONSTRUCTION SITE INSPECTION AND ENFORCEMENT PROCEDURES; VILLAGE DOCUMENTS EROSION CONTROL TRAINING OFFERED TO CONTRACTORS THAT WORK IN OUR COMMUNITY

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

COMPLAINTS CAN BE SENT TO SW COALITION WEBSITE; EROSION CONTROL SEMINAR TRAINING ANNOUNCEMENT WAS EMAILED TO A LIST OF 12 POTENTIAL PARTICIPANTS ON JANUARY 29, 2013. OUR BI/CEO ALSO ATTENDED AND RECEIVED HER CERTIFICATION ON 3/7/13. CERTIFICATION IS GOOD FOR THREE (3) YEARS FROM THE DATE OF ISSUANCE.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
--	--	--	---

*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

DURING THIS REPORTING YEAR, IT WAS ONLY THE SECOND TIME THAT WE HAVE HAD A SWPPP REVIEW UNDER THE NEW REGULATIONS. WHILE IT WENT WELL THE FIRST TIME, WE HAVE FURTHER ENHANCED THE INSPECTION PROCESS THIS YEAR BY CONTRACTING OUT THE INSPECTIONS TO A RESPECTED ENGINEERING FIRM.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

VILLAGE OF GREEN ISLAND
-------------------------

SPDES ID

N	Y	R	2	0	A	3	7	7
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**

Yes  No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**

Yes  No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**

Yes  No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**

		0
--	--	---

**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

1	0	0
---	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

VILLAGE OF GREEN ISLAND

SPDES ID

N	Y	R	2	0	A	3	7	7
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

SW COALITION SCORECARD INVENTORY COMPLETED; SWPPP REVIEW POLICIES IN PLACE; ALL MUNICIPAL, PLANNING AND ZONING BOARD MEMBERS WILL RECEIVE GI TRAINING

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

SCORECARD WAS COMPLETED IN 2012-2013; ALL PB AND ZB MEMBERS HAVE RECEIVED TRAINING IN GI PRACTICES; ALL VILLAGE BOARD MEMBERS RECEIVED SAME TRAINING AND MANY BOARD AND STAFF MEMBERS ATTENDED THE GREEN INFRASTRUCTURE BUS TOUR SPONSORED BY OUR COALITION.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

VILLAGE BOARD MEMBERS AND RELEVANT STAFF WILL RECEIVE ANNUAL TRAINING AS STATED

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

VILLAGE OF GREEN ISLAND
-------------------------

SPDES ID  

N	Y	R	2	0	A	3	7	7
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

VILLAGE OF GREEN ISLAND
-------------------------

SPDES ID  

N	Y	R	2	0	A	3	7	7
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

				2
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

				9
--	--	--	--	---
- Catch Basins Inspected and Cleaned Where Necessary # 

			1	0
--	--	--	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

				0
--	--	--	--	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--	--
- Pesticide/Herbicide Applied # Acres 

					.	
--	--	--	--	--	---	--

  
 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				2
--	--	--	--	---

**4. What was the date of the last training?**

0	2
---	---

 / 

2	7
---	---

 / 

2	0	1	4
---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

	2	6
--	---	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

1	0	0
---	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

VILLAGE OF GREEN ISLAND
-------------------------

SPDES ID

N	Y	R	2	0	A	3	7	7
---	---	---	---	---	---	---	---	---

**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.**

CATCH BASINS INSPECTED AND CLEANED
------------------------------------

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

MAINTENANCE AND INSPECTION PROGRAM RESULTED IN NO BACKFLOW ISSUES REPORTED DURING THE YEAR
--

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

WILL CONTINUE TO CLEAN AND MAINTAIN ON AN ANNUAL AND/OR AS NEEDED BASIS
---

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).





**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name 

K	E	N	N	E	T	H													
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 MI 

A
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 Last Name 

D	A	R	P	I	N	O													
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Title 

S	T	O	R	M	W	A	T	E	R		M	A	N	A	G	E	M	E	N	T		O	F	F	I	C	E	R										
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Address 

6	3	3	8		F	R	E	N	C	H	'	S		M	I	L	L		R	O	A	D																	
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City 

G	U	I	L	D	E	R	L	A	N	D																												
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 State 

N	Y
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 Zip 

1	2	0	8	5	-						
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eMail 

d	a	r	p	i	n	o	k	1	@	n	y	c	a	p	.	r	r	.	c	o	m																		
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Phone 

(	5	1	8	)		8	6	1	-	5	1	0	8
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 County 

A	l	b	a	n	y															
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**MS4 Municipal Compliance Certification (MCC) Form**

MCC form for period ending March 9, 2014

Name of MS4

SPDES ID  

N	Y	R	2	0	A	2	1	1
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**Section 3 - Partner Information**

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable  

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

Address

City

State

Zip

eMail

Phone

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?  Yes  No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

- MM1
- MM2
- MM3
- MM4
- MM5
- MM6

Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices* required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4 TOWN OF GUILDERLAND

SPDES ID

N Y R 2 0 A 2 1 1

**Section 4 - Certification Statement**

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name

K E N N E T H

MI

Last Name

R U N I O N

Title (Clearly print title of individual signing report)

S U P E R V I S O R T O W N O F G U I L D E R L A N D

Signature

Date

0 5 / 2 0 / 2 0 1 4

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505





### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
---------------------

SPDES ID  

N	Y	R	2	0	A	2	1	1
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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- |  |                     |  |   |   |   |   |   |
|--|---------------------|--|---|---|---|---|---|
| <input type="radio"/> Construction Site Operators Trained    | # Trained           | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Direct Mailings                        | # Mailings          | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays    | # Locations         | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td>3</td></tr></table> |   |   |   |   | 3 |
|  |                     |  |   | 3 |   |   |   |
| <input checked="" type="radio"/> List-Serves                 | # In List           | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>3</td><td>1</td><td>3</td></tr></table> |   |   | 3 | 1 | 3 |
|  |                     | 3  | 1 | 3 |   |   |   |
| <input type="radio"/> Mailing List                           | # In List           | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Newspaper Ads or Articles              | # Days Run          | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees         | <table border="1" style="display: inline-table;"><tr><td> </td><td>1</td><td>5</td><td>0</td><td>0</td></tr></table> |   | 1 | 5 | 0 | 0 |
|  | 1                   | 5  | 0 | 0 |   |   |   |
| <input checked="" type="radio"/> School Program              | # Attendees         | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>2</td><td>2</td><td>0</td></tr></table> |   |   | 2 | 2 | 0 |
|  |                     | 2  | 2 | 0 |   |   |   |
| <input type="radio"/> TV Spot/Program                        | # Days Run          | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Printed Materials:          | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>4</td><td>0</td><td>2</td></tr></table> |   |   | 4 | 0 | 2 |
|  |                     | 4  | 0 | 2 |   |   |   |

