MS4 Annual Report Cover Page

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

| This | cover | page m | ust be co | mpleted | by the | report | preparer. |
|------|--------|----------|------------|----------|--------|--------|-----------|
| Join | t repo | rts requ | ire only o | ne cover | page. | | |

SPDES ID

| N | Y | R | 2 | 0 | A | 1 | 1 | 5

Choose one:

This report is being submitted on behalf of an individual MS4.

Fill in SPDES ID in upper right hand corner.

| IN a | me (| OT IV | 154 | | | | | | | | | | | | | | | | | |
|------|------|-------|-----|---|---|------|---|---|---|---|---|--|--|--|--|--|--|--|--|--|
| W | a | r | r | е | n | С | 0 | u | n | t | У | | | | | | | | | |

OR

○ This report is being submitted on behalf of a Single Entity

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

| Naı | nec | of Si | ngl | e En | itity | , | | | | | | | | | | | | |
|-----|-----|-------|-----|------|-------|---|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | | |

OR

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

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

| Nar | ne | of C | oali | tion | | | | | | | | | | | | | | | | | |
|----------|----|------|------|------|----------|---|---|--|----------|--|----------|--|---|--|--|---|------|--------------|---|--|---|
| | | | | | | | İ | | | | | | | | | | | | | | |
| | | İ | | | | | | | | | | | | | | _ | | <u> </u> | _ | | = |
| <u> </u> | | | _ | | <u> </u> | _ | | <u>L</u> | <u> </u> | | <u> </u> | | _ | | | | | _ | | | |
| | | | | | | | | | | | | | | | | | | | | | |

| SPDES ID | SPDES ID | SPDES ID |
|-------------|-------------|-------------|
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 O A |
| SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A | N Y R 2 0 A | NYR20A |
| SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A | NYR20A | NYR20A |

MS4 Annual Report Cover Page

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

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

| N | SPDES ID | SPDES ID | SPDES ID |
|--|-------------|-------------|-------------|
| N | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID | SPDES ID | SPDES ID | SPDES ID |
| N | | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID N Y R 2 0 A | SPDES ID | SPDES ID | SPDES ID |
| N | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID N Y R 2 0 A SPDES ID SPD | SPDES ID | SPDES ID | SPDES ID |
| N | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 O A |
| SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A <td>SPDES ID</td> <td>SPDES ID</td> <td>SPDES ID</td> | SPDES ID | SPDES ID | SPDES ID |
| N | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N | SPDES ID | SPDES ID | SPDES ID |
| N | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R | SPDES ID | SPDES ID | SPDES ID |
| N | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID SPDES ID SPDES ID N Y R 2 0 A N | SPDES ID | SPDES ID | SPDES ID |
| N | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A | SPDES ID | SPDES ID | SPDES ID |
| N | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A | SPDES ID | SPDES ID | SPDES ID |
| N | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A | SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID N Y R 2 0 A | SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID | SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID SPDES ID SPDES ID SPDES ID SPDES ID | SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| N Y R 2 0 A | SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID SPDES ID | N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID SPDES ID SPDES ID N Y R 2 0 A N Y R 2 0 A N Y R 2 0 A SPDES ID SPDES ID SPDES ID | SPDES ID | SPDES ID | SPDES ID |
| N Y R 2 0 A | NYR20A | NYR20A | N Y R 2 O A |
| N Y R 2 0 A | SPDES ID | SPDES ID | SPDES ID |
| | | N Y R 2 O A | |
| | SPDES ID | SPDES ID | SPDES ID |
| | | | |

MS4 Municipal Compliance Certification(MCC) Form

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

| | SPI | DES | ID | | | | | | |
|---|-------|------|-----|-------|-------|---|----------|----------|---|
| Name of MS4 Warren County | N | Y | R | 2 | 0 | A | 1 | 1 | 5 |
| Each MS4 must submit an MCC form. | | | | | | | | | |
| Section 1 - MCC Identification Page | | | | | | | | | |
| Indicate whether this MCC form is being submitted to certify endorsement or | accep | tanc | e o | f: | | | | | |
| ● An Annual Report for a single MS4 | | | | | | | | | |
| ○ A Single Entity (Per Part II.E of GP-0-10-002) | | | | | | | | | |
| O A Joint Report | | | | | | | | | |
| Joint reports may be submitted by permittees with legally binding | ng ag | reen | 1en | ıts. | | | | | |
| If Joint Report, enter coalition name: | | | | | | | | | |
| | | | T | | | | | | |
| | | İ | Ī | | Ť | T | <u> </u> | + | Ę |
| | + | | | \pm | \pm | | \pm | <u> </u> | = |

MS4 Municipal Compliance Certification(MCC) Form

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

| | | SPI | ES | D | | | | | | |
|-------------|---------------|-----|----|---|---|---|---|---|---|---|
| Name of MS4 | Warren County | N | Y | R | 2 | 0 | A | 1 | 1 | 5 |

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

| Fir | st N | ame | , | | | | | | | | | | | | _ | МІ | | Las | t N | ame | ; | | | | | | | | | | | |
|------|------|-----|---|---|---------|---|---|---|---|---|---|---|----------|---|---|----|---|-----|-----|-----|--------|---|-----|---|---------------|---------------|---|--------------|---|---|----|-----|
| K | е | v | i | n | | | | | | | | | <u>_</u> | | | В | | G | е | r | a | g | h | t | У | | | | | | | |
| Titl | e | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| С | h | а | i | r | m | а | n | , | | W | a | r | r | е | n | | C | 0 | u | n | t | У | | | | | | | | | | |
| Add | ires | s | | | | | | | , | | | | | | | | | | | | | | | | | | | | | | !- | |
| 1 | 3 | 4 | 0 | | R | t | е | | 9 | | | | | | | | | | | | | | | | | | | | | | | |
| City | / | | | | | | | | | | | | | | | | | | | St | tate | | Zip | | | | | | | | | |
| I + | ' 1 | _ 1 | | | | | | | | | | | | 1 | | | | | | | \neg | | | | $\overline{}$ | $\overline{}$ | |) | | | | 4 |
| L | а | k | е | | G | е | 0 | r | 9 | е | | | | | | | | | | I. | 1] | Y | 1 | 2 | 8 | 4 | 5 | - | 3 | 4 | 3 | - 1 |
| eMa | | k | е | | G | е | 0 | r | g | е | | | | | | | | | | I | 1 3 | Y | 1 | 2 | 8 | 4 | 5 | - | 3 | 4 | 3 | |
| | | k | е | | G | е | 0 | r | g | е | | | | | | | | | | 1 | 1 1 | Y | 1 | 2 | 8 | 4 | 5 | - | 3 | 4 | 3 | |
| | ail | k | e | | G | е | 0 | r | g | е | | | | | | | | Cou | nty | | 1] | Y | 1 | 2 | 8 | 4 | 5 | - | 3 | 4 | 3 | |

Name of MS4

MS4 Municipal Compliance Certification(MCC) Form

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

| | SPI | DES | ID | | | | | | |
|------|-----|-----|----|---|---|---|---|---|---|
| | N | Y | R | 2 | 0 | Α | 1 | 1 | 5 |

Section 2 - Contact Information

Warren County

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

| Fire | st N | ame | <u> </u> | | | | | | | | | | | | _ | M | _ | Las | t N | ame | ; | | | | | | | | | | |
|-------------|----------|--------|----------|--------|--------|--------|----------|--------|--------|---|---|---|----|---|---|---|---|-----|-----|-----|--------|------------|-----|---|---|---|---|------------|---------------|---|---------------|
| J | a | m | е | s | | | | | | | | | | j | | R | | L | i | е | b | е | r | u | m | | | | | | |
| <u>Titl</u> | e | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D | i | s | t | r | i | С | t | | М | а | n | а | g | е | r | | | | | | | | | | | | | | | | |
| Add | ires | S | | | | | | | | | | | | | | | | | | | , | | | | | | | | | 4 | |
| 3 | 9 | 4 | | S | С | h | r | 0 | 0 | n | | R | i | v | е | r | | R | 0 | a | d | | | | | | | | | | |
| City | / | | | | | | | | | | | | | | | | | | | S | tate | • | Zip | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | \neg | | | | _ | | | | $\overline{}$ | _ | $\overline{}$ |
| W | a | r | r | е | n | ន | b | u | r | g | | | _, | | | | | | | 1 | 1 2 | Z | 1 | 2 | 8 | 8 | 5 | _ | | | |
| W eMa | | r | r | е | n | ន | b | u | r | g | | | | | | | | | | ı | 1 2 | Z | 1 | 2 | 8 | 8 | 5 | _ | | | |
| | | r m | r 9 | e 9 | n @ | s n | b Y | u c | r a | g | • | r | r | • | С | 0 | m | | | 1 | 1 3 | z] | 1 | 2 | 8 | 8 | 5 |] - | | | |
| eMa | ail i | | | | | | <u> </u> | | | | • | r | r | • | С | 0 | | Cou | nty | | 1 2 | <i>z</i>] | 1 | 2 | 8 | 8 | 5 | _ | | | |

MS4 Municipal Compliance Certification (MCC) Form

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

| Phone Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? O Yes O No What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)? O MM1 O MM2 O MM3 O MM4 O MM6 Additional tasks/responsibilities | Name | of N | 1 S4 | Warre | en C | ounty | , | | | | | | | | | | | | | | | N. | | Z F | | 2 (| A | 1 | 1 | 5 |
|--|--------------|--------|------------------------------------|----------|----------|---------------|-------|------------|----------|--------------|---------|----------|---------|---------|-----------|----------------|--------------|----------|------|--------------|----------|---------------|-----------|---------------|-----------|------|----------------|---------------|-------------------|---------------|
| Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? O 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/CoalitionName Partner/CoalitionName SPDES Partner ID - If applicable | Secti | on : | 3 - I | ar | tne | er I | nfo | ori | na | tio | n | - | | | | | | | | • | | _ | | | | | | _1 | | - |
| If Yes, complete information below. Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition. If No, proceed to Section 4 - Certification Statement. Partner/CoalitionName Partner/CoalitionName Partner/CoalitionName | Did you | ır M | | | | | | | | | | O C | omp | lete | so | me | or a | 11 p | ern | iit r | equi | iren | nen | ts d | uri | ng t | his | rep | ortir | ıg |
| Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition. If No, proceed to Section 4 - Certification Statement. Partner/CoalitionName Partner/CoalitionName Partner/CoalitionName Partner/Coalit | - | | 1 -4 | | c | | | | | | | | | | | | | | | | | | | | | • | Y | es | | No. |
| accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition. If No, proceed to Section 4 - Certification Statement. Partner/CoalitionName Partner/CoalitionName(con't.) Partner/CoalitionName(con't.) SPDES Partner ID - If applicable N Y R 2 0 | | | | | | | | | | | erten. | ^* | Inf. | | | | | راد ند | ئاتہ | · | 41L | . c. | | _4_ | *1 | 11 | . 1 | | | |
| coalition. It is not necessary to include a separate sheet for each MS4 in the coalition. If No, proceed to Section 4 - Certification Statement. Partner/CoalitionName Partner/CoalitionName Partner/CoalitionName(con't.) SPDES Partner ID - If applicable N Y R 2 0 Address City State Zip 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)? D MM1 D MM2 D MM3 D MM4 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | acc | ente | <i>a s</i> c _j d. If | vou | r N | 1S4 | CO(| n c one | rate | ı pa ed v | vitl | cı. | COS | liti | nau on | on j Ins | orov nmi1 | t on | ou i | in o thee | ine. | ith TO | rm the | ats • na | WII me | u n | ot b | e | | |
| If No, proceed to Section 4 - Certification Statement. Partner/CoalitionName Partner/CoalitionName(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 O No What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)? D MM1 D MM2 D MM4 D MM5 MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | coa | litio | n. It | is n | ot 1 | 1ece | essa | ry 1 | to i | ncl | ıde | a | sepa | arat | e si | hee | t fo | r ea | ch | MS | 54 i | n tl | ne c | oal | itic | n. | шс | | | |
| 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.? O Yes O No What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)? D MM1 D MM2 D MM3 D MM4 D MM5 D MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | If No, p | oroce | eed t | o Se | ecti | ion | 4 - (| Cer | tifi | icat | ion | St | ater | ner | ıt. | | | | | | | | | | | | | | | |
| 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 MM6 Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | Partner/C | Coalit | ionN | ame | | <u> </u> | | 1 | _ | | | _ | _ | _ | 1 | _ | | | | _ | | | | | | | -, | | | |
| 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 MM6 MM6 MM6 MM6 Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | | | | | | | | | | | | | | \perp | | | | | | | | <u> </u> | | | | | | | | |
| Address City State Zip eMail Phone Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? O Yes O No What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)? DMM1 DMM2 DMM3 DMM4 DMM5 MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | Partner/C | Coalit | ion N | lame | (co | <u>n't.)</u> | 7 | | _ | | | _ | 7 | _ | _ | - | | | | _ | 7 | 1 | | | 1 | r II |) - <u>I</u> 1 | f app | olica | ble |
| City State Zip Phone Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? O Yes O No What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)? MM1 MM2 MM3 MM4 MM5 MM6 MM6 MM6 Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | | | | | | | | _ | | | \perp | | \perp | | | | | <u> </u> | | | | N | Y | R | 2 | 0 | L | | | |
| 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 MM6 Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | Address | Ţ | T | \top | | $\overline{}$ | 1 | 7 | Τ | | Τ | | \top | T | Τ- | \overline{T} | | Т | Τ | | | $\overline{}$ | Τ | $\overline{}$ | 1 | T | _ | $\overline{}$ | Г | \neg |
| 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 MM6 Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | City | | | | | | | | | | _ | Ц. | | | | ٠ | | | tate | ⊥. | 7in | L | <u></u> | _ | <u></u> | L. | <u></u> | | | |
| 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 MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | | | | | | | | | | | T | | T | T | Τ | \top | T |] [| late | | Z.ID | | | | |]_ | | | | \neg |
| Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? O Yes O No What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)? MM1 MM2 MM3 MM4 MM5 MM6 MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | eMail | | | | | | | | | | | | | | | | | J L | | | <u> </u> | | L | | | J | | | | |
| Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? O Yes O No What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)? MM1 MM2 MM3 MM4 MM5 MM6 MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | | | | | | | | | | | | | | | | | Γ | | | | | | | | | | | | | |
| with GP-0-08-002 Part IV.G.? O Yes O No What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)? MM1 | Phone | | | | | | | | | | | | ' | | , | | Τρ | na11 | v B | indi | na / | \ are | am | ant i | | | dom | | | |
| MM1 MM2 MM3 MM4 MM4 MM5 MM6 MM6 MM6 Matershed Improvement Strategy Best Management Practices required for MS4s in impaired | (| |) [| | | | | | <u> </u> | | | | | | | | wi | th G | iP-(| 0-08 | -002 | Pa | rt I | V.G. | ? | _ | | | 0] | No |
| MM1 MM2 MM3 MM4 MM5 MM6 MM6 MM6 Madditional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | What tas | sks/r | espo | nsil | bili | ties | are | sh | are | d w | rith | th | is p | artı | ıer | (e., | g. M | IM: | 1 S | cho | ol l | Pro | gra | ms | or | Mυ | ltir | ile " | [as] | ks)? |
| MM2 MM3 MM4 MM5 MM6 MM6 MM6 Matershed Improvement Strategy Best Management Practices required for MS4s in impaired | | П | | | | <u> </u> | Τ | <u> </u> | | 1 | T | 7 | T | Т | 1 | ` . T | - | | | | | | | | | | | | |).] |
| MM3 MM4 MM5 MM6 MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired |) WINT | | l_ | <u> </u> | | | 1 | | 1 | 1_ | _ | <u> </u> | | | <u> </u> | | | | | | | ! | | | | | | | ᆜ | |
| MM4 MM5 MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | O MM2 | | | | | | | | | | L. | _ | | | | | | | | | |] | | | | | | | | |
| MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | MM3 | | T | Τ | | | | | | | T- | | T | | | | | | | | | | | | | | | Ī | $\overline{\top}$ | \exists |
| MM6 Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired |) MM4 | | Ť | | T | Ť | | | | | | | | | | | | | | | i | | | | | ᅥ | 一 | 十 | \pm | = |
| Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | | | <u> </u> | <u> </u> | <u> </u> | <u> </u> | L | L | | <u> </u> | L_ | <u> </u> | | | <u>!</u> | | | | _ | | | <u>_</u> | | <u> </u> | _ | | | <u> </u> | ᆣ | |
| Additional tasks/responsibilities Watershed Improvement Strategy Best Management Practices required for MS4s in impaired |) MM5 | | | | <u>L</u> | | | | | <u> </u> | | L | | | | Ĺ | | ļ | | | | \perp | | | | _ | \perp | | | |
| Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | MM6 | | | | | | | | | | | | | | | | | | | | | | | | | | \top | | \top | |
| Watershed Improvement Strategy Best Management Practices required for MS4s in impaired | Addition | al ta | sks/1 | esp | ons | sibi | litie | S | | | | | | | | | | | | | | | | | | | | | | _ |
| watersheds included in GP-0-08-002 Part IX. | | | | - | | | | | 'eg1 | v Be | est . | Ma | nas | en | eni | t Pr | acti | ices | r re | aui | red | for | ·M | S46 | : in | im | nai | red | | |
| | wate | rshe | ds in | clu | ded | l in | GP | -0- | 08- | 002 | P | art | IX. | , | | | | | - • | 7 | | -01 | | ~ 11 | - 411 | 4411 | Իայ | ·ou | | |
| | | | | | | | | | | | | | | | | | | | _ | | | | | | | | | | | 7 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

