

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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| Saratoga County ISWM Program |
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SPDES ID

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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Name of MS4

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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MCC form for period ending March 9,

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Name of MS4

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MCC form for period ending March 9,

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID
N Y R 2 0 A 1 5 7

Section 2 - Contact Information

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For each contact, select all that apply:

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

First Name MI Last Name

Title

Address

City State Zip

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Phone County

518-490-2790

MS4 Municipal Compliance Certification(MCC) Form

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Name of MS4

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MCC form for period ending March 9,

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Name of MS4

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First Name

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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First Name

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5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name MI Last Name

Title

Address

City State Zip

eMail

Phone County

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

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5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

TOWN OF MILTON

SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

W i l l i a m

MI

Last Name

L e w i s

Title

B u i l d i n g I n s p e c t o r

Address

5 0 3 G e y s e r R o a d

City

B a l l s t o n S p a

State

N Y

Zip

1 2 0 2 0 -

eMail

w l e w i s @ t o w n o f m i l t o n n y . o r g

Phone

(5 1 8) 8 8 5 - 9 2 2 0

County

S a r a t o g a

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

TOWN OF MILTON

SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

J o e l

MI

Last Name

B i a n c h i

Title

C o n s u l t i n g E n g i n e e r t o T o w n

Address

1 5 3 3 C r e s c e n t R o a d

City

C l i f t o n P a r k

State

N Y

Zip

1 2 0 6 5 -

eMail

j b i a n c h i @ m j e l s . c o m

Phone

(5 1 8) 3 7 1 - 0 7 9 9

County

S a r a t o g a

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 TOWN OF MOREAU

SPDES ID
N Y R 2 0 A 1 5 8

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name MI Last Name
T h e o d o r e T K u s n i e r z J r .

Title
T O W N S U P E R V I S O R

Address
3 5 1 R E Y N O L D S R O A D

City State Zip
M O R E A U N Y 1 2 8 2 8 -

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Phone County
(5 1 8) 7 9 2 - 1 0 3 0 S A R A T O G A

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MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4

SPDES ID
N Y R 2 0 A 1 5 8

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name MI Last Name

Title

Address

City State Zip

eMail

Phone County

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 TOWN OF MOREAU

SPDES ID
N Y R 2 0 A 1 5 8

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name MI Last Name
M a t t h e w D r e i m i l l e r

Title
B u i l d i n g / C o d e s E n f o r c e m e n t

Address
3 5 1 R e y n o l d s R o a d

City State Zip
M o r e a u N Y 1 2 8 2 8 -

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

Phone County
(5 1 8) 7 9 2 - 4 7 6 2 S A R A T O G A

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
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5. Report Preparer (Consultants may provide company name in the space provided).

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

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

For each contact, select all that apply:

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

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| First Name | MI | Last Name |
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| Phone | County |
| (5 1 8) 5 8 7 - 3 5 5 0 | S a r a t o g a |

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 City of Saratoga Springs

SPDES ID
N Y R 2 0 A 2 1 6

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name: D e b o r a h MI: Last Name: L e b r e c h e P . E .

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

Address: 4 7 4 B r o a d w a y

City: S a r a t o g a S p r i n g s State: N Y Zip: 1 2 8 6 6 -

eMail: d e b . l e b r e c h e @ s a r a t o g a - s p r i n g s . o r g

Phone: (5 1 8) 5 8 7 - 7 0 9 8 County: S a r a t o g a

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID
N Y R 2 0 A 2 1 6

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

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| First Name | MI | Last Name |
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| Title | | |
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| Address | | |
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| City | State | Zip |
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5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

For each contact, select all that apply:

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

| | | |
|---------------------------------|-----------------|------------------|
| First Name | MI | Last Name |
| H a r r y | G | G u t h e i l |
| Title | | |
| M a y o r | | |
| Address | | |
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| S o u t h G l e n s F a l l s | N Y | 1 2 8 0 3 - |
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| m a y o r @ s g f n y . c o m | | |
| Phone | County | |
| (5 1 8) 7 9 2 - 4 0 3 3 | S a r a t o g a | |

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name MI Last Name

Title

Address

City State Zip

eMail

Phone County

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
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Name of MS4

| |
|-----------------------|
| Village of Stillwater |
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SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 4 | 7 |
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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

| | | | | | | | | | | | | | | | | | | | |
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eMail

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Phone

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 County

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5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Village of Waterford

SPDES ID
N Y R 2 0 A 4 6 9

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name MI Last Name
B E R T M A H O N E Y

Title
M A Y O R

Address
6 5 B r o a d S t r e e t

City State Zip
W a t e r f o r d N Y 1 2 1 8 8 -

eMail
r v i l l a g e @ n y c a p . r r . c o m

Phone County
(5 1 8) 2 3 5 - 9 8 9 8 S A R A T O G A

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Village of Waterford

SPDES ID
N Y R 2 0 A 4 6 9

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name: R u s s e l l MI: Last Name: V a n D e r V o o r t

Title: D e p u t y M a y o r

Address: 6 5 B r o a d S t r e e t

City: W a t e r f o r d State: N Y Zip: 1 2 1 8 8 -

eMail: r v i l l a g e @ n y c a p . r r . c o m

Phone: (5 1 8) 2 3 5 - 9 8 9 8 County: S A R A T O G A

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2019

Name of MS4

SPDES ID

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name MI Last Name

Title

Address

City State Zip

eMail

Phone County

5690581587

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2019

Name of MS4 VILLAGE OF WATERFORD

SPDES ID
N Y R 2 0 A 4 6 9

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name MI Last Name
B L U E R N E I L S

Title
I S W M P R O G R A M C O O R D I N A T O R

Address
S O W E S T H I G H S T R E E T

City State Zip
B A L L S T O N S P A N Y 1 2 0 2 0 -

eMail
b r n 5 @ c o r n e l l . e d u

Phone County
(5 1 8) 8 8 5 - 8 9 9 5 S A R A T O G A

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 TOWN OF CLIFTON PARK

SPDES ID
N Y R 2 0 A 0 3 5

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S a r a t o g a C o u n t y C C E I S W M P r o g r a m

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

N Y R 2 0 A 0 0 6

Address

5 0 W e s t H i g h S t r e e t

City

B a l l s t o n S p a

State

N Y

Zip

1 2 0 2 0 -

eMail

b r n 5 @ c o r n e l l . e d u

Phone

(5 1 8) 8 8 5 - 8 9 9 5

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

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

- MM1 C o u n t y - w i d e E d / O u t r e a c h
- MM2 M a t e r i a l / T e c h n i c a l S u p p o r t
- MM3 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM4 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM5 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM6 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t

Additional tasks/responsibilities

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

4643023765

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID
N Y R 2 0 A 1 0 8

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S a r a t o g a C o u n t y C C E I S W M P r o g r a m

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

N Y R 2 0 C 0 0 6

Address

5 0 W e s t H i g h S t r e e t

City

B a l l s t o n S p a

State

N Y

Zip

1 2 0 2 0 -

eMail

b r n 5 @ c o r n e l l . e d u

Phone

(5 1 8) 8 8 5 - 8 9 9 5

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

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

- MM1 C o u n t y - w i d e E d / o u t r e a c h
- MM2 M a t e r i a l s / T e c h n i c a l S u p p o r t
- MM3 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM4 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM5 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM6 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t

Additional tasks/responsibilities

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

4643023765

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 TOWN OF MOREAU

SPDES ID
N Y R 2 0 A 1 5 8

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S a r a t o g a C o u n t y C C E I S W M P r o g r a m

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

N Y R 2 0 C 0 0 6

Address

City

State Zip

B a l l s t o n S p a N Y 1 2 0 2 0 -

eMail

b r n 5 @ c o r n e l l . e d u

Phone

(5 1 8) 8 8 5 - 8 9 9 5

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

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

- MM1 C o u n t y - w i d e E d / O u t r e a c h
- MM2 M a t e r i a l / T e c h n i c a l S u p p o r t
- MM3 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM4 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM5 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM6 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID
N Y R 2 0 A 0 9 9

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S a r a t o g a C o u n t y I n t e r m u n i c i p a l

Partner/Coalition Name (con't.)

S W M P r o g r a m

SPDES Partner ID - If applicable

N Y R 2 0 C 0 0 6

Address

5 0 W e s t H i g h S t r e e t

City

B a l l s t o n S p a

State

N Y

Zip

1 2 0 2 0 -

eMail

b r n 5 @ c o r n e l l . e d u

Phone

(5 1 8) 8 8 5 - 8 9 9 5

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

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

- MM1 C o u n t y - w i d e E d / O u t r e a c h
- MM2 M a t e r i a l & T e c h S u p p o r t
- MM3 M a t e r i a l / t e c h / t r a i n i n g s u p p o r t
- MM4 M a t e r i a l / t e c h / t r a i n i n g s u p p o r t
- MM5 M a t e r i a l / t e c h / t r a i n i n g s u p p o r t
- MM6 M a t e r i a l / t e c h / t r a i n i n g s u p p o r t

Additional tasks/responsibilities

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

4643023765

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID
N Y R 2 0 A 0 9 1

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S a r a t o g a C o u n t y C C E I S W M P r o g r a m

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

N Y R 2 0 C 0 0 6

Address

City

B a l l s t o n S p a

State

N Y

Zip

1 2 0 2 0 -

eMail

b r n 5 @ c o r n e l l . e d u

Phone

(5 1 8) 8 8 5 - 8 9 9 5

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

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

- MM1 C o u n t y - W i d e E d / O u t r e a c h
- MM2 M a t e r i a l / T e c h n i c a l S u p p o r t
- MM3 M a t r e i a l / T e c h / T r a i n i n g S u p p o r t
- MM4 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM5 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t
- MM6 M a t e r i a l / T e c h / T r a i n i n g s u p p o r t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID
N Y R 2 0 A 5 4 9

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S a r a t o g a C o u n t y I S W M P r o g r a m

