

May 31, 2022

NYSDEC
Bureau of Water Permits
625 Broadway, 4th Floor
Albany, NY 12233-3505

Attn: Ethan Sullivan, MS4 Permit Coordinator

Re: **Ontario-Wayne Stormwater Coalition 2021-2022** **2289-22**
Joint MS4 Annual Report SPDES General Permit GP-0-15-003

Dear Ethan:

Please accept the following 2021-2022 Joint MS4 Annual Report on behalf of the Ontario-Wayne Stormwater Coalition. The report is being submitted in compliance with the requirements of the SPDES General Permit GP-0-15-003 on behalf of eight (8) MS4 members (Town of Farmington, Town of Macedon, Ontario County Highway Department, Town of Ontario, Town of Victor, Village of Victor, Town of Walworth, and Wayne County Highway Department).

The attached report includes a Municipal Compliance Certification Form with the signature page for each of the eight (8) MS4s.

The Draft 2021-2022 Joint MS4 Annual Report was posted on the Ontario-Wayne Stormwater Coalition website on April 29, 2022, and as of today, the Coalition has not received any public comments on this Annual Report. The Final 2021-2022 Joint MS4 Annual Report will be posted on the Ontario-Wayne Stormwater Coalition website where it will remain indefinitely.

Should you have any questions regarding this submission, please contact us at 585-377-7360 ext. 133, or email at kboyd@bmepc.com.

Sincerely,
BME Associates

Kimberly Boyd

Kimberly Boyd, CFM, CPESC, CPSWQ, CPMSM

/KB

Enclosure

c: Luke Scannell; NYSDEC, Region 8 (via email)

Ontario-Wayne Stormwater Coalition 2021-2022 Joint MS4 Annual Report

To Be Submitted to

NYS DEC MS4 Coordinator
Bureau of Water Permits
Albany, NY

In Compliance with the Requirements of
SPDES General Permit
GP-0-15-003

Prepared for:
**The Ontario-Wayne
Stormwater Coalition**

Prepared by:



10 LIFT BRIDGE LANE EAST
FAIRPORT, NEW YORK 14450

May 31, 2022

#2289-22

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, 2022

Name of MS4

SPDES ID

N Y R 2 0 A 1 1 0

Section 4 - Certification Statement

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

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

First Name

P e t e r

MI

V

Last Name

I n g a l s b e

Title (Clearly print title of individual signing report)

T o w n S u p e r v i s o r

Signature



Date

0 3 / 2 2 / 2 0 2 2

The annual report form and any attachments can be sent to the DEC Central Office clicking the Submit Form link below, or by sending it directly to: MS4compliance@dec.ny.gov. All submissions must include the SPDES ID in the title and must be complete before hitting the Submit Form link below:

Submit Form

If unable to submit electronically, hardcopy submissions can be sent to:

Bureau of Water Compliance
 Division of Water
 4th Floor
 625 Broadway
 Albany, New York 12233-3505

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4

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Section 2 - Contact Information

Important Instructions - Please Read

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

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, 2022

Name of MS4

SPDES ID

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

Partner/Coalition Name (con't.)

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

For each contact, select all that apply:

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

First Name

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 Last Name

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2022

Name of MS4 TOWN OF VICTOR

SPDES ID
N Y R 2 0 A 2 4 9

Section 4 - Certification Statement

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

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

First Name MI Last Name
J a c k M a r r e n

Title (Clearly print title of individual signing report)
T o w n S u p e r v i s o r

Signature
Jack Marren
Digitally signed by Jack Marren
Date: 2022.03.31 09:13:27
-04'00'

Date
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The annual report form and any attachments can be sent to the DEC Central Office clicking the Submit Form link below, or by sending it directly to: MS4compliance@dec.ny.gov. All submissions must include the SPDES ID in the title and must be complete before hitting the Submit Form link below:

Submit Form

If unable to submit electronically, hardcopy submissions can be sent to:

Bureau of Water Compliance
Division of Water
4th Floor
625 Broadway
Albany, New York 12233-3505

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2022

Name of MS4

SPDES ID
N Y R 2 0 A 2 9 0

Section 4 - Certification Statement

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

First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature

Gary A Hadden
Digitally signed by Gary A Hadden
Date: 2022.03.16 14:06:00 -04'00'