MS4 Municipal Compliance Certification(MCC) Form

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

| | | | | | | | | - | .v.i. | | LOI. | | 01 | PCI | 100 | u cı | ши | ng, | (V.I.G | 1 (1 | 1 7 | ک_اه | <u>' L</u> | _ | | | ' | | | | | | | | |
|----------|--------------|-------------|--------------|-----------|--------------|--------------|------------|--------------|--------------|---------------|--------------|-------------|-------------|---------------|-----------|-------------|--------------|--------------|-------------|-------------|-------------|-----------|------------|------------|--------------|------------|------------|-----------|-------------|------------|------------|-------------|-------------|-----------|---------|
| N | lam | ie o | f M | [S4 | Wa | ırren | Cou | nty | - | | | | | | | | | | | | | | | | SI | יםי וםי | Т | ID R | \Box |) (| 0 2 | A | 1 | 1 | 5 |
| S | ec1 | tio | n 4 | _ (| <u>Ce</u> | <u>rti</u> | fic | <u>ati</u> | <u>on</u> | Sta | ate | m | <u>en</u> 1 | <u> </u> | | | | | | | | | | | | | | | | | | | | | |
| "] di | ce: | rtif tio | y uı n oı | nde su | r pe | ena vis | lty ion | of l | law acc | tha ord | at th | iis ce v | doo witl | um 1 a : | en sys | t an | id a | ll a | ttac nec | hn l to | nen as | ts su: | we re 1 | re tha | pı at e | rep au | ar ali | ed fie | l uı xdı | nde ner | r r so | ny nn | el | | |
| pı pe | rope ersc | erly ons | ga wh | the on | red nan | an age | d e the | valı e sy | uate /ste | ed t m, | he i | info tho | orn se j | natio pers | on on | sub s di | mi irec | tted tly: | . B | ase pon | d c isit | n ole | my fo | i r | nq gat | uir he | y (rir | of ig | the | e p | ers 1fo | on | oi ati | on | • |
| av | var | e th | at 1 | hei | re a | re s | sign | ufic | can | t pe | nal | tie | s fo | r sı | ıbr | wle nitt | dge ing | and fal | d b se i | elie nfo | ef, t | ru iat | e, a | ac ı, i | cu | rat :lu | e, dir | an 1g | id o | con e p | np os | lete sib | e.] ilit | ar y (| n of |
| | | | | • | | | | | | wii | | | | | | | | | | | | | | | | | | | | | | | | | |
| au | nis : | riz | m n ed 1 | us epi | t be rese | e si enta | gne tiv | e o | y e f th | ithe at p | er a Ders | pri on | as | pal des | ex cri | ecu bed | itiv ! in | e of GP | -0- | er o 08- | or r 00: | an 2 I | kir Par | ıg t V | el VI. | ect J. | ted | lo | ffi | cia | 1, c | or c | lul | y | |
| Fir | st N | ame | ÷ | | | | | | | | | | | | | MI | | Las | t Na | me | | | | | | | | | | | | | | | |
| K | е | v | i | n | | | | | | | | | | | | В | | G | е | r | | 9 | ŀ | 1 | t | У | | | | | | \int | I | | |
| Tit | le (| (Cle | arly | pri | nt ti | tle (| of ir | ıdiv | idua | ıl <u>siş</u> | nin | g re | рог | t) | | | | | | | | | | | | | | | | | | | | | |
| С | h | а | i | r | m | а | n | , | | W | а | r | r | е | n | | С | 0 | u | n | t | У | · | | | | | | | | | | I | | |
| Sig | natu | re | | | | | | | | | | | | | | | | | | _ | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | D | ate |) | | Г | _ | | 1 | Γ_ | _ | 一 | \neg | _ |
| | | | | | | | | | | | | | | | | | | | | ╛ | | | L | | | / | L | | | / | L | | \perp | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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