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

N Y R 2 0 C 0 0 6

Address

5 0 W e s t H i g h S t r e e t

City

B a l l s t o n S p a

State

N Y

Zip

1 2 0 2 0 -

eMail

b r n 5 @ c o r n e l l . e d u

Phone

(5 1 8) 8 8 5 - 8 9 9 5

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

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

- MM1 E d u c a t i o n a n d O u t r e a c h
- MM2 M a t e r i a l s / T e c h n i c a l S u p p o r t
- MM3 M a t e r i a l / T r a i n i n g / T e c h S u p p o r t
- MM4 M a t e r i a l / T r a i n i n g / T e c h S u p p o r t
- MM5 M a t e r i a l / T r a i n i n g / T e c h S u p p o r t
- MM6 M a t e r i a l / T r a i n i n g / T e c h S u p p o r t

Additional tasks/responsibilities

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

4643023765

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Village of Waterford

SPDES ID
N Y R 2 0 A 4 6 9

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S a r a t o g a C o u n t y C C E I S W M P r o g r a m

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

N Y R 2 0 C 0 0 6

Address

City

B a l l s t o n S p a

State

N Y

Zip

1 2 0 2 0 -

eMail

b r n 5 @ c o r n e l l . e d u

Phone

(5 1 8) 8 8 5 - 8 9 9 5

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

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

● MM1 C o u n t y - w i d e E d / O u t r e a c h

● MM2 M a t e r i a l / T e c h n i c a l S u p p o r t

● MM3 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t

● MM4 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t

● MM5 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t

● MM6 M a t e r i a l / T e c h / T r a i n i n g S u p p o r t

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Village of Ballston Spa

SPDES ID

N Y R 2 0 A 3 7 6

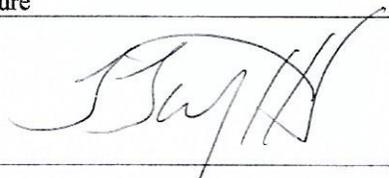
Section 4 - Certification Statement

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

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

First Name L a w r e n c e MI L Last Name W o o l b r i g h t

Title (Clearly print title of individual signing report)
M a y o r

Signature 

Date 12 / 30 / 2020

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID

Section 4 - Certification Statement

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

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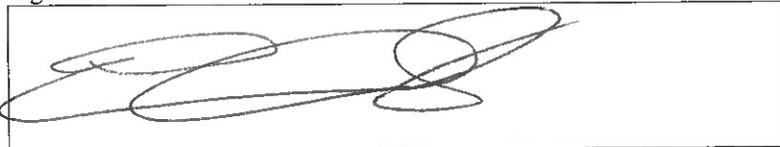
First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature



Date

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

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID

Section 4 - Certification Statement

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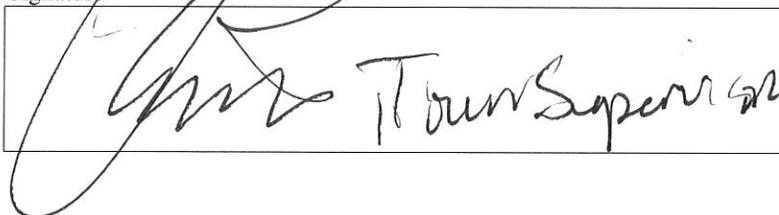
First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature



Date

/ /

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

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID
N Y R 2 0 A 5 5 1

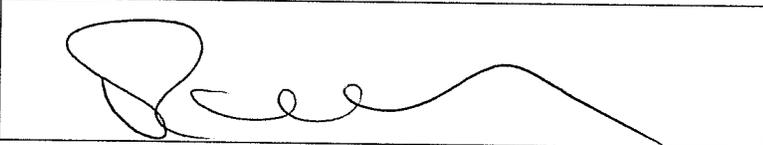
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First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature


Date

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

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 TOWN OF MOREAU

SPDES ID

N Y R 2 0 A 1 5 8

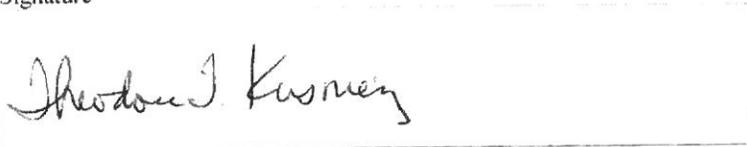
Section 4 - Certification Statement

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

First Name Theodore MI T Last Name Kusnierz, Jr.

Title (Clearly print title of individual signing report)
TOWN SUPERVISOR

Signature


Date 05/13/2020

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Village of Round Lake

SPDES ID
N Y R 2 0 A 0 9 9

Section 4 - Certification Statement

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First Name MI Last Name
G a r y P u t m a n

Title (Clearly print title of individual signing report)
M a y o r o f R o u n d L a k e

Signature


Date
0 1 / 0 6 / 2 0 2 1

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

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

Name of MS4

SPDES ID

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Section 4 - Certification Statement

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First Name

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Last Name

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Title (Clearly print title of individual signing report)

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Signature

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Date

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID
N Y R 2 0 A

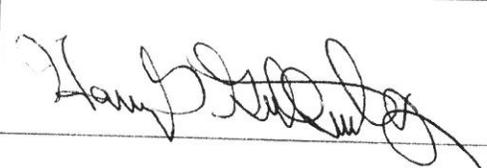
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First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature


Date
 / /

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

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4

SPDES ID

Section 4 - Certification Statement

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First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature



Date

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

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4 Village of Stillwater

SPDES ID

N Y R 2 0 A 5 4 7

Section 4 - Certification Statement

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First Name J u d y MI Last Name W o o d - S h a w

Title (Clearly print title of individual signing report) V i l l a g e M a y o r

Signature *Judy Wood-Shaw*

Date 04/29/2020

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID
N Y R 2 0 A 0 3 7

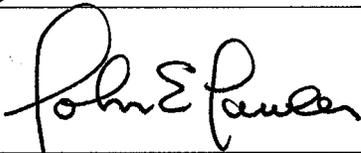
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First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature


Date

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

3165331518

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 Village of Waterford

SPDES ID

N Y R 2 0 A 4 6 9

Section 4 - Certification Statement

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First Name

J . B e r t

MI

Last Name

M a h o n e y

Title (Clearly print title of individual signing report)

M a y o r

Signature



Date

0 8 / 2 0 / 2 0 2 0

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

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

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4

SPDES ID

Section 4 - Certification Statement

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First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature



Date

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

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

4286299954

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

SPDES ID

Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

1. Targeted Public Education and Outreach Best Management Practices

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

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

Other

2. Specific audiences targeted during this reporting period:

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

Other

MS4 Annual Report Form

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

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

Name of MS4/Coalition

| |
|------------------------------|
| Saratoga County ISWM Program |
|------------------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | C | 0 | 0 | 6 |
|---|---|---|---|---|---|---|---|---|

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

- | | | | | | | | |
|--|---------------------|--|---|---|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">2</td><td style="width: 20px; height: 20px; text-align: center;">1</td><td style="width: 20px; height: 20px; text-align: center;">7</td></tr></table> | | | 2 | 1 | 7 |
| | | 2 | 1 | 7 | | | |
| <input type="radio"/> Direct Mailings | # Mailings | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">2</td><td style="width: 20px; height: 20px; text-align: center;">1</td><td style="width: 20px; height: 20px;"></td></tr></table> | | | 2 | 1 | |
| | | 2 | 1 | | | | |
| <input checked="" type="radio"/> List-Serves | # In List | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">6</td><td style="width: 20px; height: 20px; text-align: center;">2</td><td style="width: 20px; height: 20px; text-align: center;">6</td></tr></table> | | | 6 | 2 | 6 |
| | | 6 | 2 | 6 | | | |
| <input type="radio"/> Mailing List | # In List | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | |
| | | | | | | | |
| <input type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | |
| | | | | | | | |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">3</td><td style="width: 20px; height: 20px; text-align: center;">5</td><td style="width: 20px; height: 20px; text-align: center;">6</td></tr></table> | | | 3 | 5 | 6 |
| | | 3 | 5 | 6 | | | |
| <input type="radio"/> School Program | # Attendees | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | |
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| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Printed Materials: | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px; text-align: center;">U</td><td style="width: 20px; height: 20px; text-align: center;">N</td><td style="width: 20px; height: 20px; text-align: center;">K</td><td style="width: 20px; height: 20px; text-align: center;">N</td><td style="width: 20px; height: 20px;"></td></tr></table> | U | N | K | N | |
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Locations (e.g. libraries, town offices, kiosks)

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

URL

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

| |
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| Town of Ballston |
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SPDES ID

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

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| <input checked="" type="checkbox"/> Construction Site Operators Trained | Total for Saratoga County CCE ISWM Program | # Trained | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>1</td><td>5</td><td>0</td></tr></table> | | | 1 | 5 | 0 |
| | | 1 | 5 | 0 | | | | |
| <input type="checkbox"/> Direct Mailings | | # Mailings | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
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| <input checked="" type="checkbox"/> Kiosks or Other Displays | | # Locations | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table> | | | | | 1 |
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| <input checked="" type="checkbox"/> List-Serves | | # In List | <table border="1" style="display: inline-table;"><tr><td></td><td>2</td><td>1</td><td>0</td><td>0</td></tr></table> | | 2 | 1 | 0 | 0 |
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| <input type="checkbox"/> Newspaper Ads or Articles | | # Days Run | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
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| <input type="checkbox"/> Public Events/Presentations | | # Attendees | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
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| <input type="checkbox"/> School Program | | # Attendees | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
| | | | | | | | | |
| <input type="checkbox"/> TV Spot/Program | | # Days Run | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
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Locations (e.g. libraries, town offices, kiosks)

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Charlton |
|------------------|