Locations (e.g. libraries, town offices, kiosks)

G	O		G	R	E	E	N		D	A	Y		H	E	L	D			
A	T		F	A	R	N	S	W	O	R	T	H		S	C	H	O	O	L
H	A	N	D		O	U	T	S		T	O								
R	E	S	I	D	E	N	T	S		O	N		K	R	U	M	K	I	L

Other:



Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

W	W	W	.		T	O	W	N	O	F	G	U	I	L	D	E	R	L	A	N	D	.	C	O	M				
S	T	O	R	M	W	A	T	E	R																				

URL



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

TOWN WAS TO EDUCATE AND HOLD EVENTS FOR PUBLIC AND EMPLOYEES.  
CONCENTRATE ON NORMANSKILL AND KRUMKILL WATER SHEDS.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

THE TOWN WAS AT " GO FOR GREEN DAY "(1500 STUDENTS AND RESIDENTS ATTENDED). WE HANDED OUT FLIERS TO TARGETED KRUMKILL RESIDENTS. ROAD SIDE CLEAN UP BY THE NORMASKILL. TRAINED ALMOST ALL EMPLOYEES THIS YEAR WHO WORK WITH STORMWATER.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

WE FELT VERY GOOD ABOUT ALL OUR EDUCATIONAL TRAINING AND WILL CONTINUE NEXT YEAR.









### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

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SPDES ID  

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#### 2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

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### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

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SPDES ID

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**3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?**

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

- MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department 

H	I	G	H	W	A	Y		D	E	P	A	R	T	M	E	N	T
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Address 

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City 

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 Zip

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- Library  Annual Report  SWMP Plan  Comments

Address 

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City 

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- Other  Annual Report  SWMP Plan  Comments

Address 

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City 

A	L	B	A	N	Y
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N	Y
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 Zip

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Phone 

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- Web Page URL:  Annual Report  SWMP Plan  Comments

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G	U	I	L	D	E	R	L	A	N	D	-	S	T	O	R	M	W	A	T	E	R	/	I	N	D	E	X

Please provide specific address of page where report can be accessed - not home page.

- eMail  Comments

S	W	C	O	A	L	I	T	I	O	N	@	A	L	B	A	N	Y	C	O	U	N	T	Y	.	C	O	M
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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

T	O	W	N	O	F	G	U	I	L	D	E	R	L	A	N	D
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SPDES ID

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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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0	5
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2	0	1	4
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**4.b. For how many days was/will this report be posted?**

1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

THE TOWN HAS SEVERAL RESIDENTS THAT PARTICIPATE IN ROAD SIDE CLEANUP. WE ALSO HAVE A RAIN GARDEN THAT VOLENTEERS HELP.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

THE TOWN HAS BEEN AGRESSIVE IN GETTING INFORMATION TO THE PUBLIC AND TRING TO GET RESIDENTS INVOLVED IN EVENTS.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

PLANS NEED TO BE SET SO GOALS ARE OBTAINABLE FOR THE FOLLOWING YEAR. EVERY YEAR, A LITTLE MORE AGRESSIVE APROACH WILL CONTINUE IN PUBLIC EDUCATION.







**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID									
N	Y	R	2	0					

**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

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**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.**

WE HAVE BEEN VERY ACTIVE IN ROAD BASIN CLEAN OUTS, AND STREET SWEEPING. RETENTION BASINS HAVE ALSO BEEN CLEAN OUT AND OUTFALL TESTING HAS BEEN DONE.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

TOWN HAS A GOOD RECORD KEEPING SYSTEM AND HAS BEEN ACTIVE EVERY YEAR IN STREET SWEEPING AND BASIN CLEANING. TOWN WILL CONTINUE TO CHECK OUTFALLS. THERE HAS BEEN NO COMPLAINTS IN REGARDS TO OUTFALLS.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

WE HAVE DEVELOPED A SYSTEM TO KEEP ON SCHEDULE AND MAINTAIN RECORDS.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:
- None

Grid for other discharge types

#### 4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

Grid for number of discharges

#### 5. How many illicit discharges have been confirmed during this reporting period?

Grid for number of confirmed discharges

#### 6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

Grid for number of eliminated discharges

#### 7. Has the storm sewershed mapping been completed in this reporting period?

Yes  No

If No, approximately what percent was completed in this reporting period?

25%

#### 8. Is the above information available in GIS?

Yes  No

Is this information available on the web?

Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

Grid for URL: P A S S W O R D P R O T E C T E D w w w . a i m s g i s . o r g / w e b m a p / \* \* R e s t r i c t e d A c c e s s \* \*

URL

Grid for additional URL information

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**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.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWNOF GUILDERLAND

SPDES ID

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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
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**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

	2	4
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**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

		0
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**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- Notices of Violation # 

					1
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 No Authority
- Stop Work Orders # 

--	--	--	--	--	--

 No Authority
- Criminal Actions # 

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 No Authority
- Termination of Contracts # 

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 No Authority
- Administrative Fines # 

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 No Authority
- Civil Penalties # 

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 No Authority
- Administrative Orders # 

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 No Authority
- Enforcement Actions or Sanctions # 

					1
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- Other # 

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 No Authority

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		2
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  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

	2	4
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  3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
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 %
  4. What percent of active construction sites were inspected more than once?  NT 

1	0	0
---	---	---

 %
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition TOWN OF GUILDERLAND

SPDES ID  
N Y R 2 0 A 2 1 1

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

T O W N O F G U I L D E R L A N D H I G H W A Y D E P

Address

6 3 3 8 F R E B C H ' S M I L L R O A D

City

G U I L D E R L A N D C T N

Zip

1 2 0 8 5 -

Phone

( 5 1 8 ) 8 6 1 - 5 1 0 8

Library

Address

City

Zip

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Phone

( ) -

Other

Address

City

Zip

-

Phone

( ) -

Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

ALL CONSTRUCTION SITES ARE MONITORED DURING ACTIVITIE AND EVENTS ARE RECORDED. ALL REPORTS AND INSPECTIONS ARE KEPT ON FILE.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