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

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

SPDES ID

Name of MS4/Coalition

Warren County

N Y R 2 0 A 1 1 5

| | | | | | | | | | | | W | ate | er (| Qι | ıali | <u>ity</u> | Tr | en | <u>ds</u> | | | | | | | | | | | |
|-----------|----------|---------------|-----------|------|-----------|--------------|------------|--|-----------|--|-------------|---------------|-------------|--|-------------|---|------------|-----------|----------------|-----------|--|-----------|--|--------------|-------------|-------------|--------------|----------|----------|--------|
| The info | orma | atio | n iı | n th | is s | ecti | on | is b | eing | g re | por | ted | (ch | eck | on | e): | | | | | | | | | | | | | | |
| On be | | f of | a | coal | itio | n | | | ribu | ited | l to | thi | is r | epo | rt? | | | | | | | | | | | | | | | |
| 1. Has | ted | is N to | 1S sto | 4/C | oa) wa | litio ter | on ·? I | pro f n | du ot, | ced ans | l ar swe | iy i er N | rep No a | ort and | s d l pi | oct | ıme eed | nti to | ng Mi | wa nin | ter nur | qu n C | ali Con | ty 1 Itro | tre ol N | /Iea | sui | | | |
| One | | | | | 41 | C-11 | 1 | • | | | | | | | | | | | | | | | | | | (| O Y | es | | No |
| If Yes, c | | | | | | | | _ | | | | | | | | | | | | | | | | | | | | | | |
| O Repor | | | | | | | | | - | | | | | | | | | | | | | | | | | | | | | |
| O Web F | _ | | | | - | | ٠, | | _ | | | | | | | | | | | , | | | | | | | | | | |
| | PI | ase | pı | rov: | iae | spe | ec11 | nc a | aggi | res | S OI | pa | ıge | wn | ere | rej | ort | (S) | car | be | ac | ces | sec | l - 1 | ot | hor | ne | pag | Э. | |
| | URI | | | | | | · | -T | | | | -, | | _ | _ | , | | | , | , | | | | | | | | | | |
| | | | Ĺ | | | | | | | | | <u> </u> | | | | | | | | | L | | | | | | | | · | |
| | | | | | | | | | | | | | | | | | | | | | Ţ | | | | T | | Τ | | | |
| | | | | | | | T | T | | | | T | | Ì | Ť | | T | T | T | | | - | T | T | T | †== | T | | | |
| | URL | , | | | | 1 | | | | | | | | ٠. | | | 1 | | | | | <u> </u> | | | .I | <u> </u> | <u></u> | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | T | Π | | | |
| | П | | | | | Ì | | | | | Ť- | | T | | | | | | - | | | | | | \vdash | \dagger | | H | == | = |
| | H | \dashv | | | | | _ | | | <u> </u> | | - | | <u> </u> | 1 | <u> </u> | | | | | <u> </u> | | <u>(</u> | <u> </u> | <u> </u> | _ | H | H | \dashv | |
| | | | | L | | <u>L</u> . | l | | | | | <u> </u> | | <u> </u> | <u>L</u> | L | | | | | | | <u></u> | <u> </u> | | \perp | <u>L</u> . | | | |
| | URL | 7 | | | | | | | | | | Ţ | | | | \Box | I | 1 | | _ | | | | | | | \Box | | \neg | |
| i | \dashv | | _ | | | | <u> </u> | | | | | <u> </u> | | <u> </u> | <u> </u> | | <u> </u> | | | _ | | | <u> </u> | | <u> </u> | <u> </u> | | \vdash | \dashv | _ |
| ĺ | _ | | | | | | | | | | | | <u> </u> | | <u></u> | | | | | | | | | | <u></u> | | | \dashv | _ | |
| [| | | | | | | | | | | | | | | | | | | | | |] | | | | | | | | |
| 1 [| URL | $\overline{}$ | 1 | | Т | | | | —Т | | | | | | ı | | | | | | | —, | | | _ | г | | | | \neg |
| | | _ | _ | | | | | | _ | _ | | | | | | | | | | | [| | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | 7. | | | | | | | | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| | SPDES ID |
|--|--|
| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| Minimum Control Measure 1. Public Ed | ducation 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? | |
| | |
| 1. Targeted Public Education and Outreach Best Managem | ent Practices |
| Check all topics that were included in Education and Outreach | luring this reporting period: |
| | |
| ● Construction Sites | O Pesticide and Fertilizer Application |
| ● General Stormwater Management Information | Pet Waste Management |
| O Household Hazardous Waste Disposal | Recycling |
| ■ Illicit Discharge Detection and Elimination | Riparian Corridor Protection/Restoration |
| ■ Infrastructure Maintenance | Trash Management |
| O Smart Growth | Vehicle Washing |
| Storm Drain Marking | Water Conservation |
| Green Infrastructure/Better Site Design/Low Impact Development | O Wetland Protection |
| Other: | O None |
| Other | |
| 2. Specific audiences targeted during this reporting period: | |
| Public Employees Contractors | |
| Residential • Developers | |
| Businesses • General Public | |
| Restaurants O Industries | |
| Other: O Agricultural | |
| | |
| ther | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | | | | | | | | | | | | | | | | | | | | | | | S | PDI | ES I | D_ | | | | | |
|--------------|------------------|--|--|------------|--------------|------------|--------------|---------------------|------------|-------------|-----------|------------|--|----------|----------|------|-----|--|--|----------|------|-----|-----|------|------------|--------------|------|-----------|-------|-------------|--|
| Nar | ne of | MS | 54/C | oal | itior | Wa | апеп | Cou | nty | | | | | | | | | | | | | | 1 | 1 . | Y 1 | R : | 2 | 0 2 | Ą | 1 | 1 5 |
| 3. | Wl this | hat s re | str epo | ate rti | egie ng j | s d per | id y iod | y ou ? C | r N Che | 1S 4 | I/C | oal hat | itio ap | n t | ıse : | to : | ach | iev | e e | du | cati | on | an | d o | utr | ead | ch ş | goa | ıls (| lur | ing |
| • (| Cons | truc | ctio | n S | ite (| Эре | rato | ors ' | Tra | inec | i | | | | | | | | | | | | | #' | Trai | ined | ı | \top | T | 1 (|) 1 |
| OI | Direc | t M | Iail | ings | 8 | | | | | | | | | | | | | | | | | | | #N | Iaili | ings | , | Ť | + | Ť | |
| • K | Ciosk | s o | r O | the | r Di | spl | ays | | | | | | | | | | | | | | | | # | #Lc | ocati | ions | , | \dagger | Ť | Ť | 3 |
| ΟL | ist-S | Serv | es | | | | | | | | | | | | | | | | | | | | | # | In : | List | Ė | T | 十 | T | \uparrow |
| • N | 1 aili | ng l | List | ; | | | | | | | | | | | | | | | | | | | | # | In] | List | F | † |] | | 2 0 |
| • N | [ews | pap | er 1 | Ads | or | Art | icle | s | | | | | | | | | | | | | | | # | ‡ Da | ıys I | Run | | T | Ť | 1 | 6 |
| ● P | ublic | E | ven | ts/P | res | enta | ıtioı | 18 | | | | | | | | | | | | | | | # | Atı | tend | lees | Ī | Ť | Ť | 7 | 9 |
| ● S | choo | 1 P | rog | ram | l | | | | | | | | | | | | | | | | | | # | Att | end | lees | Ī | T | 4 | 2 | 9 |
| ОТ | V S _I | ot/ | Рго | gra | m | | | | | | | | | | | | | | | | | | # | Da | ys F | tun | F | T | T | Ť | |
| P1 | | | | | | | | | | | | | | | | | | | | |] | ota | l#I | Dist | ribu | ted | Γ | T | T | | T |
| | Loc W | atio | ns (| e.g. r | | ries | , tov | vn of | ffice | s, ki u | osks n | Ĭ. | 3.5 | | s | W | С | D | ! | _ | 1 | | | | | | | | | | |
| | W | a | r | r | e | | <u> </u> | С | 0 | u | n | t | У | <u> </u> | D | P | W | <u> </u> | <u> </u> | L | | | | | | | | | | | |
| | W | a | r | r | \vdash | <u> </u> | <u> </u> | С | | <u> </u> | ! | t | У | | М | C | VV | <u> </u> | | | | | | | | | | | | | |
| | | <u>a</u> | <u> </u> | <u> </u> | e | 11 | <u></u> | | 0 | u | n | | У | | IAI | | - | | | | | | | | | | | | | | |
| ⊃ O t | L_ her: | | | <u> </u> | | | | | L | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D W∈ | | age | : | | ovid ede | | pec | ific | we | b a | ddro | esse | s - : | not | hor | ne j | pag | e. (| Con | tin | ie c | n n | ext | pag | ge if | f ad | diti | ona | l sp | ace | is |
| W | \top | w | | w | a | r | r | е | n | ន | w | С | d | | 0 | r | g | 7 | m | s | 4 | | h | t | m | 1 | Γ | | Γ- | | |
| <u> </u> | | | | | | | <u> </u> | | | | | + | | | \vdash | | | | | <u> </u> | - | | | Ė | | | _ | | | <u>_</u> _ | \exists |
| - | 1 | | | | | | | | | | | T | | | | | | | | | | - | | | | | | | _ | | \exists |
| UR | L_ | • • • | | | | | | | | | | _ | | | | 1 | | | L | · | J | | | | | | | <u> </u> | L | | |
| h | t | t | р | : | / | / | w | w | W | | w | a | r | r | е | n | С | 0 | u | n | t | У | n | У | • | g | 0 | v | / | | |
| t | r | а | n | s | p | 0 | r | t | / | m | ន | 4 | | р | h | р | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| am | e of | MS | 34/0 | Coal | itio | n W | arrer | n Cou | ınty | | | | | | | | | | · · · · · | | | | N | 1 7 | R | 2 | 0 | A | 1 | 1 | L |
|-----------|-----------|---------------------------|---------------|-------------------------|---------------|---------------|--------------|---------------|--|-------------------|-----------|---------------|--|---------------|----------------------|--|-------------------|----------|-----------|-------------------|--|---------------|----------------|-----------|---------------|----------|-----------|-----|--------------|--------------|---|
| . V | | b F | ag | e c | on't | :: |] | Pro | vid | e sp | eci | ific | we | b a | ddı | ess | es · | - nc | t h | ome | e pa | ıge. | | | | | | | | | |
| | Ť | T | | | | | | | | | | \top | \top | | | | | | Т | | T | | | Τ | Ţ | | | | | | Γ |
| Ţ | Ť | T | T | T | T | Ť | T | T | Ť | | Ť | $\overline{}$ | + | Ť | T | Ť | Ť | Ť | Ť | \dagger | $\frac{}{}$ | Ť | Ť | Ť | † | | | | | - | F |
| <u> </u> | \dagger | \dagger | Ť | $\overrightarrow{}$ | + | | + | \dashv | \dagger | $^{+}$ | $^+$ | 十 | $\frac{1}{1}$ | \forall | \overrightarrow{T} | + | $^{+}$ | + | <u> </u> | + | + | + | + | ╁ | + | <u> </u> | | - | | _ | L |
| UF | • T | | L | | | | 1 | | | | | | | | | | | | | | | | | | | <u></u> | | | لــــا | Ш | L |
| | T | | | 7 | T | | | | | T | 1 | 7 | | | Τ | | | Ţ | | | Τ | | \top | T | $\overline{}$ | | | _ | | | _ |
| F | + | + | \dagger | $\overrightarrow{\top}$ | $\dot{\top}$ | 1 | \dagger | | + | \dagger | \dagger | \dagger | \dagger | \dagger | \dagger | + | + | $^{+}$ | | $\frac{1}{1}$ | \uparrow | $\frac{1}{1}$ | <u></u> | 1 | | | <u> </u> | | _ | | _ |
| F | ÷ | $^{+}$ | + | + | $\frac{1}{1}$ | $^+$ | + | | + | + | \pm | \pm | + | + | <u> </u> | + | $^{+}$ | + | + | + | 1 | + | $^{+}$ | \vdash | <u> </u> | | | } | _ | | = |
| L | | | | | | | | | | | Д. | L | | | | | | | | | | Щ. | | | ļ | | | | | | |
| UR | _ - | T | T | T | Ţ | Τ | T | | 7 | 1 | \top | | Т | | T | | 7 | Т | Τ | 1 | 1 | T | \overline{T} | | ТП | | - Т | | \neg | | |
| | t | $\frac{\perp}{\parallel}$ | 1 | $\frac{\perp}{1}$ | 1 | $\frac{1}{1}$ | \pm | $\frac{1}{1}$ | + | + | + | \pm | + | 十 | + | + | $\frac{\perp}{1}$ | + | + | $\frac{\perp}{1}$ | <u> </u> | + | <u> </u> | <u> </u> | | | <u></u> | 1 | \dashv | 믁 | = |
| | <u> </u> | + | $\frac{1}{1}$ | $\frac{\perp}{1}$ | + | + | + | + | + | $\frac{\perp}{1}$ | + | + | \pm | + | $\frac{\perp}{1}$ | + | + | + | + | +- | <u> </u> | + | <u> </u> | | | | \dashv | 4 | \dashv | 극 | = |
| | L | | | | 1. | | | | | | | | | | _ | | | | | | | | <u> </u> | <u> </u> | | | | | \perp | | _ |
| URI | L | 1 | \top | \top | 1 | \top | \top | _ | _ | - ₁ | _ | | _ | | _ | 1 | | _ | 1 | | Т | 1 | _ | 1 | ΤТ | - 1 | | | | | _ |
| | L | + | + | + | | + | + | + | + | + | + | | + | $\frac{1}{T}$ | <u> </u> | + | + | + | <u> </u> | <u> </u> | _ | <u> </u> | <u> </u> | _ | | _ | _ | _ | \dashv | <u> </u> | |
| | L | <u> </u> | 1 | 1 | - | 1 | <u> </u> | + | | \perp | \perp | 1 | _ | 1 | _ | \perp | <u> </u> | \perp | | <u> </u> | | <u> </u> | <u> </u> | | | _ | | _ | \downarrow | | |
| | L | | | | | | | | <u>. </u> | | | <u>L</u> , | $oldsymbol{oldsymbol{oldsymbol{oldsymbol{eta}}}$ | | | | | | | | | | L | | | | | | | | |
| RL | <u></u> | _ | | _ | | _ | | _ | | | _ | | | _ | _ | | _ | | | | , | | | | | | | | | | |
| _ | | <u> </u> | <u> </u> | | | <u> </u> | <u> L</u> | | | <u> </u> | _ | <u> </u> | <u> </u> | <u> </u> | | <u> </u> | \perp | | <u> </u> | | | | | | | | <u> </u> | | | \perp | |
| | | <u> </u> | <u> </u> | | | | | | | | | | | | | Ĺ | <u> </u> | | | L. | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | T | | T | |
| ЛL | | | | , | | | | | | | | | | | | | | | | | | | | | • | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | \top | | |
| | | | | | | | | | | | | | | | | | | | | , | | | | | | | Î | Ì | T | Ť | |
| Ť | | | İ | | | Ì | | Ì | | | | | | Ť | İ | İ | | | | | | | | 7 | \top | Ť | ╁ | Ť | \dagger | 十 | - |
| RL | | | | | ٠ | | 1 | | 1 | | 1 | | | | | | | | L | L | | | | | | | | | | | _ |
| | | | | | | | | | | | | | | | | Γ- | | | | | | | Ī | | | | \top | | | \top | _ |
| \forall | | | | | | <u> </u> | | † - | | | | | | | | | | | | | | | + | <u></u> ¦ | 1 | + | \dagger | + | + | + | _ |
| \dashv | | | | | | | | | | <u></u> | _ | | | | | <u> </u> | <u> </u> | <u> </u> | | | | | | 1 | -+ | \pm | + | + | \pm | + | _ |
| | ľ | | | | I | 1 | 1 | 1 | 1 | | | 1 | ł | l l | | i i | l | l | | 1 | ! | - 1 | - 1 | - 1 | | - 1 | 1 | - 1 | - 1 | | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

SPDES ID

| Name of MS4/Coalition Warren County | | N | YR | 2 | 0 | A | 1 1 | . 5 |
|---|--------------------------|----------|------------------|---------------|------------|--------------|---------------|-----|
| 4. Evaluating Progress Toward Measurable Goals MCM 1 | | | | | | | | |
| Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed. | achieving PP), includ | m lin | easura g requ | able niren | go: men | als ıts i | n Paı | rt |
| A. Briefly summarize the Measurable Goal identified in the S | WMPP ir | ı tl | iis re | por | ting | , pe | riod | 4 |
| Perform five educational events. | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| B. Briefly summarize the observations that indicated the over Goal. | all effectiv | ven | tess o | f th | is N | /Iea | sura | ble |
| Held 4 in-county erosion and sediment control trainings for contrassisted with the 2015 North County Stormwater Tradeshow (Ocat the Lake George Stormwater Workshop (Feb. 24, 2016), and p Conservation Field Days (June 4 and Oct 1 2015). | t. 15, 2015 |), 1 | partic | ipat | ed/i | pres | /16). ente | d |

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

| | | | | | 7 | |
|---|-------|------|------|-----|------|----------|
| : | samp. | les/ | pari | ici | pant | s/events |

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

Continuing to host E&S trainings, assist with developing the 12th Annual stormwater tradeshow, host the Warren County Envirothon and other events as determined throughout the year.

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| Name of MS4/Coalition Warren County N Y | Y R 2 0 A 1 1 5 |
|--|---|
| 4. Evaluating Progress Toward Measurable Goals MCM 1 | |
| Use this page to report on your progress and project plans toward achieving measurement identified in your Stormwater Management Program Plan (SWMPP), including III.C.1. Submit additional pages as needed. | |
| A. Briefly summarize the Measurable Goal identified in the SWMPP in thi | s reporting period. |
| Work with media outlets to have articles and information in the Glens Falls Pos (and other outlets) about stomrwater projects, stream cleanups and other water of | |
| B. Briefly summarize the observations that indicated the overall effectivened Goal. | ess of this Measurable |
| There were a total of 16 articles and electronic posts that dealt with stormwater, quality issues. | education and water |
| C. How many times was this observation measured or evaluated in this repo | |
| | (ex.: samples/participants/events |
| D. Has your MS4 made progress toward this Measurable Goal during this r | eporting period? |
| E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? | Yes ○ NoYes ○ No |
| F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule). | this MCM during |
| Continue developing articles in house and with media outlets. | |
| | |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
|--|--|
| 4. Evaluating Progress Toward Measurable Goals MCM 1 | |
| Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed. | achieving measurable goals PP), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the SV | WMPP in this reporting period. |
| Engage the Glen Lake Association and the Lake Sunnyside Associations. Offer information and presentations to the groups on how mitigation projects. | ciation in regards to stormwater impacts may be lessened through |
| B. Briefly summarize the observations that indicated the overa Goal. | all effectiveness of this Measurable |
| Both associations are members of the Warren County Water Quali Warren County SMO has provided recommendations to Lake Sum stormwater from Sunnyside East Road. Warren County SWCD with these recommendations. | nyside for reducing sediment and |
| C. How many times was this observation measured or evaluate | |
| | (ex.: samples/participants/events |
| D. Has your MS4 made progress toward this Measurable Goal | |
| | • Yes O No |
| E. Is your MS4 on schedule to meet the deadline set forth in the | e SWMPP? • Yes O No |
| F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedu | t the goals of this MCM during ule). |
| Continue to work with Associations to reduce stormwater impacts of County right of way. Continue to educate WC HWD staff on impowithin the watersheds. | on the respective lakes within the ortance of maintenance activities |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
|--|--|
| 4. Evaluating Progress Toward Measurable Goals | MCM 1 |
| Use this page to report on your progress and project pla identified in your Stormwater Management Program Pl III.C.1. Submit additional pages as needed. | |
| A. Briefly summarize the Measurable Goal identifie | d in the SWMPP in this reporting period. |
| Utilize and disperse brochures and other literature developed SWCD and the DEC regarding stormwater runoff. Get youth events as appropriate. | loped by the Regional Planning Board, the information out to public forums and to |
| B. Briefly summarize the observations that indicated Goal. | l the overall effectiveness of this Measurable |
| Stormwater and erosion control project information disc Following info is available at SWCD and DPW offices (1) Car Oil Poster, (2) Lawn Fertilizer poster, (3) Pet W Brochure, (5) Erosion and Sediment Control, (6) Storm Poster (SWCD office only). | and is provided at public education events: (aste Reduction poster, (4) Proper Ditching |
| C. How many times was this observation measured of | r evaluated in this reporting period? |
| | 1 5 0 |
| D. Has your MS4 made progress toward this Measur | ex.: samples/participants/eve |
| D. Has your 1154 made progress toward this measur | Yes ○ No |
| E. Is your MS4 on schedule to meet the deadline set f | forth in the SWMPP? • Yes O No |
| F. Briefly summarize the stormwater activities plann the next reporting cycle (including an implementate) | ed to meet the goals of this MCM during tion schedule). |
| Continue to disperse information to public at various pul and add on electronic database to email to schools. | olic locations. Increase literature handouts |
| | |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| | SPDES ID |
|---|---|
| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| 4. Evaluating Progress Toward Measurable Goals MCM 1 | |
| Use this page to report on your progress and project plans toward achieved identified in your Stormwater Management Program Plan (SWMPP), inc III.C.1. Submit additional pages as needed. | |
| A. Briefly summarize the Measurable Goal identified in the SWMP. | P in this reporting period. |
| Maintain information repository on Warren SWCD website for stormwa | ater information. |
| | |
| | |
| B. Briefly summarize the observations that indicated the overall effection. | ectiveness of this Measurable |
| SWCD website information was reviewed and updated as links were broassist with (1) education, (2) IDDE, (3) Construction activities and (4)Po Prevention/Municipal Good Housekeeping | ken. There are 13 links that obliution |
| C. How many times was this observation measured or evaluated in the | his reporting period? |
| | 3 |
| D. Has your MS4 made progress toward this Measurable Goal durin | (ex.: samples/participants/events, g this reporting period? |
| | Yes O No |
| E. Is your MS4 on schedule to meet the deadline set forth in the SWI | MPP? |
| F. Briefly summarize the stormwater activities planned to meet the g the next reporting cycle (including an implementation schedule). | oals of this MCM during |
| Continue to add new information, continue to focus on LID and green in education and outreach. | frastructure for public |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Warren County Y R 2 0 A N Name of MS4/Coalition Minimum Control Measure 2. Public Involvement/Participation The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 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 O Comments on SWMP Received #Comments Community Hotlines Phone# 5 2 6 3 4 1 4 Phone# Phone# Phone# Phone# Phone# Phone # Phone# Phone# Phone# Phone# Community Meetings # Attendees 2 0 Plantings Sq. Ft. Storm Drain Markings #Drains 1 8 O Stakeholder Meetings # Attendees O Volunteer Monitoring # Events O Other: 2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? Yes O No List-Serve # In List Newspaper Advertising # Days Run O TV/Radio Notices # Days Run Other:

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

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| lame | of N | 1 S4 | /Co | aliti | on_ | Warr | en C | ount | у — - | | | | | | | | | | | | | | N | Y | R | 2 | 0 | A | 1 | 1 | Ŀ |
|-----------|------------------|-------------|------------------|-------------|-----------------------|------|-----------|---------------|-----------|-------------------|----------|-----------------------|------------------|-----|---------|-------|--------|----|----------|-----|---------------|-------|----------------|--|--------------|--------------|---------------|------------|----------|---------------|---|
| 2. U P | RL leas | se p | co oro | n't. vid | : e s _l | pec | ific | ad | ldr | ess(| (es) | w] | her | e n | oti | ce(| s) c | an | be | acc | ess | ed | - n | ot l | hon | ne j | pag | ze. | | | |
| UR | L_ | _ | _ | 1 | 1 | Т | | 1 | _ | | _ | _ | T | | | _ | _ | _ | T | | | | | _ | _ | _ | , | | , — | | _ |
| W | W | W | <u> .</u> | W | a | r | r | е | n | С | 0 | u | n | t | У | n | У | | g | 0 | v | / | t | r | a | n | s | p | 0 | r | t |
| 1 | m | s | 4 | | p | h | p | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | \prod | | | | | | | | | | | | | | _ | | | | | | | | - |
| URI | | | | | | | | | | | | | | _ | | | | | | | L | | Ь. | <u>. </u> | <u> </u> | | L | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | Ī | | | | | | | |
| h | t | t | р | : | / | / | w | w | w | | w | a | r | r | е | n | ន | w | С | d | | 0 | r | g | / | m | s | 4 | | h | t |
| m | 1 | | | | - | | | | | | | | | | | | | | | | <u>}</u> | | _ | | | | _ | | \dashv | | _ |
| | | | | | | | i | | | | | | L | | | L | | | | | | | | | | i | | | | | |
| URL | | | | | | | | | | | | | | | | | i | | | | П | J | | | П | | | | \neg | -т | |
| | - + | | - | | 1 | | | | | | | _ | | | | | | | _ | | | | <u>-</u> | | | <u> </u> | _ | | \dashv | $\frac{1}{1}$ | _ |
| | _ | | $\frac{1}{1}$ | 1 | <u> </u> | | | | | <u> </u> | - | | | | | | _ | | | 1 | _ | _ | <u> </u> | - | - 4 | _ | | | _ | 1 | = |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| URL | | | ₁ - | | | - 1 | | | - 1 | | - 1 | _ | | _ | | | | | | - | | | | | | | | | | | |
| | | | _ | 4 | _ | | 4 | | _ | | | | | | _ | | | | | | | | | | | | | _ | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | T | | Ī | | | Ť | Ī | Ť | T | T | _ |
| ЛL | | | | | | | | | | | | | | | • | | | | , | | | | | | | | | | | | |
| | | | | | | | | | | \top | \Box | | | | | T | | | | | \top | | T | Ī | | Т | | | \top | | _ |
| T | _ | Ť | | Ť | | T | T | T | 7 | | T | _+ | 1 | 1 | T | 1 | T | | | | + | Ť | - † | Ť | † | _ | \dagger | \uparrow | \pm | + | _ |
| \dagger | _ | $^{+}$ | | $^{+}$ | 1 | + | \dagger | $\frac{1}{1}$ | \forall | \dagger | | =+ | + | | 1 | -+ | 1 | + | = | | + | \pm | =+ | -+ | + | - | \pm | + | + | - | _ |
| <u>_</u> | | _ ! | | Į_ | | | | | | | _L | | | | | | | | | | | | _ | | | | | | _ _ | | |
| JRL | | Т | | Т | Т | T | | Т | Ţ | 7 | Ţ | Т | Т | - - | Т | | \top | 1 | T | Т | 7 | Т | | \top | T | \top | $\overline{}$ | \top | | $\overline{}$ | _ |
| + | + | 1 | . - | + | 1 | + | + | + | + | $\frac{\perp}{1}$ | + | + | $\frac{\perp}{}$ | + | | \pm | + | | | + | $\frac{1}{1}$ | \pm | - | + | <u> </u> | + | + | 4 | + | + | 닉 |
| + | $\frac{\perp}{}$ | 1 | + | - | + | + | + | <u> </u> | + | + | 4 | $\frac{\downarrow}{}$ | <u> </u> | 4 | | + | | | <u> </u> | 1 | _ | _ | 4. | \perp | <u> </u> | | | _ | <u> </u> | \perp | ╛ |
| | | | | | | | | | | | | \perp | | | \perp | | | | | | | | | | | | | | | | |
| RL | | _ | | _ | _T | | | | | | | | _ | , | _ | _ | ı | | | _ | | | | _,_ | | _ | | | | | _ |
| | | \perp | | 1 | | 1 | | | | | <u> </u> | | | | | | | | | | | | | | | | | | | | |
| | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | Ī |
| T | 1 | | | | | T | | T | T | T | | T | Ī | Ī | Ī | Ť | Ť | Ť | Ť | Ť | Ī | Ť | | Ť | Ť | Ť | Ť | + | Ť | Ť | Ť |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | | | | | _ | | | | | | | | | | | | | | , | | | S | PDE | SI |) | | | | |
|-------------------|---------------|----------------|--------------|---------------|--|----------|--|----------|---|----------------|----------|----------------|-----------|-------------|----------|---------------|-------------|-----------|--|--------------|----------|---------------|----------------|-----------|---------------|--|----------------|----------|---|
| ne o | fΜ | S4/C | oal | itior | Wa | аггеп | Соц | nty | | | | | | | | | | | | | | 1 | 1 7 | R | 2 | 0 | A | 1 | 1 |
| | | s) c | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ple | 2850 | e pr | OV | ide | spe | cif | ic a | ıdd | lres | s(e | s) | wh | ere | no | tice | s c | an | be. | acc | esse | ed · | - no | ot h | om | e p: | age. | | | |
| URL | | | | | | | | | | | | | | | | | | | | | | | | | | -8- | • | | |
| i | | | | İ | | | | | | | | | | | | | | | | | | | | T | Τ | | | | |
| | Ī | | | Ī | Ť | Ť | 寸 | Ť | T | Ť | T | | | T | Ť | | \dagger | \dagger | + | \top | + | † | + | + | | +- | | ┢ | ÷ |
| $\frac{1}{1}$ | + | \dashv | + | $^{+}$ | + | + | 1 | + | $^+$ | 十 | + | \dashv | + | \pm | | $\frac{1}{1}$ | | | \pm | + | + | + | ÷ | +- | | <u> </u> | | <u> </u> | Ļ |
| | | | | | | | | | | | | | | | | | | | | | | | _ | | | L. | | | |
| JRL_ | - 7- | | _ | _ | | _ | $\overline{}$ | _ | | - - | Т | | | | _ | | _ | _ | _ | | _ | _ | _ | _ | | | _ | | _ |
| | 1 | | 1 | 4 | | | | <u> </u> | | | | | _ | | | | | | <u> </u> | <u> </u> | | | L | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \top | \exists | \Box | | | T | T | T | Ī | Ť | T | T | T | Ì | Ī | | | Ť | T | Ť | Ť | Ť | T | | Ť | | | | | |
| | | | | | | | | | | | | | | | | | l | 1_ | - | | | Т. | | | | | i | | |
| RL | $\overline{}$ | | 1 | Τ | Т | 1 | Т | \top | 7 | | T | - T | Т | Т | - | Т | \top | Т | 7 | Τ- | Т | 1 | - | _ | | | _ | \neg | |
| - | + | | + | $\frac{1}{1}$ | + | + | + | + | + | + | | <u> </u> | _ | \perp | + | + | | + | + | \perp | _ | <u> </u> | Ļ | | | | | | _ |
| | | | | | | | | | | | | \perp | | _ | | | \perp | | | | | | | | | | | _ | |
| | ĺ | | | | | | | | | | | | | | | | | | | T | T | | | | | | | | |
| RL | | | | | | | | | | | | | _ | | _,'_ | | | | 1 | | | | | | | | | | _ |
| Ť | Т | | T | | T | 1 | 1 | Τ | Τ | T | \top | Т | | | T | Τ | Τ | Т | 1 | Т | Τ | | Т | Γ | | \neg | Т | | _ |
| $\frac{\perp}{1}$ | + | + | + | + | + | + | + | <u> </u> | | +- | + | <u>-</u> - | + | + | + | + | + | + | + | 十 | <u> </u> | | <u> </u> | | 4 | <u> </u> | | 井 | _ |
| <u> </u> | | - | _ | | Ļ | <u> </u> | 1 | Ļ | + | <u> </u> | <u> </u> | _ _ | 1 | _ | | 1. | <u> </u> | <u> </u> | <u> </u> | | | | L | | | | | | _ |
| | | | | | | | _ | | | | | | | | | | ⊥. | | | | | | | | | | | | |
| T. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | T | | | | | | | | | | | | | | | | | T | _ |
| T | Ť | 十 | Ť | 1 | T | | † | T | T | T | Ť | Ť | \dagger | Ť | T | + | T | T | T | | | | <u></u> | _ | + | 十 | $^{+}$ | + | = |
| <u> </u> | $\frac{1}{1}$ | + | | + | <u> </u> | <u> </u> | <u> </u> | + | +- | $\frac{1}{1}$ | 十 | + | + | + | <u> </u> | + | 1 | <u> </u> | | | <u> </u> | | | _ | $\frac{1}{1}$ | | + | \dashv | |
| | | Т. | <u></u> | <u>.</u> | <u> </u> | | | | | | | | | | L. | | | | | <u> </u> | | | | | | | | \perp | |
| L | _ | , | 1 | 1 | | | | 1 | 1 | 1 | _ | _ | _ | _ | _ | _ | | | | | | - | | | | | | | |
| | | <u> </u> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | [| T | T | | | | T | | | | | | | | | | | Ť | |
| †= | T | | | | | | | | | T | Ť | \dagger | 1, | Ť | + | \vdash | \vdash | - | | | | | + | =+ | + | + | \pm | + | 닉 |
| | | | <u> </u> | <u> </u> | <u> </u> | <u> </u> | L | L | <u>i </u> | 1 | Ь. | | | 1 | | | | L | | | | | | | | | | | |
| <u>L</u> | 1 | Ţ | | | | | | Γ | Γ | ! | _ | _ | <u> </u> | | _ | T | 1 | _ | Υ | | | | | | | | - | | |
| <u> </u> | | <u> </u> | | | | | | <u>L</u> | | | _ | | _ | <u> </u> | <u> </u> | | | | L | | | | | | | | | \perp | ļ |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | T |
| $\overline{1}$ | T - | | | | | | | | | | _ | Ī | T | Ī | | | Ī | | | | | | - † | \dagger | - - | 十 | - | Ť | 寸 |

O eMail

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID N Y R 2 0 A Warren County 1 1 5 Name of MS4/Coalition 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 Department Warr e n C S 0 u n t CD Address 3 9 h С r o n R i R d 0 v е r 0 a City Zip W a rrr е n s b u r g NY 2 8 1 8 5 Phone 5 2 3 3 1 O Library Address O Annual Report O SWMP Plan O Comments City Zip Phone Other Annual Report SWMP Plan Comments Äddress W C D P W 4 0 2 8 i n Μ a S t t r е е City Zip W a е b N Y r r S u g 1 2 n r 8 8 5 Phone 6 2 3 1 Annual Report Web Page URL: O SWMP Plan O Comments а r d W W W r е ຣ С W n W 0 r m g S h t m 1 Please provide specific address of page where report can be accessed - not home page.