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625 Broadway
Albany, New York 12233-3505

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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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:

The	Ontario	Wayne																	
Stormwater	Coalition																		

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2022

Name of MS4

SPDES ID

Section 2 - Contact Information

important instructions - Please Read

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

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

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

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, 2022

Name of MS4

SPDES ID

Section 2 - Contact Information

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- 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, 2022

Name of MS4	<input type="text" value="TOWN OF WALWORTH"/>	SPDES ID	<input type="text" value="NYR20A293"/>
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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	<input type="text" value="ONTARIO WAYNE"/>
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Partner/Coalition Name (con't.)	<input type="text" value="STORMWATER COALITION"/>	SPDES Partner ID - If applicable	<input type="text" value="N Y R 2 0"/>
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Address	<input type="text" value="480 NORTH MAIN STREET"/>
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City	<input type="text" value="CANANDAIGUA"/>	State	<input type="text" value="NY"/>	Zip	<input type="text" value="1 4 4 2 4"/>
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eMail	<input type="text" value="ontswcdl@rochester.rr.com"/>
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Phone	<input type="text" value="(5 8 5) 3 9 6 - 1 4 5 0"/>
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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
- 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, 2022

Name of MS4 TOWN OF WALWORTH

SPDES ID

NYR20A293

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
MICHAEL		DONALTY

Title (Clearly print title of individual signing report)

TOWN SUPERVISOR

Signature

**Michael R.
Donalty**

Digitally signed by Michael R.
Donalty
Date: 2022.03.21 12:46:54
-04'00'

Date

/ /

The annual report form and any attachments can be sent to the DEC Central Office clicking the Submit Form link below, or by sending it directly to: MS4compliance@dec.ny.gov. All submissions must include the SPDES ID in the title and must be complete before hitting the Submit Form link below:

Submit Form

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

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 Wayne County Highway Department

SPDES ID

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Section 2 - Contact Information

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- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
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- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name MI Last Name

P h i l i p W E y g n o r

Title

C h a i r m a n o f t h e B d o f S u p e r v i s o r s

Address

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City State Zip

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p e y g n o r @ c o . w a y n e . n y . u s

Phone County

((3 1 5) 9 4 6 - 5 4 0 0 W a y n e

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

2	0	2	2
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Name of MS4

W	A	Y	N	E	C	O	U	N	T	Y	H	I	G	H	A	Y
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SPDES ID

N	Y	R	2	0	A	4	9	1
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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

P	H	I	L	I	P														
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MI

W

Last Name

E	Y	G	N	O	R														
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Title (Clearly print title of individual signing report)

C	H	A	I	R	M	A	N		O	F		T	H	E		B	O	A	R	D		O	F		S	U	P	E	R						
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Signature

Philip W. EygnorDigitally signed by Philip W.
Eygnor
Date: 2022.03.16 15:24:36
-04'00'

Date

0	3	/	1	6	/	2	0	2	2
---	---	---	---	---	---	---	---	---	---

The annual report form and any attachments can be sent to the DEC Central Office clicking the Submit Form link below, or by sending it directly to: MS4compliance@dec.ny.gov. All submissions must include the SPDES ID in the title and must be complete before hitting the Submit Form link below:

Submit Form

If unable to submit electronically, hardcopy submissions can be sent to:

Bureau of Water Compliance
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	2	2
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

SPDES ID

N	Y	R	2	0					
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Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

		8
--	--	---

1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- Construction Sites
- General Stormwater Management Information
- Household Hazardous Waste Disposal
- Illicit Discharge Detection and Elimination
- Infrastructure Maintenance
- Smart Growth
- Storm Drain Marking
- Green Infrastructure/Better Site Design/Low Impact Development
- Other:
- Pesticide and Fertilizer Application
- Pet Waste Management
- Recycling
- Riparian Corridor Protection/Restoration
- Trash Management
- Vehicle Washing
- Water Conservation
- Wetland Protection
- None

R	e	s	p	o	n	s	i	b	l	e		Y	a	r	d		W	a	s	t	e		M	a	n	a	g	e	m	e	n	t
---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	--	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---

Other

2. Specific audiences targeted during this reporting period:

- Public Employees
- Residential
- Businesses
- Restaurants
- Other:
- Contractors
- Developers
- General Public
- Industries
- Agricultural