ALL CONSTRUCTION SITES ARE RECORDED AND MONITORED WITH FOLLOW UP INSPECTIONS AS NEEDED.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

WE HAVE A STRONG SYSTEM IN PLACE THAT SO THAT ALL ACTIVITIES ARE FOLLOWED UP ON AND RECORDED.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes  No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes  No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes  No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		0
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

	3	3
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 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements 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 REGULAR SCHEDULE WHERE WE CLEAN OUT STORM BASINS AND SWEEP STREETS ON A REGULAR BASINS. WE ALSO HAVE CLEARED OUT 15 RETENTION PONDS THIS SEASON.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

THE TOWN HAS DEVELOPED A GOOD POST CONSTRUCTION PRACTICE BY IMPLOMENTING THE PRECEDURES MENTIONED ABOVE.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

MAINTENANCE IS ON GOING YEARLY, WITH A SCHEDULE IN PLACE. ALL PAPER WORK IS ON FILE.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
Street Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Bridge Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Other.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

TOWN OF GUILDERLAND
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SPDES ID  

N	Y	R	2	0	A	2	1	1
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

				4
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

			4	7
--	--	--	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		3	6	5
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

			1	5
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

				0
--	--	--	--	---
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

		6	0	0
--	--	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

		9	0	.	
--	--	---	---	---	--

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				1
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**4. What was the date of the last training?**

0	2
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 / 

1	4
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 / 

2	0	1	3
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**5. How many municipal employees have been trained in this reporting period?**

	4	5
--	---	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

	9	5
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

TOWN OF GUILDERLAND

SPDES ID

N	Y	R	2	0	A	2	1	1
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

TRAINING OF TOWN EMPLOYEES WILL CONTINUE WITH SELF AUDITING.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

THE TOWN HAD A VERY GOOD TRAINING SEMINAR THIS YEAR. THERE IS ALWAYS ROOM FOR IMPROVEMENT NEEDED.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

THE TOWN DOES HAVE A TRAINING PROGRAM IN PLACE. WE WILL TRY TO UPDATE INFORMATION.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).



**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

Village of Menands
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SPDES ID 

N	Y	R	2	0	A	1	4	4
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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for each of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name 

M	e	g	a	n															
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 MI 

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 Last Name 

G	r	e	n	i	e	r													
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Title 

M	a	y	o	r															
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Address 

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City 

M	e	n	a	n	d	s													
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 State 

N	Y
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 Zip 

1	2	2	0	4	-				
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eMail 

v	i	l	l	a	g	e	o	f	m	e	n	a	n	d	s	@	h	o	t	m	a	i	l	.	c	o	m										
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Phone 

(	5	1	8	)		4	3	4	-	2	9	2	2
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 County 

A	l	b	a	n	y														
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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID

N Y R 2 0 A 1 4 4

**Section 4 - Certification Statement**

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name

M e g a n

MI

M

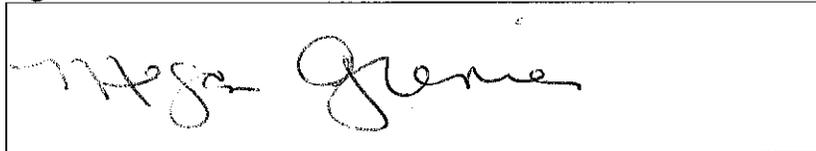
Last Name

G r e e n i e r

Title (Clearly print title of individual signing report)

M a y o r

Signature



Date

0 5 / 1 9 / 2 0 1 4

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
 Division of Water  
 4th Floor  
 625 Broadway  
 Albany, New York 12233-3505









**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands

SPDES ID

N	Y	R	2	0	A	1	4	4
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

Targeted Audiences. The Village prepared an article on the impact of bacteria and lawn runoff on the Village streets that connect into Broadway (NYS Route 32). The goal was to inform homeowners about the potential problem of bacteria and lawn runoff into Village catch basins and ultimately the Hudson River.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The Village received about 20 telephone calls and e-mails in response to the article.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village will continue to refine our BMPs with respect to Public Education and Outreach.













### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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 Menands

SPDES ID: N Y R 2 0 A 1 4 4

### 3. Where can the public access copies of this annual report, Stormwater Management Program (SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office       Annual Report       SWMP Plan       Comments

Department

V i l l a g e   O f f i c e

Address

2 5 0   B r o a d w a y

City

M e n a n d s

N Y

Zip

1 2 2 0 4 -

Phone

( 5 1 8 ) 4 3 4 - 2 9 2 2

Library       Annual Report       SWMP Plan       Comments

Address

City

Zip

-

Phone

( ) -

Other       Annual Report       SWMP Plan       Comments

Address

City

Zip

-

Phone

( ) -

Web Page URL:       Annual Report       SWMP Plan       Comments

Please provide specific address of page where report can be accessed - not home page.

eMail       Comments

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands

SPDES ID

N	Y	R	2	0	A	1	4	4
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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 / 
 

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**
 Yes    No

If Yes, what was the date of the meeting?

0	6
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 / 
 

1	7
---	---

 / 
 

2	0	1	3
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If No, is one planned?

 Yes    No
**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**
 Yes    No

If No, is one planned for each?

 Yes    No
**6. Were comments received during this reporting period?**
 Yes    No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village will continue to develop SWMP Measurable Goals to improve Public Involvement and Participation. The Village will post the Annual Report on the Village website by July, 2014.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

We have begun to receive more inquiries about the program as a result of the initiation of the Stormwater Coalition website.

**C. How many times was this observation measured or evaluated in this reporting period?**

		1	0
--	--	---	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village will develop MS4 compliant public participation activities by October 1, 2014.





### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

### 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department

S t o r m w a t e r C o a l i t i o n - A l b a n y C n t y

Address

1 1 2 S t a t e S t r e e t , R o o m 7 2 0

City

A l b a n y

N Y

Zip

1 2 2 0 7 -

Phone

( 5 1 8 ) 4 4 7 - 5 6 4 5

Library  Annual Report  SWMP Plan  Comments

Address

City

Zip

-

Phone

( ) -

Other  Annual Report  SWMP Plan  Comments

Address

City

Zip

-

Phone

( ) -

Web Page URL:  Annual Report  SWMP Plan  Comments

w w w . s t o r m w a t e r a l b a n y c o u n t y . o r g

Please provide specific address of page where report can be accessed - not home page.

eMail  Comments

s w c o a l i t i o n @ a l b a n y c o u n t y . c o m

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID  

N	Y	R	2	0					
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

0	5	/	0	2	/	2	0	1	4
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**4.b. For how many days was/will this report be posted?**

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands
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SPDES ID

N	Y	R	2	0	A	1	4	4
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.**

The Village will verify all outfalls during the Summer of 2014.
---

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The field observations from the verification effort will improve the effectiveness of our program. This work will be done with the assistance of Stormwater Coalition staff.
--

**C. How many times was this observation measured or evaluated in this reporting period?**

		1	8
--	--	---	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

See comments in Boxes A and B.
--------------------------------

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:
- None

Grid for additional information

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

Grid for count

5. How many illicit discharges have been confirmed during this reporting period?

Grid for count

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

Grid for count

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No

If No, approximately what percent was completed in this reporting period?

25%

8. Is the above information available in GIS?  Yes  No

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

Grid containing URL: www.aimsgis.org/webmap/

URL

Grid for additional URLs

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**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.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID

N	Y	R	2	0	A	1	4	4
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?  Yes  No
- 1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

2. Does your MS4/Coalition have a SWPPP review procedure in place?  Yes  No
3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period? 

		1
--	--	---
4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?  Yes  No  NT
- If Yes, how many public comments were received during this reporting period? 

		0
--	--	---
5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- Notices of Violation # 

					0
--	--	--	--	--	---

 No Authority
- Stop Work Orders # 

--	--	--	--	--	--

 No Authority
- Criminal Actions # 

--	--	--	--	--	--

 No Authority
- Termination of Contracts # 

--	--	--	--	--	--

 No Authority
- Administrative Fines # 

--	--	--	--	--	--

 No Authority
- Civil Penalties # 

--	--	--	--	--	--

 No Authority
- Administrative Orders # 

--	--	--	--	--	--

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--	--
- Other # 

--	--	--	--	--	--

 No Authority

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID  

N	Y	R	2	0	A	1	4	4
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		1
--	--	---
  
  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		0
--	--	---
  
  3. What percent of active construction sites were inspected during this reporting period?  NT 

		0
--	--	---

 %
  
  4. What percent of active construction sites were inspected more than once?  NT 

		0
--	--	---

 %
  
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 1 4 4

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

V i l l a g e O f f i c e

Address

2 5 0 B r o a d w a y

City

M e n a n d s

N Y

Zip

1 2 2 0 4 -

Phone

( 5 1 8 ) 4 3 4 - 2 9 2 2

○ Library

Address

City

Zip

-

Phone

( ) -

○ Other

Address

City

Zip

-

Phone

( ) -

○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands

SPDES ID

N	Y	R	2	0	A	1	4	4
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village has developed a SWPP review procedure to facilitate SWPP implementation. This process is supplemented by support from our VDE.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

We have only received one SWPP during this reporting period. However, we have been able to coordinate in-house and VDE review procedures.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village will increase site monitoring as the one project that we have in house goes forward.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands
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SPDES ID

N	Y	R	2	0	A	1	4	4
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes  No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes  No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes  No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		0
--	--	---

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

1	0	0
---	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands

SPDES ID

N	Y	R	2	0	A	1	4	4
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village will increase site inspections for the one project that we presently have as well as for any others that are submitted.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The submission of a SWPP for the first time in several years was a catalyst to the developing of our review procedures.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The Village will have the benefit of the results of the construction site inspections for the one project that we have in house.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Village of Menands
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SPDES ID 

N	Y	R	2	0	A	1	4	4
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Menands

SPDES ID

N	Y	R	2	0	A	1	4	4
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

--	--	--	--	--
- Streets Swept (Number of miles X Number of times swept) # Miles 

			2	4
--	--	--	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

			2	0
--	--	--	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Pesticide/Herbicide Applied # Acres 

					.	
--	--	--	--	--	---	--

  
(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				1
--	--	--	--	---

**4. What was the date of the last training?**

0	4	/	1	4	/	2	0	1	3
---	---	---	---	---	---	---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

		1	2
--	--	---	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

1	0	0	%
---	---	---	---

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	1	4	4
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The Village will be conducting a training session for new employees in the Summer of 2014. This will include approximately 10 seasonable employees.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The Village will provide each trainee with an evaluation sheet to determine the effectiveness of the training.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

See comments in Box B.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).









**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID

N Y R 2 0 A 4 6 3

**Section 4 - Certification Statement**

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name

T h o m a s

MI

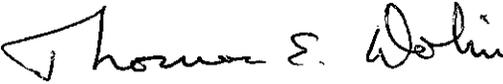
Last Name

D o l i n

Title (Clearly print title of individual signing report)

S u p e r v i s o r

Signature



Date

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Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505





### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
----------------------

SPDES ID  

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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- |   |                     |  |   |   |  |   |   |
|---|---------------------|--|---|---|--|---|---|
| <input type="radio"/> Construction Site Operators Trained | # Trained           | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |  |   |   |
|   |                     |  |   |   |  |   |   |
| <input type="radio"/> Direct Mailings                     | # Mailings          | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |  |   |   |
|   |                     |  |   |   |  |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations         | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td>1</td></tr></table> |   |   |  |   | 1 |
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| <input checked="" type="radio"/> List-Serves              | # In List           | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td>2</td><td>0</td></tr></table> |   |   |  | 2 | 0 |
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| <input type="radio"/> Mailing List                        | # In List           | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |  |   |   |
|   |                     |  |   |   |  |   |   |
| <input type="radio"/> Newspaper Ads or Articles           | # Days Run          | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |  |   |   |
|   |                     |  |   |   |  |   |   |
| <input type="radio"/> Public Events/Presentations         | # Attendees         | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |  |   |   |
|   |                     |  |   |   |  |   |   |
| <input type="radio"/> School Program                      | # Attendees         | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |  |   |   |
|   |                     |  |   |   |  |   |   |
| <input type="radio"/> TV Spot/Program                     | # Days Run          | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |  |   |   |
|   |                     |  |   |   |  |   |   |
| <input checked="" type="radio"/> Printed Materials:       | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td>5</td><td>8</td></tr></table> |   |   |  | 5 | 8 |
|   |                     |  | 5 | 8 |  |   |   |