O Comments

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| | <u>SP</u> | <u>DES II</u> |) | | | | | |
|--|---------------|---------------|-------|-------|---------------|-----|-----|--------|
| Name of MS4/Coalition Warren County | N | YR | 2 | 0 | A | 1 | 1 | 5 |
| 4.a. If this report was made available on the internet, what da Leave blank if this report was not posted on the internet. | te was it p | osted: | ? | 1 - | | 1- | | |
| Leave blank it this report was not posted on the internet. | 0 4 |] / [2 | 6 | / | 2 | 0 | 1 | 6 |
| 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 submitti | ing a joint 1 | eport, | ans | wei | r 5. b |) | | |
| 5.a. Was an Annual Report public meeting held in this reporting If Yes, what was the date of the meeting? | ing period | ?] / [_ | |) | Yes | | ● N | lo |
| If No, is one planned? | | | | 0 | Yes | | • N | Ю |
| 5.b. Was an Annual Report public meeting held for all MS4s of | contributin | ıg to t | his 1 | rep | ort (| duı | ing | F 9 |
| this reporting period? | | | | 0 | Yes | . (| ● N | 0 |
| If No, is one planned for each? | | | | 0 | Yes | (| ● N | 0 |
| 6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report. | | | | 0 | Yes | ¢ | N | 0 |

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

| Name of MS4/Coalition Warren County | SPDES ID N Y R 2 0 A 1 1 5 |
|--|--|
| 7. Evaluating Progress Toward Measurable Goals MCM 2 Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the S | SWMPP in this reporting period. |
| Organize and undertake the Warren County Envirothon: an educ students. Glens Falls, Queensbury and Lake George students are B. Briefly summarize the observations that indicated the over | attendees. |
| Goal. Students from Glens Falls, Lake George and Queensbury participents Envirothon (April 22, 2015). | |
| C. How many times was this observation measured or evaluat | |
| | |
| D. Has your MS4 made progress toward this measurable goal | (ex.: samples/participants/event |
| programme goar | • Yes O No |
| E. Is your MS4 on schedule to meet the deadline set forth in th | · - |
| | ● Yes ○ No |
| F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheooling). | et the goals of this MCM during dule). |
| Continue to encourage participation and increase stormwater awar | reness opportunities at the event. |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blar | nk. |
|--|-----|
|--|-----|

| W | SPDES ID |
|--|--|
| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| 7. Evaluating Progress Toward Measurable Goals MCM 2 | 2 |
| Use this page to report on your progress and project plans towa identified in your Stormwater Management Program Plan (SWIII.C.1. Submit additional pages as needed. | rd achieving measurable goals MPP), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the | SWMPP in this reporting period. |
| Install ten stormdrain markers on county roads within the Ms4 | area. |
| | |
| | |
| | |
| B. Briefly summarize the observations that indicated the ov Goal. | erall effectiveness of this Measurable |
| A total of eighteen stormdrain markers were installed this year, Road in the Town of Queensbury One volunteer assisted SWC. | all placed on Main Street/Corinth D staff. |
| | |
| C. How many times was this observation measured or evaluation | ated in this reporting period? |
| | 2 |
| D. Has your MS4 made progress toward this measurable goa | <pre>(ex.: samples/participants/events, al during this reporting period?</pre> |
| | • Yes O No |
| E. Is your MS4 on schedule to meet the deadline set forth in | |
| F. Briefly summarize the stormwater activities planned to m the next reporting cycle (including an implementation sch | ● Yes ○ No eet the goals of this MCM during edule). |
| Continue to promote eduction of stormwater impacts at the neight and place a minimum of 10 stormdrain markers on county roads | aborhood level, increase volunteers within the Ms4 area. |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| Name of MS4/Coalition Warren County N Y R 2 0 A 1 1 5 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. Prepare and present an Annual Report for Public Review. Provide hard copies to public at WC DPW and WC SWCD offices. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. Public review began on April 27, 2015 and closed May 15, 2015. BOD adopted plan on May 15, 2015. Hard copies developed and made available at WC DPW and WC SWCD after report approval. C. How many times was this observation measured or evaluated in this reporting period? (con.: emaple en/participanes/emaple) Pyes ONo E. Is your MS4 made progress toward this measurable goal during this reporting period? Pyes ONo 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 have report available for public review electronically and hard copy. Once approved, report will be available electronically and hardcopy. | | SPDES ID |
|---|---|--|
| Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. Prepare and present an Annual Report for Public Review. Provide hard copies to public at WC DPW and WC SWCD offices. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. Public review began on April 27, 2015 and closed May 15, 2015. BOD adopted plan on May 15, 2015. Hard copies developed and made available at WC DPW and WC SWCD after report approval. C. How many times was this observation measured or evaluated in this reporting period? O. Has your MS4 made progress toward this measurable goal during this reporting period? O. Has your MS4 on schedule to meet the deadline set forth in the SWMPP? O Yes O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O Yes O No E. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). | Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. Prepare and present an Annual Report for Public Review. Provide hard copies to public at WC DPW and WC SWCD offices. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. Public review began on April 27, 2015 and closed May 15, 2015. BOD adopted plan on May 15, 2015. Hard copies developed and made available at WC DPW and WC SWCD after report approval. C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/c) Pyes O No The Syour MS4 made progress toward this measurable goal during this reporting period? Yes O No Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). | 7. Evaluating Progress Toward Measurable Goals MCM 2 | |
| Prepare and present an Annual Report for Public Review. Provide hard copies to public at WC DPW and WC SWCD offices. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. Public review began on April 27, 2015 and closed May 15, 2015. BOD adopted plan on May 15, 2015. Hard copies developed and made available at WC DPW and WC SWCD after report approval. C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/c Pyes O No Is your MS4 made progress toward this measurable goal during this reporting period? Yes O No Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). | identified in your Stormwater Management Program Plan (SW) | rd achieving measurable goals MPP), including requirements in Part |
| B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. Public review began on April 27, 2015 and closed May 15, 2015. BOD adopted plan on May 15, 2015. Hard copies developed and made available at WC DPW and WC SWCD after report approval. C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/c Area O No Is your MS4 made progress toward this measurable goal during this reporting period? Yes O No Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). | A. Briefly summarize the Measurable Goal identified in the | SWMPP in this reporting period. |
| Public review began on April 27, 2015 and closed May 15, 2015. BOD adopted plan on May 15, 2015. Hard copies developed and made available at WC DPW and WC SWCD after report approval. C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/e). Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes O No Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). | Prepare and present an Annual Report for Public Review. Prov DPW and WC SWCD offices. | ide hard copies to public at WC |
| 2015. Hard copies developed and made available at WC DPW and WC SWCD after report approval. C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/c) D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes O No T. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Continue to have report available for public review electronically and hard copy. Once approved | B. Briefly summarize the observations that indicated the ove Goal. | erall effectiveness of this Measurable |
| (ex.: samples/participants/ex.) The syour MS4 made progress toward this measurable goal during this reporting period? Yes ONo The syour MS4 on schedule to meet the deadline set forth in the SWMPP? Yes ONo The syour MS4 on schedule to meet the deadline set forth in the SWMPP? Yes ONo The syour MS4 on schedule to meet the deadline set forth in the SWMPP? One was the syour MS4 on schedule to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). | 2015. Hard copies developed and made available at WC DPW a | 5. BOD adopted plan on May 15, and WC SWCD after report |
| D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes O No Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Continue to have report available for public review electronically and hard copy. Once approved | C. How many times was this observation measured or evalua | ted in this reporting period? |
| Has your MS4 made progress toward this measurable goal during this reporting period? Yes No Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes No Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). | | <u> </u> |
| . Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Continue to have report available for public review electronically and hard copy. Once approved |). Has your MS4 made progress toward this measurable goa | during this reporting period? |
| Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Continue to have report available for public review electronically and hard copy. Once approved | . Is your MS4 on schedule to meet the deadline set forth in t | |
| Continue to have report available for public review electronically and hard copy. Once approved, eport will be available electronically and hardcopy. | . Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche | et the goals of this MCM during |
| | Continue to have report available for public review electronically eport will be available electronically and hardcopy. | and hard copy. Once approved, |
| | | |
| | | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| | SPDES ID |
|--|--|
| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| 7. Evaluating Progress Toward Measurable Goals MCM 2 | |
| Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed. | achieving measurable goals PP), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the S | SWMPP in this reporting period. |
| Periodically asses the Stormwater Management Plan and update | every 3 years. |
| | |
| | |
| B. Briefly summarize the observations that indicated the over Goal. | rall effectiveness of this Measurable |
| Last assessments were conducted in 2013-2014 and recommendate | tions were developed and accepted |
| in 2014-2015. | was developed and accepted |
| | |
| | |
| C. How many times was this observation measured or evaluate | ed in this reporting period? |
| | (ex.: samples/participants/eve |
| . Has your MS4 made progress toward this measurable goal | |
| | ● Yes ○ No |
| . Is your MS4 on schedule to meet the deadline set forth in th | 17E219797 |
| Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedule) | ● Yes ○ No et the goals of this MCM during lule). |
| lan will be evaluated Y2016-2017. | |
| | |
| | |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| Name of MS4/Coalition Warren County | SPDES ID N Y R 2 0 A 1 1 5 |
|---|---|
| 7. Evaluating Progress Toward Measurable Goals MCM 2 Use this page to report on your progress and project plans toward ach | ieving measurable goals |
| identified in your Stormwater Management Program Plan (SWMPP), III.C.1. Submit additional pages as needed. | |
| A. Briefly summarize the Measurable Goal identified in the SWM | MPP in this reporting period. |
| Continue to engage the public in the Adopt-A-Highway program, and county road covered by this initiative. This program is a beneficial n litter while helping to educate the public about environmental issues. | neans of addressing roadside |
| B. Briefly summarize the observations that indicated the overall of Goal. | effectiveness of this Measurable |
| The DPW and its 22 partners manages 33 highway miles through this collection and disposal 2 times through the year. | program and provides waste |
| C. How many times was this observation measured or evaluated in | n this reporting period? |
| | 2 |
| PATT BECK 1 | (ex.: samples/participants/even |
| D. Has your MS4 made progress toward this measurable goal dur | - 51 |
| F. Is your MS4 on schodule to most the deadline set fouth in the SI | ● Yes ○ No |
| E. Is your MS4 on schedule to meet the deadline set forth in the SV | WIVIPP? ■ Yes ○ No |
| F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule) | e goals of this MCM during |
| Continue to expand program by 1 mile or group participants by 1. | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| | SPDES ID |
|---|--|
| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| 7. Evaluating Progress Toward Measurable Goals MCM 2 | |
| Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed. | achieving measurable goals PP), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the S | WMPP in this reporting period. |
| Host a stream clean up day once per year. | |
| | |
| | |
| | |
| B. Briefly summarize the observations that indicated the overa Goal. | all effectiveness of this Measurable |
| One stream cleanup was held on Halfway Brook along Quaker Ro partnership with the Town of Queensbury One pickup truck of de | ad and Glenwood Ave. in bris was removed and disposed of. |
| C. How many times was this observation measured or evaluate | ed in this reporting period? |
| | 1 |
| D. Has your MS4 made progress toward this measurable goal o | (ex.: samples/participants/events |
| D. Has your Miss made progress toward this measurable goar t | • Yes O No |
| E. Is your MS4 on schedule to meet the deadline set forth in the | e SWMPP? |
| | • Yes O No |
| F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation sched | t the goals of this MCM during ule). |
| Add another item in concert with the clean up or engage communit levels. | y group to increase participation |
| | |
| | |
| | |

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 6 \end{bmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