SPDES ID

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

- | | | | | | | | |
|--|---------------------|--|---|---|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td>1</td></tr></table> | | | | | 1 |
| | | | | 1 | | | |
| <input checked="" type="radio"/> Direct Mailings | # Mailings | <table border="1" style="display: inline-table;"><tr><td> </td><td>1</td><td>3</td><td>0</td><td>0</td></tr></table> | | 1 | 3 | 0 | 0 |
| | 1 | 3 | 0 | 0 | | | |
| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td>2</td></tr></table> | | | | | 2 |
| | | | | 2 | | | |
| <input type="radio"/> List-Serves | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
| | | | | | | | |
| <input type="radio"/> Mailing List | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
| | | | | | | | |
| <input type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
| | | | | | | | |
| <input type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> School Program | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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Locations (e.g. libraries, town offices, kiosks)

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TOWN OF CLIFTON PARK |
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SPDES ID

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

- Construction Site Operators Trained # Trained

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- Direct Mailings # Mailings

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- Kiosks or Other Displays # Locations

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- List-Serves # In List

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- Mailing List # In List

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- Newspaper Ads or Articles # Days Run

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- Public Events/Presentations # Attendees

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- School Program # Attendees

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- TV Spot/Program # Days Run

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- Printed Materials: Total # Distributed

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

- Construction Site Operators Trained # Trained

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- Direct Mailings # Mailings

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- Kiosks or Other Displays # Locations

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- List-Serves # In List

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- Newspaper Ads or Articles # Days Run

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- Public Events/Presentations # Attendees

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- School Program # Attendees

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- TV Spot/Program # Days Run

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- Printed Materials: Total # Distributed

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

| |
|-----------------------|
| City of Mechanicville |
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SPDES ID

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

- | | | | | | | | |
|--|---------------------|--|---|---|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>2</td><td>1</td><td>7</td></tr></table> | | | 2 | 1 | 7 |
| | | 2 | 1 | 7 | | | |
| <input type="radio"/> Direct Mailings | # Mailings | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
| | | | | | | | |
| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>2</td><td>3</td><td> </td></tr></table> | | | 2 | 3 | |
| | | 2 | 3 | | | | |
| <input checked="" type="radio"/> List-Serves | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>6</td><td>2</td><td>6</td></tr></table> | | | 6 | 2 | 6 |
| | | 6 | 2 | 6 | | | |
| <input type="radio"/> Mailing List | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>3</td><td>5</td><td>6</td></tr></table> | | | 3 | 5 | 6 |
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| <input type="radio"/> School Program | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Printed Materials: | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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Locations (e.g. libraries, town offices, kiosks)

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Round Lake |
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SPDES ID

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

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| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
| | | | | | | | |
| <input type="radio"/> Direct Mailings | # Mailings | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td>3</td></tr></table> | | | | | 3 |
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| <input checked="" type="radio"/> List-Serves | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>6</td><td>0</td><td>0</td></tr></table> | | | 6 | 0 | 0 |
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| <input checked="" type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td>4</td></tr></table> | | | | | 4 |
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| <input checked="" type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>7</td><td>5</td><td> </td></tr></table> | | | 7 | 5 | |
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| <input type="radio"/> School Program | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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Locations (e.g. libraries, town offices, kiosks)

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Saratoga County, Department of Public Works |
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SPDES ID

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

- | | | | | | | |
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| <input type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> Direct Mailings | # Mailings | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px; text-align: center;">1</td></tr></table> | | | | 1 |
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| <input type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input checked="" type="radio"/> Printed Materials: | Total # Distributed | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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Locations (e.g. libraries, town offices, kiosks)

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

- Construction Site Operators Trained # Trained

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- Direct Mailings # Mailings

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- Kiosks or Other Displays # Locations

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- Mailing List # In List

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- Newspaper Ads or Articles # Days Run

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- Public Events/Presentations # Attendees

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- School Program # Attendees

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- TV Spot/Program # Days Run

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- Printed Materials: Total # Distributed

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

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7870299956

MS4 Annual Report Form

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

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

Name of MS4/Coalition South Glens Falls

SPDES ID

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

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| <input type="radio"/> Construction Site Operators Trained | # Trained | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input checked="" type="radio"/> Direct Mailings | # Mailings | <input type="text" value="3"/> | <input type="text" value="3"/> | <input type="text" value="3"/> | <input type="text" value="3"/> |
| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="2"/> |
| <input type="radio"/> List-Serves | # In List | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Mailing List | # In List | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Newspaper Ads or Articles | # Days Run | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> Public Events/Presentations | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> School Program | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="radio"/> TV Spot/Program | # Days Run | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
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Locations (e.g. libraries, town offices, kiosks)

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Stillwater |
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SPDES ID

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

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| <input type="radio"/> Construction Site Operators Trained | | # Trained | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
| | | | | | | | |
| <input type="radio"/> Direct Mailings | | # Mailings | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
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| <input checked="" type="radio"/> Kiosks or Other Displays | | # Locations | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
| | | | | | | | |
| <input type="radio"/> List-Serves | | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
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| <input type="radio"/> Mailing List | | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
| | | | | | | | |
| <input type="radio"/> Newspaper Ads or Articles | | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
| | | | | | | | |
| <input type="radio"/> Public Events/Presentations | | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
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| <input type="radio"/> School Program | | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
| | | | | | | | |
| <input type="radio"/> TV Spot/Program | | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
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| <input checked="" type="radio"/> Printed Materials: | | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | |
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Locations (e.g. libraries, town offices, kiosks)

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MS4 Annual Report Form

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

Name of MS4/Coalition

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| Village of Stillwater |
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SPDES ID

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

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| <input type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> Direct Mailings | # Mailings | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
| | | | | | | | |
| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> List-Serves | # In List | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> Mailing List | # In List | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
| | | | | | | | |
| <input type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> School Program | # Attendees | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Printed Materials: | Total # Distributed | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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Locations (e.g. libraries, town offices, kiosks)

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Waterford |
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SPDES ID

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

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| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>2</td><td>1</td><td>7</td></tr></table> | | | 2 | 1 | 7 |
| | | 2 | 1 | 7 | | | |
| <input type="radio"/> Direct Mailings | # Mailings | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>2</td><td>3</td><td> </td></tr></table> | | | 2 | 3 | |
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| <input checked="" type="radio"/> List-Serves | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>6</td><td>2</td><td>6</td></tr></table> | | | 6 | 2 | 6 |
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| <input type="radio"/> Mailing List | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>3</td><td>5</td><td>6</td></tr></table> | | | 3 | 5 | 6 |
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| <input type="radio"/> School Program | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Printed Materials: | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td>5</td></tr></table> | | | | | 5 |
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Locations (e.g. libraries, town offices, kiosks)

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

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

- Construction Site Operators Trained # Trained
- Direct Mailings # Mailings
- Kiosks or Other Displays # Locations
- List-Serves # In List
- Mailing List # In List
- Newspaper Ads or Articles # Days Run
- Public Events/Presentations # Attendees
- School Program # Attendees
- TV Spot/Program # Days Run
- Printed Materials: Total # Distributed

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

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MS4 Annual Report Form

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

Name of MS4/Coalition:

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

Construction Site Operators Trained

Trained

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Direct Mailings

Mailings

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Kiosks or Other Displays

Locations

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List-Serves

In List

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Mailing List

In List

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Newspaper Ads or Articles

Days Run

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Public Events/Presentations

Attendees

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School Program

Attendees

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TV Spot/Program

Days Run

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Printed Materials:

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

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MS4 Annual Report Form

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Name of MS4/Coalition

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| Saratoga County ISWM Program |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

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MS4 Annual Report Form

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Name of MS4/Coalition SPDES ID

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

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MS4 Annual Report Form

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Name of MS4/Coalition

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

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MS4 Annual Report Form

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Name of MS4/Coalition

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

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MS4 Annual Report Form

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

Name of MS4/Coalition

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| Town of Greenfield |
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SPDES ID

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

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MS4 Annual Report Form

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Name of MS4/Coalition

SPDES ID

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Mechanicville |
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3. Web Page con't.: Provide specific web addresses - not home page.

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MS4 Annual Report Form

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

Name of MS4/Coalition

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SPDES ID

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

URL

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| http://www.saratogastormwater.org/NEMO/Factsheets/FS1_WhyWaterQuality.pdf |
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URL

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| http://www.saratogastormwater.org/NEMO/Factsheets/FS2_HouseholdChemicals.pdf |
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| http://www.saratogastormwater.org/NEMO/Factsheets/FS3_SepticSystems.pdf |
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| http://www.saratogastormwater.org/NEMO/Factsheets/FS4_PestManagement.pdf |
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| http://www.saratogastormwater.org/NEMO/Factsheets/FS5_LandscapingWaterQuallity.pdf |
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| http://www.saratogastormwater.org/NEMO/Factsheets/FS6_PetWaste.pdf |
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| http://www.saratogastormwater.org/NEMO/Factsheets/FS7_NativePlants.pdf |
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Name of MS4/Coalition

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

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Name of MS4/Coalition

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

URL

http://www.saratogastormwater.org/saratoga-municipalities.htm

URL

http://www.saratogastormwater.org/residents-illicit-discharge.htm

URL

http://www.saratogastormwater.org/residents-construction-runoff.htm

URL

http://www.saratogastormwater.org/residents-post-construction.htm

URL

http://www.saratogastormwater.org/contractors-developers-construction-runoff.htm

URL

http://www.saratogastormwater.org/contractors-developers-post-construction.htm

URL

http://www.saratogastormwater.org/municipalities-public-education.htm

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Name of MS4/Coalition

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| Town of Stillwater |
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SPDES ID

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

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MS4 Annual Report Form

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Name of MS4/Coalition

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MS4 Annual Report Form

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MS4 Annual Report Form

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MS4 Annual Report Form

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Name of MS4/Coalition

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

| |
|--|
| Maintain/continue all selected BMPs detailed in the ISWM Program Plan. |
|--|

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

| |
|---|
| All kiosks/information displays continue to be maintained at all local MS4 locations; the Eastern NY SW RTC continues to offer professional-level accredited stormwater management education/training (106 attendees, 679hrs of training); the ISWM Program is maintained as the online source for information - updated as needed; ISWM Program continues to conduct direct education/outreach to groups/individuals and Staff throughout Saratoga County (575 attendees, 1,191hrs of education/training). |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

| |
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| Continue implementation of the Saratoga County I-SWM Program Education/Outreach Program -Maintain website; ongoing throughout the year -Maintain "Town Hall" displays/kiosks; ongoing throughout the year -Continue direct education/outreach programming; ongoing throughout the year -Continue SW Regional Training Center w/ John Dunkle; ongoing throughout the year -Add "Story Maps" to website via ESRI ArcGIS Online Story Map tool |
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MS4 Annual Report Form

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Continue participation in the Saratoga County CCE ISWM Program's Stormwater Management Public Education and Outreach.