Locations (e.g. libraries, town offices, kiosks)

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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland
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SPDES ID

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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) Finalized Target Audience Work Sheet. 2) Identify geographic areas of Concern. 3) Identify any Possible POCs. 4) Finalize priority measurable goals. 5) Prioritize educational effort based on analysis. 6) Acquire appropriate literature to distribute. 7) Replenish publications inventory as needed.
---

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) Identified on-site septic systems for possible POCs of bacteria and viruses and created a detailed list of geographic areas of concern in the finalized Target Audience Analysis Worksheets. Acquired print order "Your Septic System info" and "Septic System Maintenance Logs" to distribute to approximately 550 homeowners. (No summary measurement can be made as educational info has yet to be distributed. 2) Website has been updated. 3) Publications replenished as needed.
---

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) Mail out brochures to residents identified in the target audience by 3/9/2015. 2) Track effectiveness of public education through citizen complaints and IDDE results. 3) continue to promote coalition web casts. 4) Continue to update Coalition list serve. Continue to keep websites updated.
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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County																																							
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**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.**

By 3/9/2014, using Target Audience Analysis Worksheet, members will update public education and outreach measurable goals, and provide for Coalition staff print orders for brochures and other educational material. Worksheet design and Coalition structure continues to facilitate inter-municipal, watershed based public education initiatives (For Coalition task schedule, see SWMP posted on website: BMP 1-1 Target Audience Analysis Wksheet & BMP 1-1 Publications)

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

Coalition members provided print orders and also developed new educational brochures (pet waste and commercial waste) better suited to geographic areas of concern and pollutants of concern identified in the Target Audience Analysis Worksheet. Identified target audiences included commercial businesses with dumpsters near/in watersheds with 303d impaired segments; property owners with septic systems; residents living on/near streams; pet owners (literature at animal shelter).

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 1-1 Target Audience Analysis Wksheet (TAAW): 1) Update Map Set-2010 urbanized area; 2) To insure that public education activities "fit" areas of concern identified in TAAW and can be adequately funded and staffed, collect Priority Measurable Goal sheets from all members. BMP 1-3 Website: Correct to/from member links on website, increase unique visitor by 200, use website for public comments. BMP 1-7 List Serve: Make current all contact info of elected/appointed officials.







### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

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**3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?**

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

- MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department  

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- Library  Annual Report  SWMP Plan  Comments

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- Other  Annual Report  SWMP Plan  Comments

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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland									
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland
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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.**

Annual maintenance up-date of contacts(Names,phone numbers and other dated items on places used for public notices. 2) Work with Coalition to decide on method of filing annual report. 3) SWMP BMP's and measureable goals to be evaluated with any revision needs to be filed with the SWMP and entered into the "Permit Manager"
---

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) Training by Coalition was conducted with Municipal Public Contact for Permit Manager. 2) SWMP,BMP's, and Measurable goals were revisited, goals and completion dates were identified. 3) Public contact and websites were updated.
---

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) Update SWMP data managed using MS4web (CBI) 2) BMP 2-6 Clean up activities: Update Hazardous Household Waste Day Flier to include water quality message.
--





### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

### 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department

S t o r m w a t e r C o a l i t i o n - A l b a n y C n t y

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Library  Annual Report  SWMP Plan  Comments

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eMail  Comments

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**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

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.**

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

**C. How many times was this observation measured or evaluated in this reporting period?**

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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

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2	0	1	4
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Name of MS4/Coalition 

Town of New Scotland
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SPDES ID

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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

- 1) Continue to document and address complaints of failing septic systems or any other illicit discharges utilizing ACDOH as needed.
- 2) Continue to be alert for cross connections during routine building and fire inspections.
- 3) Utilize coalition staff for outfall testing of any new outfalls discovered.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

- 1) Two septic system failures were detected. Both failures had discharge off site. One was repaired. The discharge was eliminated on the second site with the help of Albany County Department of Health, DEC, and with help of the town court. Engineers are finishing up paperwork for a SPDES permit to finalize the repair. Facility self Audit was performed and a floor drain connection to the storm sewer was detected. Town is currently determining the best way to remedy the issue.

**C. How many times was this observation measured or evaluated in this reporting period?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

- 1) Continue to address complaints for failing septic systems and utilize ACDOH as needed.
- 2) Continue to be on the alert for cross connections during routine building and fire inspections.
- 3) Utilize Coalition staff to test any new outfalls.
- 4) Continue to monitor progress of floor drain discharge elimination and to report back to D.E.C. when any progress occurs and to notify them when discharge is eliminated.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:
- None

Grid for other discharge types

#### 4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

Grid for number of discharges

#### 5. How many illicit discharges have been confirmed during this reporting period?

Grid for number of confirmed discharges

#### 6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

Grid for number of eliminated discharges

#### 7. Has the storm sewershed mapping been completed in this reporting period? Yes No

If No, approximately what percent was completed in this reporting period?

25%

#### 8. Is the above information available in GIS? Yes No

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

Grid containing URL: www.aimsgis.org/webmap/

URL

Grid for additional URLs

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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**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.**

None previously.

**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?**

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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	3
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No
- 1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

- 2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No
- 3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

		4
--	--	---
- 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? 

	1	3
--	---	---
- 5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- Notices of Violation # 

--	--	--	--	--	--

 ○ No Authority
- Stop Work Orders # 

--	--	--	--	--	--

 ○ No Authority
- Criminal Actions # 

--	--	--	--	--	--

 ○ No Authority
- Termination of Contracts # 

--	--	--	--	--	--

 ○ No Authority
- Administrative Fines # 

--	--	--	--	--	--

 ○ No Authority
- Civil Penalties # 

--	--	--	--	--	--

 ○ No Authority
- Administrative Orders # 

--	--	--	--	--	--

 ○ No Authority
- Enforcement Actions or Sanctions # 

				3	
--	--	--	--	---	--

 ○ No Authority
- Other # 

--	--	--	--	--	--

 ○ No Authority

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	3
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		2
--	--	---
  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		8
--	--	---
  3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
---	---	---

 %
  4. What percent of active construction sites were inspected more than once?  NT 

1	0	0
---	---	---

 %
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

**6. con't.:**

Submit additional pages as needed.