| | SPDES ID |
|---|---|
| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| | |
| Minimum Control Measure | 3. Illicit Discharge Detection and Elimination |
| The information in this section is being report | ted (check one): |
| On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed | to this report? |
| 1. Enter the number and approx. perce | ent of outfalls mapped: 60 # 99% |
| 2. How many of these outfalls have been reporting period (outfall reconnaissa | n screened for dry weather discharges during this nce inventory)? |
| 3.a. What types of generating sites/sewer reporting period? | sheds were targeted for inspection during this |
| O Auto Recyclers | Landscaping (Irrigation) |
| O Building Maintenance | O Marinas |
| ○ Churches | O Metal Plateing Operations |
| Commercial Carwashes | Outdoor Fluid Storage |
| O Commercial Laundry/Dry Cleaners | Parking Lot Maintenance |
| O Construction Vehicle Washouts | ○ Printing |
| ○ Cross-Connections | Residential Carwashing |
| O Distribution Centers | ○ Restaurants |
| O Food Processing Facilities | O Schools and Universities |
| O Garbage Truck Washouts | O Septic Maintenance |
| O Hospitals | Swimming Pools |
| O Improper RV Waste Disposal | O Vehicle Fueling |
| O Industrial Process Water | O Vehicle Maint./Repair Shops |
| • Other: C O n C r e t e p 1 a r | O None n t o n B a y R o a d |
| O Sewersheds: | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | SPDES ID |
|--|--|
| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| 3.b. What types of illicit discharges have | e been found during this reporting period? |
| O Broken Lines From Sanitary Sewer | O Industrial Connections |
| O Cross Connections | ○ Inflow/Infiltration |
| O Failing Septic Systems | O Pump Station Failure |
| O Floor Drains Connected To Storm Sewers | O Sanitary Sewer Overflows |
| O Illegal Dumping | O Straight Pipe Sewer Discharges |
| Other: 4. How many illicit discharges/potential | None l illegal connections have been detected during this |
| reporting period? | i megai connections have been detected during this |
| | <u> </u> |
| 5. How many illicit discharges have bee | n confirmed during this reporting period? |
| 7. Has the storm sewershed mapping be | en completed in this reporting period? • Yes O No |
| If No, approximately what percent was o | completed in this reporting period? |
| 8. Is the above information available in (Is this information available on the we If Yes, provide URL(s): | eb? O Yes No |
| Please provide specific address of page w | where map(s) can be accessed - not home page. |
| | |
| | |
| | |
| URL | |
| | |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | | ******* | | | Г | SPDES | | |
|-----------------------------------|----------------|-------------|--|--------------|-----------|---------------|---|----------|
| ne of MS4/Coalition | Warren County | | | : | | NY | R 2 0 | A 1 |
| URL(s) con't.: | | | | | | | | |
| Please provide | specific ad | dress of pa | ge where ma | p(s) can b | e accesso | ed - no | t home | page |
| URL | | | | | <u> </u> | | | |
| | | | | | | | | |
| | | | | | | _ | | |
| | | | | | | | | |
| TOT | | | | LL | | | | |
| URL | | | | | | | | |
| | | | | | 1 1 1 | +-+ | | |
| | | | | | | | | _ |
| | | | | | | | | |
| RL | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | - | | + |
| | | | | | | _ | <u> </u> | |
| RŁ | | | | | | | | |
| | | | | | | ++ | | |
| | | | | | | | | |
| | | | | | | | | |
| RL | | | | | | | | |
| | | | | | | | | |
| | | | | | | †† | | + |
| 1 | | | | | 1 1 1 | | 1 1 | <u> </u> |
| | | | | | | | | |
| Has an IDDE la | w been ado | pted for ea | ch tradition | al MS4 and | d/or hav | e IDD | E proce | dures |
| pproved for all | non-tradit | ional MS4s | contributin | g to this re | eport? | | • 1 | Yes (|
| f.V.a. bas assaur | . 4 | 1 MC44 | | | 416 | l et l | | |
| f Yes, has every quivalent to the | | | | ms report | certified | | this law Yes O | |
| quirmiont to the | ~ 11 I D 1410U | W IDDE L | SE TT à | | | <u> </u> | 163 O. | INO C |
| | | | | | | | | |
| What percent of | staff in rel | evant posit | ions and der | artments 1 | has recei | ved N | DE tra | inino? |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| Name of MS4/Coalition Warren County | SPDES ID N Y R 2 0 A 1 1 5 |
|---|---|
| 12. Evaluating Progress Toward Measurable Goals MCM 3 Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed. | l achieving measurable goals PP), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the S | SWMPP in this reporting period. |
| Review and enforce all provisions of the Warren County IDDE la Warren County drainage infrastructure. | aw regarding illicit discharges into |
| B. Briefly summarize the observations that indicated the over Goal. | rall effectiveness of this Measurable |
| County DPW and Warren County SWCD have developed a system discharges. Warren County SWCD will investigate and advise County SWCD will take official action. 2015-2016 no occur reported. | ounty Highway Superintendant of |
| C. How many times was this observation measured or evaluate | ed in this reporting period? |
| | 0 |
| D. Has your MS4 made progress toward this measurable goal | (ex.: samples/participants/evoluting this reporting period? ● Yes ○ No |
| E. Is your MS4 on schedule to meet the deadline set forth in th | |
| F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched | ● Yes ○ No et the goals of this MCM during fule). |
| Continue to have Warren County DPW and SWCD work together remediate any illicit discharges found on county property. No Illic reporting period. | in tandem to identify and cit discharges were identified this |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| If submittin | ng this form as part of a | a joint report on beh | alf of a coalitio | n leave SPDES II | D blank. |
|---|--|-----------------------|--------------------------------|------------------------------------|----------------------------------|
| r | | | | SPDES ID | |
| Name of MS4/Coalition | Warren County | | | NYR2 | A 1 1 5 |
| 12. Evaluating Prog | gress Toward Meast | urable Goals MC | M 3 | | |
| Use this page to repoidentified in your Sto III.C.1. Submit addit | ormwater Manageme | nt Program Plan (| oward achievii SWMPP), incl | ng measurable g uding requireme | oals ents in Part |
| A. Briefly summari | ze the Measurable (| Goal identified in | the SWMPP | in this reportir | g period. |
| Update GIS map of a | all county outfalls wi | ithin the Ms4 area | | | |
| | | | | | |
| | | | | | |
| B. Briefly summariz | ze the observations | that indicated th | e overall effec | tiveness of this | Measurable |
| County outfalls withi | in the Ms4 area have | been located, map | pped and are av | vailable in GIS. | |
| | | | | | |
| | | | | | |
| ~ ~ | | | | | |
| C. How many times | was this observation | n measured or ev | aluated in thi | s reporting per | |
| | | | | (ev | es/participants/events |
| D. Has your MS4 ma | ide progress toward | l this measurable | goal during t | his reporting p | es/participants/events eriod? |
| | | | | • | Yes O No |
| E. Is your MS4 on sc | hedule to meet the | deadline set forth | in the SWM | | |
| F. Briefly summarize the next reporting | e the stormwater ac cycle (including an | tivities planned t | o meet the gos | | Yes O No I during |
| Update map as new ou | | | | | |
| , <u>F</u> | | 41500 (0104. | | | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| Name of MS4/Coalition Warren County | SPDES ID |
|---|--|
| | N Y R 2 0 A 1 1 5 |
| 12. Evaluating Progress Toward Measurable Goals MCM 3 | |
| Use this page to report on your progress and project plans towald identified in your Stormwater Management Program Plan (SWIIII.C.1. Submit additional pages as needed. | rd achieving measurable goals MPP), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the | SWMPP in this reporting period. |
| Conduct training for DPW personal regarding IDDE provisions | S. |
| | |
| | |
| | |
| Briefly summarize the observations that indicated the ov Goal. | erall effectiveness of this Measurable |
| | |
| Last specific IDDE training held January 13, 2015. IDDE was training, at Lake George. Focus of 2015-2016 was on stormwat sediment reduction. Employees with responsibility for IDDE has | er management and erosion and |
| | |
| . How many times was this observation measured or evalua | ated in this reporting period? |
| . How many times was this observation measured or evalua | |
| | (ex.: samples/participants/e |
| | (ex.: samples/participants/e |
| Has your MS4 made progress toward this measurable goa | (ex.: samples/participants/e- al during this reporting period? • Yes • No |
| Has your MS4 made progress toward this measurable goa | (ex.: samples/participants/e |
| Has your MS4 made progress toward this measurable goals is your MS4 on schedule to meet the deadline set forth in | (ex.: samples/participants/end during this reporting period? ● Yes ○ No the SWMPP? ● Yes ○ No |
| . Has your MS4 made progress toward this measurable goals. Is your MS4 on schedule to meet the deadline set forth in | (ex.: samples/participants/enal during this reporting period? Yes O No the SWMPP? Yes O No eet the goals of this MCM during |
| 2. How many times was this observation measured or evaluate. Has your MS4 made progress toward this measurable goal. Is your MS4 on schedule to meet the deadline set forth in Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedule and IDDE training for Warren County DPW staff and other demployees attend. | (ex.: samples/participants/end during this reporting period? Yes O No the SWMPP? Yes O No eet the goals of this MCM during edule). |
| . Has your MS4 made progress toward this measurable gos Is your MS4 on schedule to meet the deadline set forth in Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedule an IDDE training for Warren County DPW staff and other | (ex.: samples/participants/end during this reporting period? Yes O No the SWMPP? Yes O No eet the goals of this MCM during edule). |
| . Has your MS4 made progress toward this measurable goal Is your MS4 on schedule to meet the deadline set forth in Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedule an IDDE training for Warren County DPW staff and other | (ex.: samples/participants/end during this reporting period? Yes O No the SWMPP? Yes O No eet the goals of this MCM during edule). |

This report is being submitted for the reporting period ending March 9, 2 0 1 6 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

| , | | , | SPI | DES | ID | | | | | | |
|-----------------------|---------------|---|-----|-----|----|---|---|---|---|---|---|
| Name of MS4/Coalition | Warren County | | N | Y | R | 2 | 0 | A | 1 | 1 | 5 |
| | | | | | | - | | | | | |

| Minimum Control Measures 4 and 5. | | |
|---|-----------------------|-------------|
| Construction Site and Post-Construction Control | | |
| The information in this section is being reported (check one): | | |
| On behalf of an individual MS4On 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 regul mechanism that provides equivalent protection to the NYS SPDES General Permi Stormwater Discharges from Construction Activities? | atory t for Yes | O No |
| 1b. Has each Town, City and/or Village contributing to this report documented that the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Er Sediment Control through either an attorney certification or using the NYSDEC (| osion | v is and |
| | _ | • NT |
| If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. | | |
| ○ 09/2004 ○ 03/2d |)06 | 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 b | een_ | |
| reviewed in this reporting period? | | 0 |
| 4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? | | • 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 SWPPP process? | | O No |
| | | |

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

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

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | _ | | | | SI | PDES ID | | |
|------|---|------------------------------------|------------------------------|-----------------------------------|--------------|-----------------------|-----------------|---------------------|
| Nar | me of MS4/Coalition | Warren County | | | N | | 2 0 A | 1 1 5 |
| | Minimum Co | ontrol Measu | re 4. Cons | truction Site | Stormwa | iter Rur | off Co | <u>ntrol</u> |
| The | e information in this | section is being | reported (checi | k one): | | | | |
| | On behalf of an indiv On behalf of a coaliti | ion | | | ٦ | | | |
| | How man | ny MS4s contrib | outed to this re | eport? |] | | | |
| 1. | How many constr during this repor | ruction project ting period? | ts have been a | authorized for | disturbanc | ces of one | acre or | more |
| 2. 1 | How many constr during this report | ruction project ting period? | s disturbing | at least one acı | re were act | tive in yo | ur juris | diction 1 |
| 3. ' | What percent of a | active construc | ction sites we | re inspected du | ring this r | eporting | period? | NT |
| 4. \ | What percent of a | active construc | tion sites wer | e inspected mo | ore than on | ıce? | 1 0 | 0 0 % • NT |
| 5. I | Do all inspectors v | working on bel rmwater Inspe | half of the M ction Manua | S4s contributir 1? | ng to this r | eport use | | 1 1 1 4 |
| 6. I | Does your MS4/Co SWPPPs) of cons | oalition provid truction projec | le public acce | ess to Stormwa ubject to MS4 1 | ter Pollutio | approva | ition Pla 1? | ans |
| I | f your MS4 is Nor public review? | | | | | Yes | \circ No | O NT for O No |
| If | Yes, use the follo | wing page to ic | lentify location | n(s) where SWI | PPPs can be | e accessed | - | O 110 |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | r | | | | | | | | 2LD | ஈ்2 π | , | | | | |
|-----------------------|-------------|------------------------------|-------------|---|--------------|----------------|-------------|---------|--|----------|--------|---------------|--|--------|--------|
| Name of MS4/Coalition | Warren Cou | inty | | | | | | | \neg | YR | \neg | 0 A | 1 | 1 | 5 |
| 6. con't.: | | | | | | | | | | | | | | | |
| Submit addition | al pages | as neede | ed. | | | | | | | | | | | | |
| ■ MS4/Coalition Off | | | | | | | | | | | | | | | |
| Department | 100 | | | | | | | | | | | | | | |
| Warre | e n (| Cou | n t | у | D P | W | | | T | \top | | | \prod | \top | |
| Address | | | | | | | | | | | | ' | | | |
| 4 0 2 8 | Ma | $i \mid n \mid \underline{}$ | S t | re | e t | | | | | | | | | | |
| City Warre | n s h | ur | a l | \top | | ът | | Zip | <u> </u> | 0 0 | _ | | | | _ ¬ |
| Phone | 111 5 1 | <u> </u> | g | _ [| | N | Y | 1 | 2 | 8 8 | 5 | | | | |
| (518) | 6 2 3 | 3 - 4 | 1 4 2 | 1 | | | | | | | | | | | |
| O Library | | | | j | | | | | | | | | | | |
| Address | | | | | | _, | | | | | | | | | |
| | | | | | | | | | | | | | | | 7 |
| City | | | | 11 | | | <u> </u> | Zip | _ | T = T | | | | _ | _ _ |
| Phone | <u> </u> | | | | | | | | | | | · 🔲 | | | |
| () | |]_ | | 7 | | | | | | | | | | | |
| | L | J | | J | | | | | | | | | | | |
| Other Address | | | | | | | | | | | | | | | |
| | | TŢ | TT | TT | TT | TT | | | | | | \top | | Τ- | 7 |
| City | | | | | | | | Zip | | | | $\perp \perp$ | Ш_ | | _ |
| | | | | | | | | | | | _ | | | T | 7 |
| Phone | | ı r | | | | | _ | | | <u> </u> | | | | | |
| () | | - | | | | | | | | | | | | | |
| O Web Page URL(s): | Please p | rovide sp | ecific a | ddress | where | SWPI | Ps car | ı be ac | cesse | ed - ne | ot ho | me p | age. | | |
| URL | | | | , , , , , , , , , , , , , , , , , , , | | 1 1 | | | | r—, | | | | , | , |
| | | | <u> </u> | | | <u> </u> | | | | | | | | | |
| | | | | | | | | | | | | | \top | | |
| | | | | | | | | | 7 7 | | Ť | | | | |
| URL | | | | | | -1 | | | | | | | _ l | | |
| | | | | | | | | T | TT | | | | T | | |
| | | | | | | | | † † | † | \pm | | =+ | † - | H | |
| | | | | + | | | | | +-+ | | 1 1 | \pm | 1 | | |
| | \bot | | | | | | 1 | | | - 1 | | - | | | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