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

All selected BMPs detailed in the ISWM Program Plan continue to be implemented.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Saratoga County I-SWM Program Education/Outreach Program
- Maintain website; ongoing throughout the year. Update website with link to ISWM Program info.
- Maintain "Town Hall" and public library display/kiosks; ongoing throughout the year
- Continue direct education/outreach programming; ongoing throughout the year

MS4 Annual Report Form

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Staff will continue to attend ISWM meetings and Watershed Management Plan meetings. The Town of Ballston published and distributed town newsletters which contained stormwater educational content. The informational kiosk within the Town Hall will be refreshed with informational materials.

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

Monthly ISWM meetings were attended by Town staff in addition to the Watershed Management Plan meetings. The Town of Ballston has begun issuing town newsletters, which include educational content regarding stormwater issues. The informational kiosk is monitored and replenished as necessary.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Have staff Stormwater Management Officer attend monthly ISWM meetings. Educational content regarding stormwater issues will continue to be incorporated into the town newsletter. The informational kiosk in Town Hall will be refreshed with informational materials as needed.

MS4 Annual Report Form

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

Name of MS4/Coalition

SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Actively participate in the Saratoga County Intermunicipal program. Continue providing articles in Town Newsletter. Continue to educate Board members. Continue signage on catch basins and pet wastes, continue attendance at Saratoga County Planning & Zoning Conference and New York Planning Federation.

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

Attendance at road cleanups increases yearly. Planning Board has a greater understanding of Stormwater management techniques and has increased focus in this area. Planning Board has designated 1 member to concentrate on storm and SWPPP related issues

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

some interruption anticipated due to Covid-19 restrictions. Generally, continue participation in County program. Continue town newsletter, rerun MS4 informational article, continue annual MS4 agenda meeting with relevant town officials to review SWMP commitments

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TOWN OF CLIFTON PARK |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Continue participation in the Saratoga County CCE ISWM Program's Stormwater Management Public Education and Outreach.

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

All selected BMPs detailed in the ISWM Program Plan continue to be implemented.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Saratoga County I-SWM Program Education/Outreach Program

- Maintain website; ongoing throughout the year
- Maintain "Town Hall" display/kiosks; ongoing throughout the year
- Continue direct education/outreach programming; ongoing throughout the year
- Continue SW Regional Training Center w/John Dunkle; ongoing throughout the year

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Greenfield |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

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| Actively participate in the Saratoga County Intermunicipal program. Continue providing information brochures at town hall. Continue to educate Board members. |
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B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

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| Attendance at road and stream cleanups is abundant. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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| Road and stream cleanup events will continue in the spring (pending social distancing). In 2019 the town held seven road side cleanups. Home household waste collection was held twice in 2019, 200.9 tons of household waste material, 40 pallets of E-waste and 62.2 tons of metal where collected and disposed of by the town. In 2020 the Town will continue participation in Town-wide Cleanup program. |
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6932504403

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Halfmoon |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Provide information accessible to the general public at the Town Hall, on the website, and distribute printed materials as handouts.
Continue participation in the Saratoga County CCE ISWM Program's Stormwater Management Public Education and Outreach.

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

A Stormwater Kiosk is permanently set up at the Town Hall. Pamphlets are available for the general public. A Stormwater facts sheet is distributed with various applications.
All selected BMPs detailed in the ISWM Program Plan continue to be implemented.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Saratoga County I-SWM Program Education/Outreach Program
- Information will be continually available to the general public via handouts, kiosks, and links on the Town's Planning Department webpage: www.townofhalfmoon-ny.gov/planning-department
- Continue direct education/outreach programming; ongoing throughout the year
- Continue SW Regional Training Center w/John Dunkle; ongoing throughout the year

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Malta |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Maintain all ongoing efforts in conjunction with the County I-SWM Program. Evaluate the program every five years using the following metrics: 1) SMO tracks the number of printed materials distributed. 2) SMO tracks the website page visits annually. 3) Applicants for dog licenses reviewed stormwater educational literature. 4) Town newsletter will include one stormwater educational article per year. 5) All new employees will receive minimum training on town as MS4.

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

County education program continued and maintained. Town Hall kiosk maintained with 29 brochures taken this year. 375 pet waste flyers distributed with dog licenses. Will continue to ensure that Town Clerk is distributing literature with pet licenses and renewals. Website has received 22 page views. Article included in mailing distributed to all residents. Information for new employees has been distributed to all department heads.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Track page visits and downloads from the stormwater website. New personnel to receive basic training on Malta MS4 status and requirements. Maintain Town Hall displays/kiosks and track number of printed materials distributed. Continue to work with Clerk's Office to ensure pet owner education. Stormwater article included in annual town newsletter mailing to all residents.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

The City participated in the Saratoga County CCE ISWM Program's Stormwater Management Public Education and Outreach program.

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

All selected BMPs detailed in the ISWM Program Plan continue to be implemented.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The City will continue to implement the Saratoga County ISWM Program for Education and Outreach.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

The City sends flyers to residents in the summer, identifying stormwater management/pollution prevention activities and/or education.

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

The City sent flyers to all residents informing them of what to do with yard debris, including how to bag it, what is permitted, where to store brush, what the City's pick-up schedule is, and specifically to exclude pet waste, bricks, dirt, etc.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The City will continue to send annual flyers out with the summer mailer

6932504403

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TOWN OF MILTON |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Continued participation in Saratoga Co. CCE ISWM Programs including Public Education and Outreach.

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

Selected BMPs detailed in ISWM Program Plan continue to be implemented

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Ongoing implementation of Saratoga Co. 1-SWM Program Education and Outreach Program to include:
-updating / maintaining website
-maintain town hall informational handouts
-participate in annual county and regional training held for educational purposes.

6932504403

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TOWN OF MOREAU |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Continue implementation of the Saratoga County I-WM Program Education/Outreach Program
-Maintain website
-Maintain "Town Hall" display/kiosk
-Continue direct education/outreach programming
-Continue SW Regional Training Center w/ John Dunkle

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

MCM1 implementation primarily relied upon the Saratoga County ISWM Program's website for outreach and educational materials. The Town website provided a link to their annual report. The past years goal of direct ed/outreach and training metrics will be dropped as not yet effective. It is anticipated that as the program improves these goals will be revisited.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Maintain all on-going program elements.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Round Lake |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

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| Maintain constant stock of literature available at Village Hall and the Round Lake Library generally available to the interested public. Continue participation in the Saratoga County/CCE Intermunicipal Stormwater Management (ISWM) Program Public Education and Outreach Program. |
|--|

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

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| Stock of materials was checked and determined adequate. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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| The Round Lake Village newsletter (e-letter; distributed via email and available for viewing at our website) will include a 4-part series of homeowner/resident tips/techniques covering 1) Pet Waste; 2) Lawn/Organic Debris disposal and Property Maintenance; 3) Illicit Discharges; 4) Rain Barrels, Cisterning, & Rain Gardens. One article will appear in each of the Village's Quarterly newsletters. |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Saratoga County, Department of Public Works |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

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| Maintain public access to stormwater management information. Continue cooperation and participation with the Saratoga County ISWM Program Continue ongoing employee training and education efforts |
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B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

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| All resources described in the SC DPW SWMP &/or ISWM Plans have been implemented and are ongoing. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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| Maintain all measures described in the SC DPW &/or ISWM Plans. Continue all ongoing programs. |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Saratoga Springs |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Provide the general public with access to information and educational materials related to stormwater management and pollution prevention.

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

- (365) days SW Management Program web page posted on City of Saratoga Springs web site.
- (10,700) utility bills mailed quarterly with information about stormwater pollution prevention.
- Brochures and other printed material made available in City Hall.
- Pet waste and waterfowl feeding signs posted at Congress Park, Farmers Market, and other locales.
- (30) "Don't Pollute" storm drain decals installed or replaced this report year.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

- Maintain and update stormwater web page on the City's web site.
- Continue to include stormwater pollution prevention information on quarterly utility bills.
- Maintain public accessibility to information and educational materials.
- Install/maintain posted signs promoting pet waste disposal and not feeding waterfowl.
- Install/replace "Don't Pollute" storm drain decals.

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

South Glens Falls

SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Continue participation in the Saratoga County CCE ISWM Program's Stormwater Management Public Education and Outreach.

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

All selected BMP's detailed in the ISWM Program Plan continue to be implemented.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Saratoga County ISWM Program Education/Outreach Program
-Maintain website: ongoing throughout the year
-Maintain "Town Hall" display/kiosks; ongoing throughout the year
-Continue direct education/outreach programming; ongoing throughout the year
-Continue SW Regional Training Center w/John Dunkle; ongoing throughout the year

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Stillwater |
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

During this reporting period the Town continued to develop forms to be used by Town officials for record keeping through its continued participation in the Saratoga County CCE ISWM Program's Stormwater Management Public Education and Outreach where Standard Operating Procedures for all members of the Coalition are being drafted. The Town maintained a kiosk with printed materials available to the public as well as distributed information to all developers through the application

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

A link to the Saratoga County ISWM reference page was available on the Town's website. A kiosk was maintained in the the Town Planning Department of printed materials available to the public. Printed materials were also distributed to developers with application materials. Pre-construction meetings were held prior to all construction commencement.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Saratoga County I-SWM Program Education/Outreach Program with activities to include:

- Maintain website; ongoing throughout the year
- Continue direct education/outreach programming; ongoing throughout the year
- Continue creation of Standard Operation Procedures for Coalition members to create a consistent approach

MS4 Annual Report Form

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

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

During this reporting period the Village continued to develop forms to be used by Town officials for record keeping through its continued participation in the Saratoga County CCE ISWM Program's Stormwater Management Public Education and Outreach where Standard Operating Procedures for all members of the Coalition are being drafted.