**MS4/Coalition Office**

Department

Address

City

Zip

Phone

(  )  -

**Library**

Address

City

Zip

-

Phone

(  )  -

**Other**

Address

City

Zip

-

Phone

(  )  -

**Web Page URL(s):** Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland
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SPDES ID

N	Y	R	2	0	A	4	6	3
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) Continue to document the number of SWPPP's reviewed, the number of complaints received and the disposition of the complaints. 2) Maintain documentation for MS4 inspections and review and file construction duration inspections by owner/operator. 3) Continue to document relevant staff training.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) Several projects were submitted for review and 4 SWPPPs were required to be submitted during the last reporting period. 2) Zero complaints were received, inspections were made with most not needing any further action other than verbal direction given to the permittee for the construction site to follow best management practices with follow up to insure compliance.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The town will continue to conduct it's SWPPP reviews, site inspection, and enforcement as described in our adopted procedures and maintain records as it currently does with the aid of it's recently upgraded building permit software.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland
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SPDES ID

N	Y	R	2	0	A	4	6	3
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**

Yes  No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**

Yes  No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**

Yes  No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**

		0
--	--	---

**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

	8	0
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Town of New Scotland

SPDES ID

N	Y	R	2	0	A	4	6	3
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) Promote educational opportunities for Town Officials, Town Staff identified in our organizational chart as well as any other relevant positions within the town's work force. 2) Document all staff training, relevant correspondence, and complaints received.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

1) Training of local officials is ongoing and documented by the SMO in the designated SWMPP filing cabinet located in the Building Department. 2) Developed a town wide inventory of established non structural stormwater practices within our MS4.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) Continue to promote and track attendance of Town Officials and relevant staff's training. 2) Maintain town wide non structural stormwater practice inventory.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID  

N	Y	R	2	0	A	4	6	3
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
--	--	---

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
Street Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Bridge Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Other.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID

N	Y	R	2	0	A	4	6	3
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

				2
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

		1	0	0
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

				6
--	--	--	--	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

				3
--	--	--	--	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

				0
--	--	--	--	---
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

				0
--	--	--	--	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

			0	.	0
--	--	--	---	---	---

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				1
--	--	--	--	---

**4. What was the date of the last training?**

	1
--	---

 / 

3	1
---	---

 / 

2	0	1	4
---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

	2	3
--	---	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

	9	2
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Town of New Scotland
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SPDES ID

N	Y	R	2	0	A	4	6	3
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

1) Create an inventory of all fixed Municipal Facilities and Operations. 2) Reassess all fixed Municipal Facilities and Operations as listed in the inventory, to include 3 BMP summary sheets and appropriate audit forms. 3) The town will inspect and clean as needed 25% of it's catch basins. 4) The Town will identify, by name and department, those using pesticides. 5) The town will sweep 50% of it's municipally owned parking acreage and properly dispose of spoils.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

An Inventory was created of all fixed municipal facilities and operations. Self audit inspection reports documented. Town Officials have decided to eliminate the plan for a new DPW/Highway garage and has engineering consultants working on a cost/benefit analysis of different oil/water separator designs and the town will fix floor drain system in the existing building. SMO will keep D.E.C. updated. Identified Park employee who uses round up for trim areas on an as needed basis.

**C. How many times was this observation measured or evaluated in this reporting period?**

			3
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

1) Town will inspect and clean as needed a minimum of 25% of it's catch basins. 2) The town will sweep 50% of it's municipally owned parking acreage. 3) Update inventory of fixed municipal operations and facilities. 4) Reassess and document all municipal operations and facilities as listed on inventory and complete assessment of created BMPs for compliance. 5) Continue to promote educational opportunities for relevant staff identified in organizational chart and elected officials .

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--	--

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 

2	0	1	4
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Name of MS4 

City of Watervliet
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SPDES ID

N	Y	R	2	0	A	0	8	7
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Each MS4 must submit an MCC form.

## Section 1 - MCC Identification Page

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y
C	o	u	n	t	y																								





**MS4 Municipal Compliance Certification (MCC) Form**

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID  
N Y R 2 0 A 0 8 7

**Section 3 - Partner Information**

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S t o r m w a t e r C o a l i t i o n o f A l b a n y

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 1 2 S t a t e S t r e e t R o o m 7 2 0

City

A l b a n y

State

N Y

Zip

1 2 2 0 7 -

eMail

n h e i n z e n @ a l b a n y c o u n t y . c o m

Phone

( 5 1 8 ) 4 4 7 - 5 6 4 5

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?  Yes  No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

- MM1 E d u c a t i o n M a t e r i a l & P r o g r a m s
- MM2 S W M P R e v i e w - W e b s i t e / P u b l i c I n p u t
- MM3 S t o r m S y s t e m M a p ' g - A I M S - O R I
- MM4 P r o c e d u r e s S u p p o r t
- MM5 G I M o d e l L o c a l L a w - G I T r a i n i n g
- MM6 T r a i n i n g S u p p o r t

Additional tasks/responsibilities

- *Watershed Improvement Strategy Best Management Practices* required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2 0 1 4

SPDES ID

Name of MS4

**Section 4 - Certification Statement**

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature



Date

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505





### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
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SPDES ID  