C	o	m	m	e	r	c	i	a	l		C	a	r		W	a	s	h	/	R	e	s	t	a	u	r	a	n	t	s		
---	---	---	---	---	---	---	---	---	---	--	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--

Other

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition																			
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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:

- Construction Site Operators Trained # Trained

			4	3
--	--	--	---	---
- Direct Mailings # Mailings

1	3	6	3	7
---	---	---	---	---
- Kiosks or Other Displays # Locations

			1	1
--	--	--	---	---
- List-Serves # In List

	1	1	6	5
--	---	---	---	---
- Mailing List # In List

1	3	6	5	6
---	---	---	---	---
- Newspaper Ads or Articles # Days Run

				3
--	--	--	--	---
- Public Events/Presentations # Attendees

	2	0	4	2
--	---	---	---	---
- School Program # Attendees

		5	0	0
--	--	---	---	---
- TV Spot/Program # Days Run

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

	1	8	1	1
--	---	---	---	---

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

T	o	w	n		H	a	l	l	s										
L	i	b	r	a	r	i	e	d											
C	o	u	n	t	y		O	f	f	i	c	e	s						
C	l	e	a	n		U	p		E	v	e	n	t	s					

Other:

F	a	c	e	b	o	o	k	/	S	o	c	.	M	e	d	i	a
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

h	t	t	p	s	:	/	/	w	w	w	.	o	w	s	c	.	o	r	g	/	t	a	k	e	-	a	c	t	i	o	n	

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

Ontario-Wayne Stormwater Coalition

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.

The WCSWCD and OCSWCD continued to include OWSC information in their newsletters to reach residents. The Coalition continued Facebook posts and website updates to provide the public with stormwater information. The Coalition developed a Household Hazardous Waste rack card for residents. The Coalition continues to meet every other month to evaluate new ways to reach and educate the public.

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

OWSC members improved methods to reach out to residents by: increasing mailings 133% (5,846 to 13,637), increasing List-Servs 46% (800 to 1,165), and mailing lists 180% (4,833 to 13,656). Although there was a 53% (92 to 43) decrease in Construction Site Operators trained; there was an increase in public presentations 61% (1,268 to 2,042), school programs 355% (110 to 500), and printed materials 79% (1,013 to 1,811).

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

			6
--	--	--	---

(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 Coalition is planning to purchase additional promotional materials (chip clips & coloring books) as in-person events are anticipated to increase this coming permit year. The Coalition is developing additional brochures. The Coalition plans to re-evaluate existing brochures to focus on creating brochures that target individual pollutants of concerns, audiences of concern and geographic areas of concern. The Coalition plans to research industrial pollution and methods to target industries.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

SPDES ID

N	Y	R	2	0				
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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?

		8
--	--	---

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

				8
--	--	--	--	---
- Comments on SWMP Received # Comments

				0
--	--	--	--	---
- Community Hotlines Phone # (

5	8	5
---	---	---

)

3	9	6
---	---	---

 -

1	4	5	0
---	---	---	---
- Phone # (

--	--	--

)

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 -

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Phone # (

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)

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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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Phone # (

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- Phone # (

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Phone # (

--	--	--

)

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--	--	--
- Community Meetings # Attendees

1	2	2	5
---	---	---	---
- Plantings Sq. Ft.

2	4	0	0
---	---	---	---
- Storm Drain Markings # Drains

		2	3
--	--	---	---
- Stakeholder Meetings # Attendees

		1	0
--	--	---	---
- Volunteer Monitoring # Events

			2
--	--	--	---
- Other:

R	a	i	n		B	a	r	/	T	i	r	e		R	e	c	y	/	F	a	r	m		M				1	7	8
---	---	---	---	--	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	--	---	--	--	--	---	---	---

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

- List-Serve # In List

		3	6	5
--	--	---	---	---
- Newspaper Advertising # Days Run

				3
--	--	--	--	---
- TV/Radio Notices # Days Run

--	--	--	--	--
- Other:

T	o	w	n		&		P	l	a	n	n	i	n	g		B	o	a	r	d		M	e	e	t	i	n	g	s
---	---	---	---	--	---	--	---	---	---	---	---	---	---	---	--	---	---	---	---	---	--	---	---	---	---	---	---	---	---

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

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition									
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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	4	/	2	9	/	2	0	2	2
---	---	---	---	---	---	---	---	---	---

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

3	6	5
---	---	---

If submitting a report for single MS4, answer 5.a.. If submitting 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	2	2
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

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.