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

Area sites were maintained to a satisfactory level with no violations occurring. All selected BMPs detailed in the ISWM Program Plan continue to be implemented.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Saratoga County I-SWM Program Education/Outreach Program with activities to include:

- Maintain website; ongoing throughout the year
- Continue direct education/outreach programming; ongoing throughout the year
- Continue SW Regional Training Center w/John Dunkle; ongoing throughout the year
- Create a "Village Hall" display/trial with written materials; ongoing throughout the year

MS4 Annual Report Form

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

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

The Town maintained educational kiosks at the Town Hall and Harbor Center which includes, among other pamphlets and brochures, information about stormwater. The Town also participated in MCM 1 activities via the Saratoga County Intermunicipal Stormwater Management Program via legally binding agreement.

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

Four different stormwater pamphlets/brochures are made available to the public: "Where does all the Dirty Water Go?"; "10 Things You Can do to Prevent Stormwater Runoff Pollution"; "Stormwater Regulations and the Construction Industry"; and "After the Storm". The Town recently contacted NYDSEC requesting additional materials for distribution. The Town stocked an additional 30 pamphlets between both locations.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The Town will continue to maintain the educational kiosks and participate in the Saratoga County program.

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MS4 Annual Report Form

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

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Continue participation in the Saratoga County CCE ISWM Program's Stormwater Management Public Education and Outreach.

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

All selected BMPs detailed in the ISWM Program Plan continue to be implemented.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Saratoga County I-SWM Program Education/Outreach Program
- Maintain website; ongoing throughout the year
- Maintain "Town Hall" display/kiosks; ongoing throughout the year
- Continue direct education/outreach programming; ongoing throughout the year
- Continue SW Regional Training Center w/John Dunkle; ongoing throughout the year

MS4 Annual Report Form

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

Continue participation in the Saratoga County CCE ISWM Program's Stormwater Management Public Education and Outreach.

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

All selected BMPs detailed in the ISWM Program Plan continue to be implemented.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Saratoga County I-SWM Program Education/Outreach Program
- Maintain website; ongoing throughout the year
- Maintain "Town Hall" display/kiosks; ongoing throughout the year, when needed
- Continue direct education/outreach programming; ongoing throughout the year
- Continue SW Regional Training Center; ongoing throughout the year

MS4 Annual Report Form

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MS4 Annual Report Form

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MS4 Annual Report Form

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

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Name of MS4/Coalition

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MS4 Annual Report Form

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MS4 Annual Report Form

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

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MS4 Annual Report Form

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MS4 Annual Report Form

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

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MS4 Annual Report Form

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MS4 Annual Report Form

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3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office Annual Report SWMP Plan Comments

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition: TOWN OF MOREAU

SPDES ID
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3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

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MS4/Coalition Office Annual Report SWMP Plan Comments

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MS4 Annual Report Form

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Name of MS4/Coalition: City of Saratoga Springs

SPDES ID: NYR20A216

3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

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MS4/Coalition Office Annual Report SWMP Plan Comments

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City Engineers Office

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474 Broadway

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Other Annual Report SWMP Plan Comments

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50 West High Street

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http://www.saratoga-springs.org

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al.flick@saratoga-springs.org

brn5@cornell.edu

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Name of MS4/Coalition: South Glens Falls

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Name of MS4/Coalition SPDES ID

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

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

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Ballston Spa | | | |
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 SPDES ID

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Ballston |
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SPDES ID

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

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Charlton |
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SPDES ID

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TOWN OF CLIFTON PARK |
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SPDES ID

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Greenfield | | | | | | | | | |
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Halfmoon |
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SPDES ID

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

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Malta |
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SPDES ID

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Mechanicville | | | | | | | | | |
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4.b. For how many days was/will this report be posted?

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TOWN OF MILTON |
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SPDES ID

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TOWN OF MOREAU |
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SPDES ID

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Round Lake | | | | | | | | | |
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

0614183104

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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|--------------------------|
| City of Saratoga Springs |
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SPDES ID

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

0614183104

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Stillwater |
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SPDES ID

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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Name of MS4/Coalition

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| Village of Stillwater |
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SPDES ID

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Waterford |
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

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

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Town of Wilton

SPDES ID

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

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

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Saratoga County ISWM Program |
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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

On-time publication of the Combined Annual Report (Y16) and 90% (or better) participation in clean up events by all groups.

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

Annual Report was submitted on UNKN - TBD; DUE TO CORONAVIRUS/COVID-19 PANDEMIC RESPONSE AND NYS EXECUTIVE ORDER 202 IT IS UNCLEAR, AT THIS TIME, IF THE GOAL WILL BE MET;
100% Participation by all registered groups - this goal has been met.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of Saratoga County Biological Monitoring & Assessment - Kayaderosseras Ck (BioMAK) and the Dwass Kill (BioMAD) in coordination with the NYS DEC WAVE Program;
Continue administration of all Adopt-A-Highway Programs;
Continue current ISWM Program publication of a Combined Saratoga County MS4 Annual Report.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Ballston Spa |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

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| Continue to sponsor and support of the Friends of the Kayaderosseras; Continued cooperation and coordination with the Town of Milton Hazardous Household clean-up and recycling event; Continue to participate with the ISWM Program publication of a Combined Saratoga County MS4 Annual Report. |
|---|

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

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| The Village of Ballston Spa MS4 Annual Report was delivered complete and on-time to the ISWM Program Coordinator; Continued to support the Friends of the Kayaderosseras annual Spring (5/4/19) and Fall (11/2/19) Clean Ups; Continued to see good participation at Village events. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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| Continue all specified measures detailed in the Village of Ballston Spa SWMP Plan; Continue to participate in the ISWM Program publication of a Combined Saratoga County MS4 Annual Report; Continue to support the Friends of the Kayaderosseras stewardship events. |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Ballston |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Continue to work with the ISWM program to discuss strategy for implementing the potential changes to the MS4 permit within their respective programs. Draft language will be continued to be reviewed to address the new potential requirements.

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

The ISWM program participants continue to coordinate monthly to discuss the strategy for implementing the potential changes to the MS4 permit within their respective programs.

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

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

Yes No

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

Yes No

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

Continue to work with the ISWM program to discuss strategy for implementing the potential changes to the MS4 permit within their respective programs. Draft language will be continued to be reviewed to address the new potential requirements.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Charlton |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Participate in Saratoga County Intermunicipal Storm program. Continue free tree plantings giveaway. Continue waste collection and recycling events as possible, continue proportional funding of County MS4 program

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

Attendance at tree planting giveaway and roadside pickup events increases annually.

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

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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).

Some interruption anticipated due to Covid-19 restrictions. Generally, continue participation in County program and town wide cleanup events. Events are typically done in late April on a weekend and were postponed indefinitely this year

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| TOWN OF CLIFTON PARK |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

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| Continue to sponsor and support local stewardship activities. Continue to participate with the ISWM Program publication of a Combined Saratoga County MS4 Annual Report. |
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B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

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| 11 stewardship activities were conducted during this reporting year. The Town of Clifton Park MS4 Annual Report was delivered complete and on-time. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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| Continue all specified measures detailed in the Town of Clifton Park SWMP Plan. Continue to participate in the ISWM Program publication of a Combined Saratoga County MS4 Annual Report. |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Continue to sponsor and support local stewardship activities.
Continue to participate with the ISWM Program publication of a Combined Saratoga County MS4 Annual Report.
Continue to offer residents opportunity to dispose of home household waste (twice per year).

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

Road and stream cleanup events will continue in the spring (pending social distancing). In 2019 the town held seven road side cleanups. Home household waste collection was offered twice in 2019, 200.9 tons of household waste material, 62.2 tons of metal and 40 pallets of electronic waste were collected and disposed of by the town. In 2020 the Town will continue participation in Town-wide Cleanup program.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue all specified measures detailed in the Town of Greenfield SWMP Plan.
Continue to participate in the ISWM Program publication of a Combined Saratoga County MS4 Annual Report.

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Halfmoon |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Continue Clean-up events including Annual Spring Cleanup Event (6 days), the Mohawk River Cleanup Event. The SWMPP and annual reports (all) to be available for review at the Planning Department, during regular business hours to the general public or upon request for review.

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

Clean up event is held annually each spring. The SWMPP and annual reports are available for review at the Planning Department. No requests to review documents this reporting period

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue all specified measures detailed in the Town of Halfmoon SWMP Plan.
Continue to participate in the ISWM Program publication of a Combined Saratoga County MS4 Annual Report.

MS4 Annual Report Form

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

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Name of MS4/Coalition

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| Town of Malta | | | | | | | | | |
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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The Town of Malta will endeavor to continue outreach for volunteers for drain marking. COVID19 restrictions may impede implementation of this goal in the coming reporting year.

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

Due to the department being understaffed and lack of interest from the public, the drain marking program did not have public participation in 2019.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The Town of Malta will continue outreach for volunteers for drain marking. There will be continued effort in reaching out to the local high school Participation in Government program and posting notices for volunteer opportunities on the Town website and the Saratoga Lake Association newsletter. COVID19 restrictions may impede implementation or meeting this goal in the coming year.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

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| The City participated in the Saratoga County CCE ISWM Program's Stormwater Management Public Participation and Involvement program. |
|---|

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

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|---|
| All selected BMPs detailed in the ISWM Program Plan continue to be implemented. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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| The City will continue to implement the Saratoga County ISWM Program for Public Involvement and Participation. |
|--|

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The City hosts residential solid waste drop-off days in an effort to reduce illegal dumping. This includes collection of household appliances and mattresses. Hazardous waste materials are not accepted.