N	Y	R	2	0	A	0	8	7
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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- |  |                     |  |   |   |   |   |   |
|--|---------------------|--|---|---|---|---|---|
| <input type="radio"/> Construction Site Operators Trained    | # Trained           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Direct Mailings             | # Mailings          | <table border="1" style="width: 100%;"><tr><td> </td><td>1</td><td>0</td><td>0</td><td>0</td></tr></table>               |   | 1 | 0 | 0 | 0 |
|  | 1                   | 0  | 0 | 0 |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays    | # Locations         | <table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td>2</td></tr></table>               |   |   |   |   | 2 |
|  |                     |  |   | 2 |   |   |   |
| <input type="radio"/> List-Serves                            | # In List           | <table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>               |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Mailing List                           | # In List           | <table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>               |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Newspaper Ads or Articles              | # Days Run          | <table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>               |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees         | <table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td>3</td><td>3</td></tr></table>               |   |   |   | 3 | 3 |
|  |                     |  | 3 | 3 |   |   |   |
| <input type="radio"/> School Program                         | # Attendees         | <table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>               |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> TV Spot/Program             | # Days Run          | <table border="1" style="width: 100%;"><tr><td> </td><td> </td><td>4</td><td>6</td><td>8</td></tr></table>               |   |   | 4 | 6 | 8 |
|  |                     | 4  | 6 | 8 |   |   |   |
| <input checked="" type="radio"/> Printed Materials:          | Total # Distributed | <table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td>6</td><td>4</td></tr></table>               |   |   |   | 6 | 4 |
|  |                     |  | 6 | 4 |   |   |   |

Locations (e.g. libraries, town offices, kiosks)

C	i	t	y		H	a	l	l		B	r	o	c	h	u	r	e			
K	e	e	p		V	l	i	e	t		N	e	a	t		D	a	y		

Other: 

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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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URL




**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

After Completion of the Target Audience Worksheet, the City updated its pollutants of concern. With this the City distributed material pertaining to its POC. The City used this printed material which were handed out to residents both at houses and businesses and at events that were put on by the City. The City also put storm drain markers on 50 catch basins that are in high walking traffic areas.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

By handing out printed material at events it helps to engage the public at a more interested level to stormwater practices. The storm drain markers with the relating door hanger handouts, help inform the residents of the stormwater practices associated within their immediate surroundings.

**C. How many times was this observation measured or evaluated in this reporting period?**

			5
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City, with the help of the coalition will continue to use the printed materials and update the content of this material. The City will look to target businesses within the Dry River/Salt Kill watersheds.













### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
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SPDES ID

N	Y	R	2	0	A	0	8	7
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**3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?**

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

- MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department  

W	a	t	e	r	v	l	i	e	t	F	i	l	t	e	r	P	l	a	n	t						
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City  

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Zip

1	2	1	8	9	-				
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Phone  

(	5	1	8	)		7	8	5	-	7	0	8	2
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- Library  Annual Report  SWMP Plan  Comments

Address  

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City  

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Zip

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Phone  

(				)					-				
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- Other  Annual Report  SWMP Plan  Comments

Address  

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City  

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Zip

1	2	1	8	9	-				
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Phone  

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- Web Page URL:  Annual Report  SWMP Plan  Comments

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i n d e x . p h p ? o p t i o n = c o m c o n t e n t & v i  
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Please provide specific address of page where report can be accessed - not home page.

- eMail  Comments


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
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SPDES ID

N	Y	R	2	0	A	0	8	7
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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

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**4.b. For how many days was/will this report be posted?**

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

0	5	/	1	5	/	2	0	1	4
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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The City continues to do the "Keep Vliet Neat Day" clean-up activity that has volunteers go around and pick-up garbage in its parks.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The City had 33 volunteers for the clean-up event.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City will continue its "Keep Vliet Neat Day" clean-up event going. The City will look at updating its public contact information with regards to its organizational chart to help streamline the process.







**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County									
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SPDES ID  

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**4.a. If this report was made available on the internet, what date was it posted?**

Leave blank if this report was not posted on the internet.

0	5	/	0	2	/	2	0	1	4
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**4.b. For how many days was/will this report be posted?**

	1	4
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

As stated in SWMP BMP 2-11 WAVE-Wadeable Assessments for Volunteer Evaluators, by 9/30/2013 Coalition staff researches how and if Coalition members could integrate their need to develop MS4 Permit compliant public participation activities with the objectives of the NYSDEC WAVE program.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The NYSDEC WAVE program was a pilot program in 2012 (summer) and judging from continued promotion of WAVE trainings, it appears to be a DEC initiative likely to last. While little was done last year to actively pursue WAVE, it's continued presence now, two years later, makes it an attractive way to engage volunteers in stream monitoring, while generating useful data. Integrating WAVE into Coalition operations is clearly worth pursuing.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 2-3 SWMP: Update with and/or for members SWMP data managed using MS4web (CBI), secure student intern help, coordinate with members content of updates (drop/add BMPS, revise measurable goals), complete two SWMP updates (Coalition, 1 member). BMP 2-6 Clean Up Activities: Write/distribute at collection locations, a generic "Thank You" on Coalition letterhead which also explains stormwater pollution, waste disposal, gross solids, impact on water quality.







**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
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SPDES ID

N	Y	R	2	0	A	0	8	7
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The City along with the coalition finished its GI Modal Local Law Project. This project has been used as a guidance document within the City's zoning codes.  
The City had 2 sewer backups that were caused by tree roots/debris clogging the sewer mains.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

While not all of the GI Local Law codes fit the cities needs, some were used as guidance when the City revamped it's zoning codes this past year.  
The sewer backups were immediately found and eliminated.

**C. How many times was this observation measured or evaluated in this reporting period?**

			3
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City will look to complete the rest of the stormwater mapping that is outside of the Dry River and Salt Kill watersheds.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:
- None

Grid for other discharge types

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

Grid for number of discharges

5. How many illicit discharges have been confirmed during this reporting period?

Grid for number of confirmed discharges

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

Grid for number of eliminated discharges

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No

If No, approximately what percent was completed in this reporting period?

25%

8. Is the above information available in GIS?  Yes  No

Is this information available on the web?  Yes  No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

Grid containing URL: www.aimsgis.org/webmap/

URL

Grid for additional URLs

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

Stormwater Coalition of Albany County
---------------------------------------

SPDES ID  

N	Y	R	2	0				
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

**C. How many times was this observation measured or evaluated in this reporting period?**

--	--	--	--

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 3-1 Map Outfalls: Provide for members, a sample form to use as construction projects are finished which notes # and location of new outfalls. BMP 3-2 AIMS: 1) Update map layers; 2) Organize member wide session to evaluate AIMS. BMP 3-4 Storm System/Sewershed Mapping: Coalition staff assist with system mapping as requested and in 2014 Coalition budget (Krumkill, Patroon, Salt Kill watersheds); BMP 3-5 ORI: 1) Restock kits; 2) Coalition staff assist ORI work.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
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**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

**2. Does your MS4/Coalition have a SWPPP review procedure in place?**  Yes  No

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

		1
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**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

		0
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**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- Notices of Violation # 

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 ○ No Authority
- Stop Work Orders # 

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 ○ No Authority
- Criminal Actions # 

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 ○ No Authority
- Termination of Contracts # 

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 ○ No Authority
- Administrative Fines # 

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 ○ No Authority
- Civil Penalties # 

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 ○ No Authority
- Administrative Orders # 

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 ○ No Authority
- Enforcement Actions or Sanctions # 

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 ○ No Authority
- Other # 

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 ○ No Authority

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4  
 On behalf of a coalition

How many MS4s contributed to this report? 