Annual Reports and SWMPPs were announced at public meetings. The OWSC continued to post the Joint Annual Report on their website and offer the public opportunities for comments. Facebook site sessions increased by 246% (127 to 440) and visitors increased by 340% (78 to 343). The Coalition continued to participate in tire recycling, an Envirothon, a rain barrel workshop, the Ginegaw Farmers Market, the Lumberjack Festival, Hang Around Victor Day, and Conservation Field Days.

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

Interaction with the public increased at events. The # of cleanup events doubled (4 to 8), the # of documented stormwater discussions increased at community meetings up by 262% (347 to 1,255). Storm drain markings increased from 0 to 23. Stakeholder meetings remained consistent at 10. Volunteer monitoring increased from 0 to 2. MS4s noted continued participation in collection events including pharmaceuticals, E-waste, and shredding. Tree & flower planting events were popular.

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

			6
--	--	--	---

(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 OWSC website will post a link to the Joint MS4 Annual Report and receive public comments. Members will offer the public opportunities to comment on Annual Reports & SWMPPs. MS4 members will continue holding community meetings, school programs, rain barrel events (if supplies are available), cleanup programs, and farmers markets. This Coalition is implementing a scholarship with FLCC to interact with students and to obtain new resources for use at future public events.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

SPDES ID

N	Y	R	2	0					
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Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report?

		8
--	--	---

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

1	3	7	4
---	---	---	---

 #

	9	7
--	---	---

 %

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

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

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

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

R	o	a	d	s	i	d	e		D	r	a	i	n	a	g	e		F	a	c	i	l	t	i	e	s				
---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	--	--	--	--

Sewersheds:

R	e	s	i	d	e	n	t	i	a	l		S	u	b	d	i	v	i	s	i	o	n	s						
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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

Ontario-Wayne Stormwater Coalition

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.

Coalition members continued to follow IDDE Standard Operating Procedures (SOPs). Coalition members continued mapping outfalls, conducting dry weather screening, and identifying potential illicit discharges. The Coalition continued to offer members annual IDDE employee training.

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

Coalition members continued to map outfalls, reporting a total of 1,374 outfalls mapped. 27 illicit discharges were detected, 26 were confirmed and 26 were eliminated. The illicit discharge not eliminated was transitory (dumped paint) and the source investigated but not discovered. The percentage of employees trained in IDDE remained consistent with a 2% increase to 89%. OWSC created a YouTube Video to train individual MS4 employees or groups at their own pace.

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

			6
--	--	--	---

(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).

Coalition members plan to continue following IDDE Standard Operating Procedures (SOPs). Coalition members plan to continue mapping outfalls, conducting dry weather screening, and identifying potential illicit discharges. The Coalition will continue to offer annual in-person or virtual IDDE training to each MS4 member. The Coalition plans to offer a training session regarding outfall identification and mapping.

MS4 Annual Report Form

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

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

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

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

How many MS4s contributed to this report?

		8
--	--	---

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

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

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

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

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

	6	5
--	---	---

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	1
--	---	---

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

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

- Notices of Violation #

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

 No Authority
- Stop Work Orders #

			4	
--	--	--	---	--

 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 #

			1	4
--	--	--	---	---
- Other #

			6	9
--	--	--	---	---

 No Authority

Friendly Letter and Emails

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition																			
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SPDES ID

N	Y	R	2	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?

		8
--	--	---

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

	3	1
--	---	---

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

	5	8
--	---	---

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

	9	8
--	---	---

 %

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

	9	3
--	---	---

 %

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.

SWPPPs are available for public review through each individual MS4

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

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.

The Coalition continued to sponsor stormwater training for MS4 members up to \$500 per member. The Coalition continues to offer the use of equipment to each MS4 (GPS, camera, laptop, etc.). Individually, MS4 members continued to educate owners/operators and contractors at pre-construction meetings.