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

Two waste drop-off days are scheduled per year (spring and fall), and the City contracts through County Waste for pick-up of materials that the City cannot accommodate.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Drop-off days will be hosted annually.

2013032775

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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|----------------|
| TOWN OF MILTON |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Participation in the ISWM Program publication of a combined Saratoga County MS4 Annual Report.

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

The Town of Milton MS4 Annual Report was completed within the required time frames.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Participation in the ISWM Program publication of a combined Saratoga County MS4 Annual Report

2013032775

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Continue all specified measures detailed in the Town of Moreau SWMP Plan.
Continue to participate in the ISWM Program publication of a Combined Saratoga County MS4 Annual Report

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

The Town continued to be a member of the Saratoga County ISWM Program and relied upon this as a source of meeting MCM 2 goals. The Town did not individually promote public involvement and participation otherwise.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The Draft annual report will be advertised for review and comment by the public available at the Town Hall, Office of the Stormwater Management Officer at the Town Highway Department, and at a public meeting where the report will be presented and public comment received. The Town's website will also include a separate stormwater web page and include a link to the ISWM Program website.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Round Lake |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

| |
|---|
| Continue cooperation with the Saratoga County/CCE Saratoga Intermunicipal Stormwater Management/ISWM Program; submittal of local Annual Report on/before 05/01/2020 to ISWM Program for publication; continue offering opportunity for public participation through Village-wide Spring Clean Up event; continue to provide opportunity for public inquiry &/or comment via monthly Village Board Meetings (i.e. Board of Trustees, Planning Board) |
|---|

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

| |
|--|
| This year's AR was completed, signed, and submitted to the Saratoga County ISWM Program by May 20th; Village Clean Up was not held this year; the public is welcome to attend Village Board meetings (i.e. Board of Trustees, Planning Board) wherein Public Comment period is open to anyone in attendance with comments &/or questions for the respective Board or the current business before that Board. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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|---|
| Continue all protocols cited above. No new initiatives planned for next reporting year. |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Saratoga County, Department of Public Works |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

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| Continue Saratoga County DPW Adopt-A-Highway program. |
|---|

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

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|---|
| 46 of 46 member-groups of the Saratoga County DPW Adopt-a-Highway program participated in the Spring and Fall (2019/2020) Clean Ups. As 100% of all groups officially registered with the program affected clean ups the goal of the program was met. |
|---|

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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|---|
| Continue Saratoga County DPW Adopt-A-Highway program. |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Saratoga Springs |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

- Coordinate a household hazardous waste collection day for City residents every other year.
- Promote water conservation to customers connected to municipal distribution system.
- Encourage public to review stormwater management program plan, annual reports, web page, etc...
- Provide contact info for Stormwater Management Officer, Program Coordinator, and report hotline.
- Work with citizen volunteer organizations to enable events and activities.

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

- A Household Hazardous Waste Collection Day was conducted on October 26, 2019.
- (10,700) utility bills mailed quarterly hi-liting costs incurred from leaky plumbing fixtures.
- Stormwater management program documents made readily available for public review.
- Contact information and access to City stormwater officials was provided.
- (120) street trees purchased by City. Trees planted by City or Sustainable Saratoga volunteers.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

- Another household hazardous waste collection day for residents is planned for Fall 2021.
- Quarterly utility bills will continue to promote water conservation by consumers.
- Stormwater management program documents will continue to be available to public.
- Public access to City stormwater officials, documents, web page, etc... will be maintained.
- Sponsor and support local volunteer and stewardship activities such as street tree planting .

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

South Glens Falls

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Continue to sponsor and support local stewardship activities.
Continue to participate with the ISWM Program publication of a Combined Saratoga County MS4 Annual Report.

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

The South Glens Falls Annual report was delivered complete and on-time to the ISWM Program Coordinator.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue all specified measures detailed in the South Glens Falls SWMP Plan.
Continue to participate in the ISWM Program publication of a Combined Saratoga County MS4 Annual Report.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Stillwater |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The Final Annual Report will be available for public view on both the Town webpage and the Saratoga County ISWM Program website. The Town through coalition with the Saratoga County ISWM program will continue to sponsor and support local stewardship activities. The Town will continue to participate with the ISWM Program.

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

The Town of Stillwater MS4 Annual Report was delivered complete and on-time .

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Town of Stillwater SWMP Plan . Continue to participate in the Saratoga County ISWM Program including monthly workshops. Continue creation of Standard Operation Procedures for Coalition members to create a consistent approach county-wide.

MS4 Annual Report Form

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

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Name of MS4/Coalition

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| Village of Stillwater |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The Final Annual Report will be available for public view on the Saratoga County ISWM Program website. The Village through coalition with the Saratoga County ISWM program will continue to sponsor and support local stewardship activities. The Village will continue to participate with the ISWM Program.

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

The Village of Stillwater MS4 Annual Report was delivered complete and on-time.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue implementation of the Village of Stillwater SWMP Plan .
Continue to participate in the ISWM Program including monthly workshops.
Publication of a Combined Saratoga County MS4 Annual Report.
Continue creation of Standard Operation Procedures for Coalition members to create a consistent approach

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Waterford |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The Town facilitates Canal Clean-up Days, when volunteers participate in removing litter from the banks of the canal as well as maintaining vegetation. These clean-up days are advertised in the local Pennsaver. The Town also hosted the school district's annual Senior Give-Back day.

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

One Canal Clean clean-up occurred, with a total of 9 volunteers. 55 highschool seniors participated in Senior Give-Back Day.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The Town will continue to publicize and host these cleanup days.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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|-------------------|
| Town of Waterford |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

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| The Town hosted their annual Trash Drop Off Program, permitting brush, wood, and lawn debris. |
|---|

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

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|---|
| This opportunity was offered to all residents with proof of residency on Saturdays from September 14 through October 26. This included 7 Saturdays. |
|---|

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

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| The Town will continue to offer their annual trash drop-off program. |
|--|

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Waterford |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The Town continued to pick up residential green waste (grass clippings, brush, etc) during October and November.

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

The Town collected 710 cubic yards of green waste from curbsides throughout the Town over a total of 17 days of collection.

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

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| 7 | 1 | 0 |
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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The Town will continue to collect residential green waste annually.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Waterford |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

The Town hosted their annual Household Hazardous Waste Collection Day on August 19, 2019.

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

The Town collected propane, fire extinguishers, aerosols, paint, fluorescent tubes, batteries, antifreeze, pesticides, flammables, and more. These were all properly disposed of via Care Environmental Corp. 51 cars were counted as participants.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The Town will continue to host the annual Household Hazardous Waste Collection Day.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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|-------------------|
| Town of Waterford |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

| |
|--|
| The Town hosted their two annual Electronic Recycling Days on April 20, 2019 and October 19, 2019. |
|--|

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

| |
|---|
| During these collection days, a total of 8,801 lb of recyclable electronics were collected and hauled by JGS Recycling and Hauling. |
|---|

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

| | | | |
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| 8 | 8 | 0 | 1 |
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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

| |
|--|
| The Town will continue to host annual Electronic Recycling Days. |
|--|

2013032775

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Waterford |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Continue to sponsor and support local stewardship activities.
Continue to participate with the ISWM Program publication of a Combined Saratoga County MS4 Annual Report.

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

The Village of Waterford MS4 Annual Report was delivered late - this goal was not met.

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

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

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

Yes No

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

Yes No

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

Continue all specified measures detailed in the Village of Waterford SWMP Plan.
Continue to participate in the ISWM Program publication of a Combined Saratoga County MS4 Annual Report.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Town of Wilton |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Continue to sponsor and support local stewardship activities.
Continue to participate with the ISWM Program publication of a Combined Saratoga County MS4 Annual Report.

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

The Town of Wilton MS4 Annual Report was delivered complete and on-time to the ISWM Program Coordinator.

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

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

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

Yes No

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

Yes No

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

Continue all specified measures detailed in the Town of Wilton SWMP Plan.
Continue to participate in the ISWM Program

7368169291

MS4 Annual Report Form

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

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

Name of MS4/Coalition TOWN OF MILTON

SPDES ID
N Y R 2 0 A 1 0 8

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report? 1

1. Enter the number and approx. percent of outfalls mapped: 2 7 # 1 0 0 %

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

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

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

Sewersheds:

MS4 Annual Report Form

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

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

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| Name of MS4/Coalition | Town of Ballston | SPDES ID | | | | | | | | | |
| | | <table style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px; text-align: center;">N</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">R</td> <td style="width: 20px; height: 20px; text-align: center;">2</td> <td style="width: 20px; height: 20px; text-align: center;">0</td> <td style="width: 20px; height: 20px; text-align: center;">A</td> <td style="width: 20px; height: 20px; text-align: center;">1</td> <td style="width: 20px; height: 20px; text-align: center;">5</td> <td style="width: 20px; height: 20px; text-align: center;">7</td> </tr> </table> | N | Y | R | 2 | 0 | A | 1 | 5 | 7 |
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3.b. What types of illicit discharges have been found during this reporting period?