		1
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		1
--	--	---
  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		1
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  3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
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 %
  4. What percent of active construction sites were inspected more than once?  NT 

1	0	0
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 %
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The City has one active site regarding a SWPPP. The site is being inspected by a qualified inspector weekly.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

The SWPPP has been maintained and effective for the erosion and sediment control needed at this site.

**C. How many times was this observation measured or evaluated in this reporting period?**

			1
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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City is looking at updating its SWPPP review procedures to help streamline this process better.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.



**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
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SPDES ID  

N	Y	R	2	0	A	0	8	7
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**4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?**

Yes     No

**4b. Does the MS4 have a banking and credit system for stormwater management practices?**

Yes     No

**4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?**

Yes     No

**4d. How many stormwater management practices have been implemented as part of this system in this reporting period?**

		0
--	--	---

**5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?**

	7	5
--	---	---

 %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The City inspects and maintains the post construction practices it's responsible for. These include open channel protection from erosion and the cleaning of floatables from 3 stormwater treatment facilities.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

A large amount of floatables and sediment are cleaned out of the treatment systems each year.

**C. How many times was this observation measured or evaluated in this reporting period?**

			2
--	--	--	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City will continue to inspect and maintain the post construction practices and will inventory any new practices that come about.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 4-2, 4-4, 4-5, 4-6, 5-5, 5-9: For all BMP Procedures named in Coalition SWMP (MCM 4 and MCM 5) by 3/2015, monitor and support the completion of functional procedures for all Coalition members as guided by regulators (EPA and NYSDEC); procedure information is also posted on Coalition website.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9,**

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Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	0	8	7
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

		1
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**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Watervliet
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SPDES ID

N	Y	R	2	0	A	0	8	7
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

--	--	--	--	--
- Streets Swept (Number of miles X Number of times swept) # Miles 

	1	4	7	6
--	---	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		1	2	5
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

				4
--	--	--	--	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

		1	7	0
--	--	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

			6	.	
--	--	--	---	---	--

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

				5
--	--	--	--	---

**4. What was the date of the last training?**

0	1	/	3	1	/	2	0	1	4
---	---	---	---	---	---	---	---	---	---

**5. How many municipal employees have been trained in this reporting period?**

	3	6
--	---	---

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**

	9	0	%
--	---	---	---

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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Name of MS4/Coalition

City of Watervliet

SPDES ID

N	Y	R	2	0	A	0	8	7
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

The City has increased its organic waste participation to 88 residents. The City continues its street sweeping and catch basin cleaning program. The catch basin inventory was unable to be completed this year do to time and weather but will look to complete this survey this year. The City did 3 electronic recycling days. The City handed out informational brochures on stormwater at city related events.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

While the organic waste intake stayed about the same, 6.5 tons, the City just added 28 more participants. These newly added participants will help to decrease the garbage intake and increase its organic intake. The electronic recycling days continue to be successful. The catch basin and street sweeping programs continue to be successful in keeping sediment and floatables out of the storm system.

**C. How many times was this observation measured or evaluated in this reporting period?**

			4
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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City will continue its catch basin and street sweeping program. It will also look to finish the catch basin inventory. The City will look to update its facilities inventory and BMPs. The City is going to start an organic waste digester program where it takes the organic waste being collected and composts it into a reusable resource. By doing this the City will be looking to increase its participation of this program.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.**

None previously.

**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?**

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*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

BMP 6-1 and 6- 2 Inventory and Assessment-Municipal Facilities and Operations: As requested by Coalition members and included in 2014 budget, Coalition staff review/update facility and operations inventory, complete assessments (self audits), develop facility BMPs. BMP 6-9 Staff Training: Coalition staff/members develop a multi-part "road show" for elected/appointed officials, & staff which teaches critical stormwater concepts (CWA, stormwater science, \$/management).

### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9,** 2 0 1 4

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID  
N Y R 2 0          

### Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?   1 2

**MS4s must answer the questions or check NA as indicated in the table below.**

MS4 Description	Answer	Check NA	(POC)
<b>NYC EOH Watershed</b>			
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
<b>Onondaga Lake Watershed</b>			
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
<b>Greenwood Lake Watershed</b>			
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
<b>Oyster Bay</b>			
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
<b>Peconic Estuary</b>			
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
<b>Oscawana Lake Watershed</b>			
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
<b>LI 27 Embayments</b>			
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

**1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?**  Yes  No  N/A

**2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?**  Yes  No  N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.       %

Estimate what percentage was mapped in this reporting period.       %

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 

2	0	1	4
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Name of MS4/Coalition 

Stormwater Coalition of Albany County
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SPDES ID  

N	Y	R	2	0				
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3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program?  Yes  No  N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period? 

--	--	--

 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more?  Yes  No  N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards?  Yes  No  N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading?  Yes  No  N/A

7b. How many projects have been sited in this reporting period? 

--	--	--

7c. What percent of the projects included in 7b have been completed in this reporting period? 

--	--	--

 %

7d. What percent of projects planned in previous years have been completed? 

--	--	--

 %  
 No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands?  Yes  No  N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands?  Yes  No  N/A

**MS4 Annual Report Form**

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2	0	1	4
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Name of MS4/Coalition 

Stormwater Coalition of Albany County
---------------------------------------

SPDES ID

N	Y	R	2	0					
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9. Has your MS4/Coalition developed and implemented a program of native planting?  
 Yes  No  N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?  
 Yes  No  N/A
11. Does your MS4/Coalition have a pet waste bag program?  
 Yes  No  N/A
12. Does your MS4/Coalition have a program to manage goose populations?  
 Yes  No  N/A