SPDES ID

| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
|--|---|
| 7. Evaluating Progress Toward Measurable Goals MCM 4 | |
| Use this page to report on your progress and project plans toward achie identified in your Stormwater Management Program Plan (SWMPP), in III.C.1. Submit additional pages as needed. | |
| A. Briefly summarize the Measurable Goal identified in the SWM | PP in this reporting period. |
| Develop a Stormwater Pollution Prevention Plan (SWPPP) that confor Permit requirements for county projects that disturb one or more acres | |
| B. Briefly summarize the observations that indicated the overall efficient. | fectiveness of this Measurable |
| A SWPPP was developed that includes numerous phases of developme county's development on the north side of West Brook, located in the a Village". This SWPPP and construction site are still active. | ent. This SWMPP covers the rea of the old "Gaslight |
| 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 | |
| E. Is your MS4 on schedule to meet the deadline set forth in the SW | ● Yes ○ No |
| E. 18 your 19154 on schedule to meet the deadline set forth in the Sw | • Yes O No |
| F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule). | goals of this MCM during |
| Evaluate SWMPP and the practices and amend SWMPP and practices in quality at the constructions site. | f needed to improve water |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| Name of MS4/Coalition Warren County | SPDES ID |
|--|--|
| The state of the s | N Y R 2 0 A 1 1 5 |
| 7. Evaluating Progress Toward Measurable Goals MCM 4 | |
| Use this page to report on your progress and project plans toward ac identified in your Stormwater Management Program Plan (SWMPP III.C.1. Submit additional pages as needed. | chieving measurable goals), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the SW | MPP in this reporting period. |
| Ensure all contractors working for the county on projects that utiliz "Contractors Certification Statement". | e a SWMPP have signed a |
| B. Briefly summarize the observations that indicated the overall Goal. | l effectiveness of this Measurable |
| Contractors certifications have been signed | |
| | |
| . How many times was this observation measured or evaluated | |
| | (ex.: samples/participants/eve |
| | t === F100, publication eve |
| . Has your MS4 made progress toward this measurable goal du | ring this reporting period? |
| | ● Yes ○ No |
| | ● Yes ○ No SWMPP? |
| . Is your MS4 on schedule to meet the deadline set forth in the S | ● Yes ○ No SWMPP? ■ Yes ○ No the goals of this MCM during |
| . Is your MS4 on schedule to meet the deadline set forth in the State of the State of the State of the State of the State of the State of the Next reporting cycle (including an implementation schedule). | ● Yes ○ No SWMPP? ● Yes ○ No the goals of this MCM during le). |
| D. Has your MS4 made progress toward this measurable goal due. Is your MS4 on schedule to meet the deadline set forth in the State of the set of the set of the set of the set of the next reporting cycle (including an implementation schedule). Continue to ensure all contractors have signed the "Contractor's Certification of the set of the | ● Yes ○ No SWMPP? ● Yes ○ No the goals of this MCM during le). |
| . Is your MS4 on schedule to meet the deadline set forth in the State of the stormwater activities planned to meet the next reporting cycle (including an implementation schedule). | ● Yes ○ No SWMPP? ● Yes ○ No the goals of this MCM during le). |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| | SPDES ID |
|--|---|
| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| | |
| 7. Evaluating Progress Toward Measurable Goals M. | ICM 4 |
| Use this page to report on your progress and project plan | s toward achieving measurable goals |
| identified in your Stormwater Management Program Plan III.C.1. Submit additional pages as needed. | a (SWMPP), including requirements in Part |
| in.c.r. Suoimt additional pages as needed. | |
| A. Briefly summarize the Measurable Goal identified | in the SWMPP in this reporting period. |
| Ensure all subcontractors working for on projects that ut 4-Hour contractor Erosion and Sediment Control training | ilize a SWMPP have signed obtained the g and are in possession of ID cards. |
| B. Briefly summarize the observations that indicated Goal. | the overall effectiveness of this Measurable |
| Contractors working on project have valid certifications. | |
| | |
| | |
| | |
| C. How many times was this observation measured or | evaluated in this reporting period? |
| | 1 |
| D. Has your MC4 made was great toward this | (ex.: samples/participants/event |
| D. Has your MS4 made progress toward this measural | ble goal during this reporting period? • Yes • No |
| E. Is your MS4 on schedule to meet the deadline set fo | |
| • | • Yes O No |
| F. Briefly summarize the stormwater activities planned the next reporting cycle (including an implementation) | d to meet the goals of this MCM during on schedule). |
| Continue to ensure all contractors have valid 4-Hour Cont Training training. | ractors Erosion and Sediment Control |
| | |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| Name of MS4/Coalition Warren County | |
|--|---|
| Name of MS4/Coantion | N Y R 2 0 A 1 1 5 |
| | |
| 7. Evaluating Progress Toward Measurable Goals MCM 4 | |
| Use this page to report on your progress and project plans toward achieving identified in your Stormwater Management Program Plan (SWMPP), includ III.C.1. Submit additional pages as needed. | measurable goals ling requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the SWMPP in | this reporting period. |
| Provide weekly inspection of projects by a Professional Engineer or CPESC which will be kept on file at the DPW with the project manager. | Cutilizing checklist, |
| B. Briefly summarize the observations that indicated the overall effectiv | veness of this Measurable |
| Weekly inspections have been conducted and are available for review at the | WC DPW office. |
| C. How many times was this observation measured or evaluated in this r | reporting period? |
| | (ex.: samples/participants/even |
| | |
| . Has your MS4 made progress toward this measurable goal during thi | s reporting period? |
|). Has your MS4 made progress toward this measurable goal during thi | s reporting period? ● Yes ○ No |
| D. Has your MS4 made progress toward this measurable goal during thing. Is your MS4 on schedule to meet the deadline set forth in the SWMPF | s reporting period? • Yes O No |
| . Is your MS4 on schedule to meet the deadline set forth in the SWMPF. Briefly summarize the stormwater activities planned to meet the goals | s reporting period? ● Yes ○ No ?? ● Yes ○ No |
| . Is your MS4 on schedule to meet the deadline set forth in the SWMPF. Briefly summarize the stormwater activities planned to meet the goals the next reporting cycle (including an implementation schedule). | s reporting period? ● Yes ○ No ?? ● Yes ○ No |
| . Is your MS4 on schedule to meet the deadline set forth in the SWMPF. Briefly summarize the stormwater activities planned to meet the goals | s reporting period? ● Yes ○ No ?? ● Yes ○ No |
| . Is your MS4 on schedule to meet the deadline set forth in the SWMPF. Briefly summarize the stormwater activities planned to meet the goals the next reporting cycle (including an implementation schedule). | s reporting period? Yes ONo Yes No |
| . Is your MS4 on schedule to meet the deadline set forth in the SWMPF. Briefly summarize the stormwater activities planned to meet the goals the next reporting cycle (including an implementation schedule). | s reporting period? ● Yes ○ No ?? • Yes ○ No |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | | | | | э ш |
|--|--|------------------------------------|------------------------------------|--|---------------------------------------|
| Name of MS4/Coali | tion Warren County | | | NY | T T T T T T T T T T T T T T T T T T T |
| <u>Minimu</u> | <u>m Control Me</u> | easure 5. Pos | t-Constructi | on Stormwate | er Management |
| The information in | this section is bei | ing reported (che | eck one); | | |
| On behalf of anOn behalf of a c | | stributed to this | *cmowt2 | | |
| | • | | • —— | | |
| 1. How many an MS4/Coalition | a what type of po i inventoried, insp | ost-construction pected and mai | stormwater ma ntained in this r | inagement praction of the control of | ces has your |
| | | # Inventoried | # Inspections | # Times | |
| O Alternative Pract | tices | O | О | Maintained 0 | |
| ○ Filter Systems | | | | | |
| O Infiltration Basin | S | 2 | 2 | 2 | |
| Open Channels | | 7 | 7 | 1 | |
| O Ponds | | 0 | 0 | 0 | |
| ○ Wetlands | | 0 | 0 | 0 | |
| Other | | 0 | 0 | 0 | |
| 2. Do you use an BMPs, inspect | electronic tool (ions and mainta | (e.g. GIS, data anance? | base, spreadsh | eet) to track pos | st-construction • Yes • No |
| 3. What types of Development/l | non-structural Better Site Desig | practices have gn/Green Infra | been used to instructure prin | mplement Low I | Impact |
| O Building Codes | O Municipal Co | omprehensive Pla | ans | | |
| Overlay Districts | Open Space P | Preservation Prog | gram | | |
| ○ Zoning | O Local Law or | Ordinance | | | |
| None | O Land Use Rep | gulation/Zoning | | | |
| O Watershed Plans | Other Compre | ehensive Plan | | | |
| Other: | | | | | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| | SPD | ES ID | | | | | |
|--|--------------------|------------|-------|------|-------|-------|-----|
| Name of MS4/Coalition Warren County | N | YR | 2 | 0 | A 1 | L 1 | . 5 |
| 4a. Are the MS4s contributing to this report involved in a re | gional/watershed w | ide pl | ann | ing | effo | rt? | 1 |
| | • | F - | | _ | Yes | | No |
| 4b. Does the MS4 have a banking and credit system for storn | nwater managemen | t prac | etico | es? | | | |
| | | | | O | Yes | | No |
| 4c. Do the SWMP Plans for each MS4 contributing to this re and approval of banking and credit of alternative siting of | | | | | | | |
| | | _ | | Ō | Yes | | No |
| 4d. How many stormwater management practices have been | implemented as pa | rt of t | his | sysi | tem i | n th | is |
| reporting period? | | | | | | 1 | |
| 5. What percent of municipal officials/MS4 staff responsible training on Low Impace Development (LID), Better Site I | | | | | ttend | led | |
| Infrastructure principles in this reporting period? | | | | | 4 | 4 | % |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| Name of MS4/Coalition Warren County | SPDES ID N Y R 2 0 A 1 1 5 |
|--|---|
| 6. Evaluating Progress Toward Measurable Goals MCM 5 | |
| Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed. | achieving measurable goals P), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the SV | WMPP in this reporting period. |
| County land developments exceeding 1 acre of disturbance require | es a SWPPP. |
| B. Briefly summarize the observations that indicated the overa | all effectiveness of this Measurable |
| SWPPP developed for the Charles R. Wood project as part of the The SWPPP is performing as planned, inspections are up to date a NYSDEC 4 Hour Erosion and Sediment Control training. | Westbrook Conservation Initiative. nd the contractor is certified in the |
| C. How many times was this observation measured or evaluate | d in this reporting period? |
| | 1 |
| D. Has your MS4 made progress toward this measurable goal of | ex.: samples/participants/events, luring this reporting period? |
| | ● Yes ○ No |
| E. Is your MS4 on schedule to meet the deadline set forth in the | |
| F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation sched | • Yes O No t the goals of this MCM during ule). |
| Continue to evaluate and monitor for SWPPP and BMP efficiency. | |
| | |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| Name of MS4/Coalition Warren County | SPDES ID N Y R 2 0 A 1 1 5 |
|--|----------------------------------|
| Minimum Control Measure 6. Stormwater Man | agement for Municipal Operations |
| The information in this section is being reported (check one): | |
| ● On behalf of an individual MS4 ○ On behalf of a coalition | |

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.

How many MS4s contributed to this report?

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

| 0 4 /4 /4 / 77 / 77 | | | <u>performed within</u> | 1 the past 3 |
|--|------------------|-----------------|-------------------------|--------------|
| Operation/Activity/Facility | <u>Addressed</u> | <u>in SWMP?</u> | years? | |
| Street Maintenance | • Yes | ○ No | Yes | ○ No |
| Bridge Maintenance | • Yes | | • Yes | O No |
| Winter Road Maintenance | • Yes | | • Yes | O No |
| Salt Storage | | | Yes | O No |
| Solid Waste Management | | | ○ Yes | O No |
| New Municipal Construction and Land Disturba | | | Yes | O No |
| Right of Way Maintenance | Yes | | Yes | O No |
| Marine Operations | | | ○ Yes | O No |
| Hydrologic Habitat Modification | | | • Yes | O No |
| Parks and Open Space | | O No | | O No |
| Municipal Building | • Yes | | ● Yes | O No |
| Stormwater System Maintenance | • Yes | | | O No |
| Vehicle and Fleet Maintenance | | | | O No |
| Other | ○ Yes | • No | | O No |
| | | ******** | | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | SPD | DES ID | | | | | |
|---|----------|--------|------|------|------|-----|-----|
| Name of MS4/Coalition Warren County | N | YR | 2 | 0 A | 1 | 1 | 5 |
| 2. Provide the following information about municipal operations | good he | ouseke | eepi | ng p | rog | ran | 18: |
| Parking Lots Swept (Number of acres X Number of times swept) | | # Acre | es [| | | _ | 1 |
| • Streets Swept (Number of miles X Number of times swept) | | # Mile | es | | | 4 | 0 |
| Catch Basins Inspected and Cleaned Where Necessary | | | # [| | | 3 | 0 |
| Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary | | | # [| | | | 1 |
| O Phosphorus Applied In Chemical Fertilizer | | # Lb: | s. [| | | | 0 |
| Nitrogen Applied In Chemical Fertilizer | | # Lb: | s. | 1 | . 9 | 2 | 6 |
| Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.) | | Acres | | | |). | |
| 3. How many stormwater management trainings have been provid during this reporting period? | led to n | nunici | pal | emp | ploy | ees | 8 |
| 4. What was the date of the last training? | 1 | / 2 | 2 | / 2 | 0 | 1 | 6 |
| 5. How many municipal employees have been trained in this report | ting pe | eriod? | | | | | 7 |
| 6. What percent of municipal employees in relevant positions and stormwater management training? | depart | ments | rec | eive | 4 | 8 | % |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| | SPDES ID |
|---|--|
| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
| | |
| 7. Evaluating Progress Toward Measurable Goals MCM 6 | |
| Use this page to report on your progress and project plans toward | achieving measurable goals |
| identified in your Stormwater Management Program Plan (SWMP | PP), including requirements in Part |
| III.C.1. Submit additional pages as needed. | |
| A. Briefly summarize the Measurable Goal identified in the SV | WMPP in this reporting period. |
| Reduction in stormwater from county maintained facilities and int | frastructure. |
| · | |
| | |
| | |
| | |
| B. Briefly summarize the observations that indicated the overa | all effectiveness of this Measurable |
| | |
| Routine ditch maintenance as preformed in the Ms4 boundary. Up 1/4 acre was hydroseeded to reduce sediment. | pon completion a surface area of |
| 174 acre was hydrosected to reduce sediment. | |
| | |
| | |
| | |
| C. How many times was this observation measured or evaluate | ed in this reporting period? |
| | |
| D. W | (ex.: samples/participants/events) |
| D. Has your MS4 made progress toward this measurable goal of | |
| | ● Yes ○ No |
| E. Is your MS4 on schedule to meet the deadline set forth in the | e SWMPP? |
| T 7.10 | ● Yes ○ No |
| F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation sched | t the goals of this MCM during lule). |
| Continue to seek opportunities to reduce stormwater and erosion to | surface waters where applicable. |
| | |
| | |
| | |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| Name of MS4/Coalition Warren County | SPDES ID N Y R 2 0 A 1 1 5 |
|---|---|
| 7. Evaluating Progress Toward Measurable Goals Mo | CM 6 |
| Use this page to report on your progress and project plans identified in your Stormwater Management Program Plan III.C.1. Submit additional pages as needed. | toward achieving measurable goals (SWMPP), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified | in the SWMPP in this reporting period. |
| Vehicle and Equipment and Maintenance Facilities Proce facilities will follow EPA and DEC regulations and guide maintenance activities. | dures: Warren County vehicle maintenance lines in all vehicle washing and |
| B. Briefly summarize the observations that indicated to Goal. | he overall effectiveness of this Measurable |
| All vehicle maintenance occurs outside of the urbanized Marrensburg) and an oil water separator is installed where An oil recycling/recovery company is contracted to removimpact detergents. | e oil changes occur (not in urbanized area). |
| C. How many times was this observation measured or | evaluated in this reporting period? |
| | (ex.: samples/participants/even |
| D. Has your MS4 made progress toward this measurab | le goal during this reporting period? |
| E. Is your MS4 on schedule to meet the deadline set for | ● Yes ○ No th in the SWMPP? |
| | • Yes O No |
| F. Briefly summarize the stormwater activities planned the next reporting cycle (including an implementation | |
| Continue with the existing process. (1) Instruct any county down a vehicle in the urbanized Ms4 area it must be done | n a filtering area or in a commercial car |