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

MS4s continued to accept public comments (11) on SWPPPs. Members reported an 86% (35 to 65) increase in site development over one acre. This increase may have led to increases in: notices of violations up 67% (6 to 10), enforcement actions up 367% (3 to 14), and written communication with developers up 77% (39 to 69). Stop Work Orders remained consistent (3 to 4). Inspections of construction sites remained high at 98% for at least one visit and 93% inspected more than once.

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

			6
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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 Coalition will continue to sponsor stormwater training for MS4 members up to \$500 per member. The Coalition will continue to offer the use of equipment to each MS4 (GPS, camera, laptop, etc.). The OWSC will consider partnering with the OCSWCD to sponsor training for Construction Site Operators on E&SCs. Each MS4 member will continue to educate owners/operators and contractors at pre-construction meetings and continue construction site inspections.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

SPDES ID

N	Y	R	2	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?

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?

	6	4
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 %

MS4 Annual Report Form

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

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Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

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.

The Coalition continued to provide equipment (GPS, camera, laptop, etc.) to assist members with post-construction control inspections. Individual Coalition members continued to map, inspect, and maintain (as needed) post-construction control facilities. Some members increased contact with private facility owners regarding inspection and maintenance.

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

MS4's inventories decreased 8% (188 to 173). Inspections increased 23% (245 to 301). The number of facilities maintained increased 66% (82 to 136). The percent of staff trained for LID, BSD, and Green Infrastructure increased 26% (38% to 64%). It appears Coalition members are becoming more proactive in inspecting and maintaining SWMF and members noted decreased instances of complaints and flooding.

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

			6
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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 Coalition will continue to provide equipment (GPS, camera, laptop, etc.) to assist members with post-construction control inspections. Individual Coalition members will continue to inventory, inspect, and maintain (as needed) post-construction control facilities. The Coalition is considering offering a training session for MS4 employees on inventorying post-construction controls using the DEC's Construction Database and identifying maintenance needed and conducting inspections.

MS4 Annual Report Form

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

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Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

SPDES ID

N	Y	R	2	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?

		8
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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 checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input 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	2	2
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

SPDES ID

N	Y	R	2	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

			8	1
--	--	--	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles

	5	1	4	2
--	---	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary #

		7	0	6
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

		2	6	4
--	--	---	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs.

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

	3	4	2	0
--	---	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

		3	2	.	0
--	--	---	---	---	---

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

			1	5
--	--	--	---	---

4. What was the date of the last training?

0	3
---	---

 /

0	8
---	---

 /

2	0	2	2
---	---	---	---

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

1	4	9
---	---	---

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

9	3
---	---

 %

MS4 Annual Report Form

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

2	0	2	2
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Name of MS4/Coalition

Ontario-Wayne Stormwater Coalition

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.

The Coalition continued to provide good housekeeping and pollution prevention (P2) training to MS4 employees. The Coalition reviewed and commented on the 2022 Draft MS4 Permit update. Coalitions members continued to implement their adopted SWMPP and members performed self-assessments of their operations, activities, and facilities.

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

The acreage of parking lots swept increased by 35% (60 to 81). The # of streets miles swept increased by 27% (4,058 to 5,142). The # of catch basins cleaned decreased by 32% (1,032 to 706). The # of Post Construction SMPs inspected and cleaned increased by 76% (150 to 264). The number of stormwater trainings increased by 25% (12 to 15) and employees trained increased by 2% (91% to 93%). The reported nitrogen applied in chemical fertilizer increased by 22% (2,800 to 3,420).

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

			6
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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 Coalition will continue to offer annual in-person or virtual good housekeeping and P2 training to each MS4 member. Members will utilize the recently developed YouTube video to train individual employees or groups at their own pace. The Coalition will continue to monitor 2022 Draft MS4 Permit updates in order to remain proactive in achieving new facility and training requirements. Coalition members will continue to implement their adopted SWMPP and perform self assessments.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

N	Y	R	2	0					
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Additional Watershed Improvement Strategy Best Management Practices

This Section is Not Applicable

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

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

How many MS4s contributed to this report?

MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed			
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed			
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay			
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary			
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments			
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? Yes No N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes No N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far. %

Estimate what percentage was mapped in this reporting period. %

MS4 Annual Report Form

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

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Name of MS4/Coalition

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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

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				
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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