- | | |
|--|--|
| <input type="radio"/> Broken Lines From Sanitary Sewer <input type="radio"/> Cross Connections <input type="radio"/> Failing Septic Systems <input type="radio"/> Floor Drains Connected To Storm Sewers <input type="radio"/> Illegal Dumping <input type="radio"/> Other: | <input type="radio"/> Industrial Connections <input type="radio"/> Inflow/Infiltration <input type="radio"/> Pump Station Failure <input type="radio"/> Sanitary Sewer Overflows <input type="radio"/> Straight Pipe Sewer Discharges <input checked="" type="radio"/> None |
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4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

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

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

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

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

If Yes, provide URL(s):

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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

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

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

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

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

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

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

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

URL

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5953169299

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

SPDES ID

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

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

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

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

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

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

%

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

If Yes, provide URL(s):

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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

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

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

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

| | | | |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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|-------------------------|
| Village of Ballston Spa |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 7 | 6 |
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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

| |
|---|
| The Village inspects their outfalls on a 5 year rotational basis. Last inspection of all outfalls was completed in April of 2017. Village provides follow-up inspections to reported incidents. |
|---|

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

| |
|---|
| No illicit discharges were observed or reported at stormwater outfalls. |
|---|

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

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

(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

| |
|--|
| All stormwater outfalls were inspected in April 2017; Continue to follow-up on reported incidents and complaints. |
|--|

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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|------------------|
| Town of Ballston |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

Continue to respond to and evaluate any public concerns regarding failed septic systems, odors, and suspected illicit discharge. Due to staffing, the Town was not able to inspect outfalls during dry weather. Town will work in the next reporting period to perform dry weather inspections and maintain records of all outfall inspections, complaints, and confirmed violations.

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

No suspected illicit discharges were reported, but the Town has a mechanism in place to address illicit discharges if they are reported.

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

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

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

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to respond to and evaluate any public concerns regarding failed septic systems, odors, and suspected illicit discharge. Due to staffing, the Town was not able to inspect outfalls during dry weather. Town will work to perform inspections and maintain records of all outfall inspections, complaints, and confirmed violations.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Charlton |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Continue to maintain MS4 outfall map, monitor land use changes, conduct bi-annual dry weather observations of storm outfalls, continue laboratory testing of surface water at two watershed collection sites, track changes in 9 parameter pollutant profile, continue to inform public & town officials of the prohibition of discharges to storm system related to Local Law #3 of 2007, continue to monitor illicit discharges via public input and reporting.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Dry weather observations did not indicate the presence of any illicit discharges. Stream testing continues to document pure water results.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
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| | | | 3 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to perform the same tasks related to Illicit Discharge Detection and Elimination at the regularly scheduled times. Dry weather observations are performed in the Spring and Fall and water quality testing is done in the Fall. The Spring dry weather observation has been postponed due to Covid-19 restrictions.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| TOWN OF CLIFTON PARK |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

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|---|
| Review and update SWMPP documentation. Continue to have Investigation Requests Forms filled out by residents. Follow up with a Department Response. |
|---|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

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|--|
| Records are kept on the Investigation Requests Forms with the actions taken from the town if needed. |
|--|

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|-----------------------------------|
| Continue Dry Weather Inspections. |
|-----------------------------------|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------|
| Town of Greenfield |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The measurable goal for the Town was to continue to monitor the Illicit Discharge Detection and Elimination program including monitoring septic systems, stormwater hot spots and completing dry weather observations. The Town collects and samples surface water from two major discharge points and monitors any changes in background contaminants.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

During the reporting period the Town observed and reviewed 12 failing septic systems. The Town continues to monitor six locations previously identified as key locations for Dry weather Storm Outfalls. Each of the six locations is observed a minimum of two times per year and the observations are documented.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue performance of septic system replacements and modifications, dry weather observations, water quality testing and investigation of any reported illicit discharge violations.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Halfmoon |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 7 | 5 |
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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town had all existing outfalls inspected by a consultant in 2008. The watersheds are being mapped and a full outfall reconnaissance is being undertaken through the coalition that the Town is a member of, the Saratoga County ISWM Program. The mapping of the Town of Halfmoon has been nearly completed and expected to be finished in 2020. The information obtained from this will be mapped with GIS and made available to all members of the coalition and public. The Town

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The County -wide stormwater sewershed mapping is underway in a large portion of the County by the ISWM Program and development of a standardized logging mechanism is being developed. The County began the Town of Halfmoon mapping in the spring of 2015, and is nearly complete and expects to be completed in 2020. The Stormwater Management Officer's contact information is available on the Town website to report possible violations. An inspection log is maintained and

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The watersheds are being mapped and a full outfall reconnaissance is being undertaken through the coalition that the Town is a member, the Saratoga County ISWM Program. The mapping of the Town of Halfmoon has been nearly completed and expected to be finished in 2020. The information obtained from this will be mapped with GIS and made available to all members of the coalition. The local law for IDDE will continue to be enforced and the SMO's info will be available to the public on the Town's website.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Malta |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town intends to inspect more than 20% of the outfalls in the coming reporting year so that it can meet the deadline in the MS4 permit. Record and investigate all complaints and suspected violations in a timely manner. Maintain record of outcomes/ dispositions regarding all complaints and suspected violations reported. Maintain an archive of outfall inspections.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has 40 known outfalls in the regulated MS4 and has inspected 24 outfalls in this reporting period. All complaints have been investigated and responded to in a timely manner. Of these complaints, 2 were determined to be illicit discharges during frozen ground conditions.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town intends to inspect more than 20% of the outfalls in the coming reporting year so that it can meet the deadline in the MS4 permit and catch up on inspection requirements. Record and investigate all complaints and suspected violations in a timely manner. Maintain record of outcomes/ dispositions regarding all complaints and suspected violations reported. Maintain an archive of outfall inspections. COVID19 restrictions may impede obtaining this goal in the coming

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| City of Mechanicville |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The City continued to inspect for, and respond to reports of, illicit discharges.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Three illicit discharges were identified. A private sewer line was plugged and overflowed into a storm drain. The owner voluntarily remedied the situation. A resident continues to leak oil from a vehicle into a nearby storm drain, and will be notified in writing about the IDDE law and compliance. Another resident washed water-based paint from brushes/rollers/pans into a nearby storm drain. The SMO notified the DEC as well as informed the resident in person that this is illegal.

C. How many times was this observation measured or evaluated in this reporting period?

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| | | | 3 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The City will continue to inspect for and respond to illicit discharges. Staff will be trained in the upcoming reporting year and log books will be kept in City vehicles, so that field personnel can report any findings to the SMO.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

In an effort to reduce illegal dumping adjacent to the river, the City had signage produced to place at the end of every dead end road.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The signage states "Property of Mechanicville. Dumping not permitted" and is hoped to prevent illegal dumping at potential hot spots, which are also primarily adjacent to several outfalls along the Hudson River. Approximately 20 signs were made.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

These signs will be installed during the 2020-2021 annual reporting cycle.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The City inspects for, and responds to, instances of potential illicit discharges from businesses and residents.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

A food establishment, recently obtained by a new owner, was found to have a leaking dumpster which included food grease. The leachate was directed down a grassed area to an adjacent roadway and toward the storm sewer. The owner voluntarily complied with the City's request for use of (and proper disposal from) the grease trap within the establishment as well as replacing the dumpster to eradicate the leak. Subsequent visual inspections indicate a marked improvement.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

City personnel will continue to inspect for, and respond to, these instances. Additionally, personnel will be trained in illegal dumping and illicit discharges in the next reporting cycle.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| TOWN OF MILTON |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Continue ORI outfall reconnaissance for outfalls inspected annually utilizing ORI format. No inspections occurred in 2019 period.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

County mapping systems continues to be improved / updated. No inspections occurred in 2019 period.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Dry weather inspections.
Complete inspections utilizing ORI

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| TOWN OF MOREAU |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Continue to record outfall inspections using standard ORI forms.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

All stormwater outfalls have been mapped but their drainage area have yet to be delineated on a map to facilitate illicit discharge track down. The Town continues to conduct outfall inspections on a rotational basis to ensure that all outfalls are inspected at least once every five years. Standard forms are used to record findings and follow up actions.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The ISWM Program mapping for Town outfalls has been completed. An updated Outfall Inspection Form will be completed following the release and finalization of the new Draft MS4 General Permit. Full implementation will be accomplished by the end of the first year of the new permit-cycle.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Village of Round Lake |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Mapping of the village collection system is complete, in partnership with the Town of Malta and Saratoga County. Updates to this mapping will continue through 2020 and will be available to the public through the above referenced online GIS Viewer (www.spatial.vhb.com/SaratogaMapView/); 0% of the outfalls have been dry-weather screened in this 5-year permit cycle (ref. GP-0-15-003), the Village of Round Lake will meet its compliance requirement for this MCM in Permit-Year 18 (2020-21).

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Outfall and System Mapping, including flow-direction, is complete; All outfalls were screened in reporting year 9 (2011 - 2012). 0 outfalls were screened in Permit-Year 17 (2019-20).

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Dry-weather screening of all outfalls will resume next Reporting-Year (18; 2020-21); Village will transition to cloud-based ESRI ArcGIS Online Mobility Platforms for inspection and records-retention.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Saratoga County, Department of Public Works |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Dry-weather screening of 20% (minimum of 35) of County DPW outfalls per year using the Center For Watershed Protection/EPA IDDE Outfall Reconnaissance Inventory (ORI) form.

Re-mapping of collection/conveyance systems and discharge points/outfalls.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Measurable Goal had been exceeded in previous reporting years; approximately 80% of outfalls screened to date. Screening continued this reporting year; 8 outfalls screened (target is 40 per year). The goal has not been met.