wash and not discharge directly to a stormsewer system. (2) Instruct drivers of county owned vehicles to alert County Maintenance shop if vehicle is leaking fluids for immediate repair.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$

| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
|---|--|
| 7. Evaluating Progress Toward Measurable Goals MC | M 6 |
| | |
| Use this page to report on your progress and project plans to identified in your Stormwater Management Program Plan (III.C.1. Submit additional pages as needed. | |
| A. Briefly summarize the Measurable Goal identified in | the SWMPP in this reporting period. |
| Building maintenance activities - develop a list of activities determine if any improvements are necessary. | s that may impact stormwater and |
| B. Briefly summarize the observations that indicated the | e overall effectiveness of this Measurable |
| | |
| Buildings and grounds reported that at the municipal center shop and an oil recycling contractor removes the waste oil. | t, they have an oil water operator in the |
| Majority of stormwater run off at the Exit 20 facilities is intruns through vegetation prior to leaving the sites. Any sprainto the oil water separator. The ow separator is maintained | ay down of vehicles goes to the grass or |
| C. How many times was this observation measured or ev | valuated in this reporting period? |
| | |
| D. Has your MS4 made progress toward this measurable | <pre>(ex.: samples/participants/e e goal during this reporting period?</pre> |
| | ● Yes ○ No |
| 2. Is your MS4 on schedule to meet the deadline set forth | h in the SWMPP? |
| | • Yes O No |
| T. Briefly summarize the stormwater activities planned the next reporting cycle (including an implementation | |
| Continue to develop stormwater activity list to improve storn | mwater runoff. |
| Continue to develop stormwater activity list to improve stor | mwater runori. |
| | |
| | T . |
| | |

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

| i | | | SPI | DES | ID | | | | | | |
|-----------------------|---------------|--|-----|-----|----|---|---|---|---|---|---|
| Name of MS4/Coalition | Warren County | | N | Y | R | 2 | 0 | A | 1 | 1 | 5 |

7. Evaluating Progress Toward Measurable Goals MCM 6

| Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. |
|--|
| A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. |
| Inspect and pumpout septic at the Westmount adult care facility. |
| B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable |
| Goal. |
| This facility (3, 10,000 gallon tanks) was pumped out once in the 2015-2016 reporting year. The facility was sold and is now privatized |
| C. How many times was this observation measured or evaluated in this reporting period? |
| |
| (ex.: samples/participants/ev.) D. Has your MS4 made progress toward this measurable goal during this reporting period? |
| • Yes O No |
| E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? |
| • Yes O No |
| F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). |
| None as the facility is no longer owned by the county. |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| Nam | e of MS4/Coalition Warren County | | | | NYR | 2 0 A | 1 1 5 |
|-----------------------|---|---|---------------------------|--------------------|--------------|-----------------------------------|-----------|
| 7. I | Evaluating Progress Toward | Measurable Goals | MCM 6 | | | | |
| iden | this page to report on your pro tified in your Stormwater Man .1. Submit additional pages as | agement Program I | | | | | n Part |
| A. B | riefly summarize the Measu | rable Goal identifi | ied in the S | WMPP i | n this repo | orting pe | riod. |
| Elin | inate or reduce phosphrous in | all fertilizer mixes | | | | | |
| | | | | | | | |
| B. B Goal | riefly summarize the observa | ations that indicate | ed the over | all effecti | iveness of | this Mea | surable |
| chem Chas Futui | icipal Center - Grass clippings nical fertilizers. R. Woods Park - Grass clippi re vegetation establishment and se maintenance needs. | ngs are removed. N | No additiona | l phosph | orus is use | d. | |
| С. Н | ow many times was this obse | ervation measured | or evaluate | ed in this | reporting | period? | |
| | | | | | | | 2 |
|). Ha | s your MS4 made progress | toward this measu | rable goal (| during th | | samples/par ng period ● Yes | 1? |
| . Is | your MS4 on schedule to me | et the deadline set | forth in the | e SWMP | P? | | |
| . Br | iefly summarize the stormwa e next reporting cycle (includ | ater activities plan ling an implement | ned to mee ation sched | t the goa ule). | ls of this N | • Yes ACM dur | |
| | vegetation conditions decline, isting application rates are me | | | ken and a | analyzed to | determin | e if |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| Name of MS4/Coalition Warren County | N Y R 2 0 A 1 1 5 |
|---|---|
| 7. Evaluating Progress Toward Measurable Goals MCM 6 | |
| Use this page to report on your progress and project plans toward as identified in your Stormwater Management Program Plan (SWMPP III.C.1. Submit additional pages as needed. | |
| A. Briefly summarize the Measurable Goal identified in the SW | MPP in this reporting period. |
| Pesticide use and applications will be evaluated to reduce toxicity le | evels. |
| | |
| B. Briefly summarize the observations that indicated the overall Goal. | effectiveness of this Measurable |
| At this time the county no longer treat for termites or for carpenter a | ants. |
| Flowering crabapple tress are treated with a foliar application to red and scabs on the trees. Application is done by a certified applicator | |
| C. How many times was this observation measured or evaluated | in this reporting period? |
| | 1 |
| D. Has your MS4 made progress toward this measurable goal du | <pre>(ex.: samples/participants/events, uring this reporting period?</pre> |
| | • Yes O No |
| E. Is your MS4 on schedule to meet the deadline set forth in the | _ |
| F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedul | ● Yes ○ No the goals of this MCM during le). |
| Monitor use and reduce when applicable. When crabapple trees die, requires less/no pesticide treatments. | replace with species that |
| | |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

| If submitting this form as part of a joint report on behalf of a coalition | lea | ve S | SPD | ES | ΙDΙ | blanl | k. | |
|--|-----|------|-----|----|-----|-------|--------|---|
| | SPI | DES | D | | | | | |
| Name of MS4/Coalition Warren County | N | Y | R | 2 | 0 | A : | 1 1 | 5 |
| 7. Evaluating Progress Toward Measurable Goals MCM 6 | | | | | | | _ | |

| Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed. |
|--|
| A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period. |
| Create and install "no pets allowed" signage at the Municipal Center to reduce pet waste. |
| B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. |
| Four signs were installed and vandalized in Y2015-2016. Four new signs are being reproduced. |
| 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). |
| Reinstall signs at municipal center. Monitor success in reducing pet waste at the Municipal Center. |

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | | | DES I | _ | | | |
|--|---------------------------|----------------|----------------|-----------------|----------------|-----------|------|
| Name of MS4/Coalition Warren County | | N | Y] | R 2 | 0 A | . 1 | 1 5 |
| 7. Evaluating Progress Toward Measurable Goals MCM 6 | | | | | | | |
| Use this page to report on your progress and project plans toward dentified in your Stormwater Management Program Plan (SWM II.C.1. Submit additional pages as needed. | d achievin IPP), inclu | ig me uding | easu: g req | rable Juirer | goals nents | s in F | Part |
| | | | | | | | |
| . Briefly summarize the Measurable Goal identified in the | SWMPP i | in th | is r | epor | ting p | erio | od. |
| | | | | | ting p | erio | od. |
| | | | | | ting p | erio | od. |
| A. Briefly summarize the Measurable Goal identified in the Summarize the Measu | | | | | ting p | erio | od. |
| | snow and | l ice | cont | trol. | | | |

(ex.: samples/participants/events)

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

● Yes ○ No

1

E. Is your MS4 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 county will utilize information from the training to more effectively manage salt application rates.

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

| | | | SPDES ID | | |
|--|---|---------------------------------|-----------|-------------|--------------|
| Name of MS4/Coalition Warren | County | | | 2 0 A | 1 1 |
| | | | <u> </u> | | 1 |
| Additional Wat | tershed Improveme | nt Strategy Best M | anagemen | t Prac | tices |
| | | • | | | |
| | | | | | |
| e information in this secti | ion is being reported (chec | ck one): | | | |
| On behalf of an individual | I MCA | | | | |
| On behalf of a coalition | 1 1/1.54 | | | | |
| | 701.4 . M . M . M . M . | .0 | | | |
| How many M | S4s contributed to this a | report? | | | |
| | | | | | |
| | | | | | |
| S4s must answer the q | uestions or check NA | as indicated in the tab | le below. | | |
| | | | | | |
| MS4 Description | Answer | Check NA | | (POC) | |
| NYC EOH Watershed | 1014547-10 010 | - | | | |
| raditional Land Use raditional Non-Land Use | 1,2,3,4,5,6,7a-d,8a,8b,9 | 10,11,12 | | osphorus | |
| Ion-Traditional | 1,2,3,4,7a-d,8a,8b,9 1,2,77a-d,8a,8b,9 | 5,10,11,12 3,4,5,10,11,12 | | osphorus | |
| Onondaga Lake Watershed | 1,2,774-0,04,00,5 | 3,4,3,10,11,12 | | osphorus | <u> </u> |
| raditional Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Phe | osphorus | |
| raditional Non-Land Use | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | | osphorus | |
| on-Traditional | 1,6,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | | osphorus | |
| Greenwood Lake Watershed | | • | | | |
| raditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | | osphorus | |
| raditional Non-Land Use on-Traditional | 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | | osphorus | |
| Oyster Bay | 1,4,0,74-0,04,9 | 2,3,5,8b,10,11,12 | Pho | osphorus | |
| raditional Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | Pat | thogens | |
| aditional Non-Land Use | 1,4,7a-d,9,10,11,12 | 2,3,5,6,8a,8b | | thogens | |
| on-Traditional | 1,4,7a-d,9 | 2,3,4,5,8a,8b,10,11,12 | | thogens | |
| Peconic Estuary | - | <u> </u> | | - | |
| aditional Land Use | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | | and Nitroge | |
| aditional Non-Land Use on-Traditional | 1,4,7a-d,8a,9,10,11,12 | 2,3,5,6,8b | | and Nitroge | |
| Oscawana Lake Watershed | 1,4,7a-d,8a,9 | 2,3,4,5,8b,10,11,12 | Pathogens | and Nitrogo | en |
| aditional Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | Pho | sphorus | |
| aditional Non-Land Use | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | | sphorus | |
| n-Traditional | 1,4,6,7a-d,8a,9 | 2,3,5,8b,10,11,12 | | sphorus | |
| LI 27 Embayments | - | - | | - | |
| aditional Land Use | 1,2,3,4,7a-d,9,10,11,12 | 5,6,8a,8b | | hogens | |
| nditional Non-Land Use n-Traditional | 1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9 | 5,6,8a,8b 5,6,8a,8b,10,11,12 | | hogens | |
| n- 11acutional | 1,2,3,4,78-U,7 | 3,0,02,00,10,11,12 | | hogens | |
| Does your MS4/Coalifi | ion have an education | nrogram addressing i | mnacts of | | |
| | | | - | | |
| риозриогиз/шигодеп/р | athogens on waterbod | iles? | O Yes | \circ No | \circ N |
| | | | | | |
| | | | | | |
| Has 100% of the MS4/ | Coalition conveyance: | system been mapped i | in GIS? | | |
| | • | | ○ Yes | O No | \bigcirc N |
| fN/A go to question 2 | | | ~ 103 | → 110 | ∪ I\ |
| 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.

| This report is being submitted for the reporting period | od ending March 9, |
|---|---|
| If submitting this form as part of a joint report on behalf of | a coalition leave SPDES ID blank. |
| | SPDES ID |
| Name of MS4/Coalition | N Y R 2 0 |
| 3. Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program? | System (infrastructure) Inspection O Yes O No O N/A |
| 4. Estimate the percentage of on-site wastewater treatment s and maintained or rehabilitated as necessary in this repor | |
| 5. Has your MS4/Coalition developed a program that provid NYSDEC SPDES General Permit for Stormwater Dischar (GP-0-08-001) to reduce pollutants in stormwater runoff f disturb five thousand square feet or more? | ges from Construction Activities |
| 6. Has your MS4/Coalition developed a program to address prunoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Acti the New York State Stormwater Design Manual Enhanced Standards? | that disturb greater than or e NYS DEC SPDES General ivities (GP-0-08-001), including |
| 7a. Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading? | educe erosion or ○ Yes ○ No ○ N/A |
| 7b. How many projects have been sited in this reporting period | d? |
| 7c. What percent of the projects included in 7b have been com | |
| 7d. What percent of projects planned in previous years have be | een completed? % |
| | O No Projects Planned |
| 8a. Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper fertilizer applicational lands? | |
| 8b.Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper disposal of grass claudicipally owned lands? | |

| This report is being submitted for the reporting period ending N If submitting this form as part of a joint report on behalf of a coalition le | - 1 | S ID blar | ık. |
|---|------------------|---------------|-------|
| Name of MS4/Coalition N | PDES ID Y R 2 | 0 | |
| 9. Has your MS4/Coalition developed and implemented a program of na | _ | ting? ○ No | O N/A |
| 10. Has your MS4/Coalition enacted a local law prohibiting pet waste on prohibiting goose feeding? | municipa | l prope | - 11 |
| 11. Does your MS4/Coalition have a pet waste bag program? | O Yes | O No | O N/A |
| 12. Does your MS4/Coalition have a program to manage goose populations? | ○ Yes | O No | O N/A |