Re-mapping of collection/conveyance systems and discharge points/outfalls initiated this reporting year; target completion date of 2019.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to implement the IDDE Program as planned (i.e. public education and outfall screening programs). To date 100% of all known/mapped outfalls have been dry-weather screened. Awaiting new Permitting to determine future measurable goal for Dry-Weather Outfall Screening; approximately 8 outfalls in Year-16 /2018-2019.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| City of Saratoga Springs |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

- Implement a comprehensive illicit discharge detection and elimination program.
- Maintain mapping of outfall locations and inspect outfalls every (5) years, min.
- Raise general awareness of illicit discharges and enforce local law to mitigate problems.
- Maintain mapping of the City's stormwater sewer system to facilitate IDDE program.
- Prioritize areas most susceptible to illicit discharges and closely monitor their condition.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

- (1) potential illicit discharges identified, investigated, and remediated.
- (0) new outfalls inventoried. (0) outfalls inspected.
- Provided information to raise public awareness of sources of stormwater pollution.
- Continued work to update municipal sewer system mapping.
- (3) stormwater sampling events with samples tested for fecal coliform.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

- IDDE program will continue to be implemented and the local law enforced.
- New outfalls will be inventoried and added to City map. Outfalls inspected every (5) years.
- Public education campaign will be used to raise awareness of illicit discharges.
- Municipal sewer system mapping will continue to be updated and maintained.
- Storm sewer system sampling and testing will continue to identify and isolate pollution.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

South Glens Falls

SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Looking at possible joint purchase of GPS unit with town of Moreau.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Continue to follow the MS4 permit.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to check outfalls for Illicit discharges.
Train employees.
Work on getting paper maps onto GIS.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town is working in coalition with the Saratoga County ISWM program to map and develop a standardized resource/inventory of a county wide stormwater sewershed database. The watersheds are being mapped and a full outfall reconnaissance is being undertaken through the coalition. The information obtained from this will be mapped with GIS and made available to all members of the coalition and public.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

As of this reporting year the Town of Stillwater has adopted its Stormwater Management Plan and Local IDDE Law in November of 2016. The Town CEO, Engineer, SMO, and Highway Superintendent have all taken the NYS DEC 4-Hour Erosion and Sediment Control Training. The Town of Stillwater SMO has CPMSM, CESSWI, and CPESC certification and has taken the NYS DEC 4-Hour Erosion and Sediment Control Training.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue creation of Standard Operation Procedures for Coalition members to create a consistent approach.
As of this reporting year the Town of Stillwater has developed their Stormwater Management Plan (SWMP). The Town in coalition with the Saratoga County ISWM program has developed a standardized resource/inventory of a county wide stormwater sewershed database. The information obtained from this has been mapped with GIS and made available to all members of the coalition and

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Village of Stillwater |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 5 | 4 | 7 |
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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village is working in coalition with the Saratoga County ISWM program to map and develop a standardized resource/inventory of a county wide stormwater sewershed database. The watersheds were mapped and a full outfall reconnaissance is was performed. Information was obtained from this and will be mapped with GIS and made available to all members of the coalition and public.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Village of Stillwater adopted its Stormwater Management Plan and Local IDDE Law in November of 2016. The Village is working to enter into an Inter-municipal Agreement with the Town of Stillwater whereas the Town SMO will function as the Village SMO. The SMO has CPMSM, CESSWI, and CPESC certification and has taken the NYS DEC 4-Hour Erosion and Sediment Control Training.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village of Stillwater has developed their Stormwater Management Plan (SWMP). The Village is working in coalition with the Town of Stillwater for stormwater management. The Village has also been working with the Saratoga County ISWM program to map and develop a standardized resource/inventory of a county wide stormwater sewershed database. The local law for IDDE was passed in November of 2016 and the SMO's info is available to the public on the Town's website

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| Town of Waterford |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 7 |
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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|--|
| Outfall inspections are performed at a rate of 100% of the outfalls every five years, as required. |
|--|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|---|
| The Town inspected 100% of their outfalls between January 7 and January 17, 2020. While performing inspections, they discovered they had nearly twice the number of outfalls as was originally included in their initial ORI. These were all inspected and mapped. No illicit discharges were identified. |
|---|

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|---|---|
| | | 8 | 4 |
|--|--|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|---|
| The Town will continue to adhere to the required outfall inspection schedule. |
|---|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| Town of Waterford |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|---|
| The Town continues to implement their robust litter control and illegal dumping prevention program. |
|---|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|---|
| The Town maintains litter receptacles at all Town parks (7 parks) and collects from them twice per week on Mondays and Fridays. They maintain no dumping signs at the following vulnerable locations: Fulton Street, Mohawk Ave, and Robin Lane (total of 3). |
|---|

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|---|---|
| | | 1 | 0 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|--|
| The Town will continue to maintain signage and receptacles, as well as implement regular collection. |
|--|

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

100% dry weather screening of all outfalls annually

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

This reporting year the goal was unmet

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
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| | | | 1 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Unknown. At this time the Village has no full-time staff, officials, or contractors that can complete this task. The Village may contract with the Saratoga CCE ISWM Program to complete this task.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| Town of Wilton |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|---|
| Continue program of outfall inspections and data collection for IDDE; Continue performing dry weather inspections on outfalls. |
|---|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|---|
| No illicit discharges found at outfall locations. |
|---|

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|---|
| Continue with outfall inspections Continue performing inspections with reports and photographs when necessary. |
|---|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------------|
| Village of Ballston Spa |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 7 | 6 |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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| | | |
|--|--|--|

1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

| | | |
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| | | 0 |
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

| | | |
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Ballston |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 5 | 7 |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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| | | |
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

| | | |
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

| | | |
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| | | 2 |
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

With regards to the public comments on SWPPPs, most comments are at Planning Board meetings and include other site plan related issues. Meeting minutes are available for public review.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Charlton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 2 |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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| 1 | | |
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

| | | |
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| | | 0 |
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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|--|--|---|
| | | 0 |
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------------|
| TOWN OF CLIFTON PARK |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 5 |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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| | | 1 |
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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|--|---|---|
| | 1 | 6 |
|--|---|---|

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

| | | |
|--|--|---|
| | | 3 |
|--|--|---|

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

| | | |
|--|---|---|
| | 1 | 5 |
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Halfmoon |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 7 | 5 |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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| | | |
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

| | | |
|--|--|---|
| | | 7 |
|--|--|---|

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---------------|
| Town of Malta |
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SPDES ID

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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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| | | |
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| City of Mechanicville |
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SPDES ID

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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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|--|--|--|
| | | |
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

| | | |
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

5624056356

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| TOWN OF MILTON |
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SPDES ID

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Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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| | | 1 |
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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| | | 4 |
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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| | | 0 |
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

5624056356

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| T | O | W | N | O | F | M | O | R | E | A | U |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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| | | |
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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Village of Round Lake |
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SPDES ID

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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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SPDES ID

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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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| | | 0 |
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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| | | 0 |
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

5624056356

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| City of Saratoga Springs | | | | | | | | | |
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SPDES ID

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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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| | | 0 |
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

5624056356

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

South Glens Falls

SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 9 | 1 |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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| | | 0 |
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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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| | | 0 |
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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------|
| Town of Stillwater |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 5 | 4 | 9 |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| Village of Stillwater |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 5 | 4 | 7 |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Waterford |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 7 |
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Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

5624056356

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Wilton |
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SPDES ID

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Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

- 1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

- 2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

- 3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

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- 4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

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| | | 0 |
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- 5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
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 No Authority
- Stop Work Orders #

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 No Authority
- Criminal Actions #

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 No Authority
- Termination of Contracts #

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 No Authority
- Administrative Fines #

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 No Authority
- Civil Penalties #

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 No Authority
- Administrative Orders #

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 No Authority
- Enforcement Actions or Sanctions #

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 No Authority
- Other #

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| | | | | | 0 |
|--|--|--|--|--|---|

 No Authority

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

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|--|--|--|--|--|---|
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 No Authority
- Stop Work Orders #

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 No Authority
- Criminal Actions #

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 No Authority
- Termination of Contracts #

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 No Authority
- Administrative Fines #

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 No Authority
- Civil Penalties #

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 No Authority
- Administrative Orders #

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 No Authority
- Enforcement Actions or Sanctions #

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 No Authority
- Other #

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 No Authority

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

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 ○ No Authority
- Stop Work Orders #

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 ○ No Authority
- Criminal Actions #

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 ○ No Authority
- Termination of Contracts #

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 ○ No Authority
- Administrative Fines #

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 ○ No Authority
- Civil Penalties #

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 ○ No Authority
- Administrative Orders #

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 ○ No Authority
- Enforcement Actions or Sanctions #

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- Other #

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 ○ No Authority

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

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|--|--|--|--|--|---|
| | | | | | 1 |
|--|--|--|--|--|---|

 No Authority
- Stop Work Orders #

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|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 No Authority
- Criminal Actions #

| | | | | | |
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| | | | | | 0 |
|--|--|--|--|--|---|

 No Authority
- Termination of Contracts #

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| | | | | | 0 |
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 No Authority
- Administrative Fines #

| | | | | | |
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| | | | | | 0 |
|--|--|--|--|--|---|

 No Authority
- Civil Penalties #

| | | | | | |
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| | | | | | 0 |
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 No Authority
- Administrative Orders #

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 No Authority
- Enforcement Actions or Sanctions #

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- Other #

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 No Authority

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

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|--|--|--|--|--|---|
| | | | | | 0 |
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 ○ No Authority
- Stop Work Orders #

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 ○ No Authority
- Criminal Actions #

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 ○ No Authority
- Termination of Contracts #

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 ○ No Authority
- Administrative Fines #

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 ○ No Authority
- Civil Penalties #

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 ○ No Authority
- Administrative Orders #

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 ○ No Authority
- Enforcement Actions or Sanctions #

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- Other #

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 ○ No Authority

3951056357

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

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 No Authority
- Stop Work Orders #

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 No Authority
- Criminal Actions #

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 No Authority
- Termination of Contracts #

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 No Authority
- Administrative Fines #

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 No Authority
- Civil Penalties #

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 No Authority
- Administrative Orders #

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 No Authority
- Enforcement Actions or Sanctions #

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 No Authority
- Other #

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 No Authority

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

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 ○ No Authority
- Stop Work Orders #

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 ○ No Authority
- Criminal Actions #

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 ○ No Authority
- Termination of Contracts #

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 ○ No Authority
- Administrative Fines #

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 ○ No Authority
- Civil Penalties #

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 ○ No Authority
- Administrative Orders #

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 ○ No Authority
- Enforcement Actions or Sanctions #

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 ○ No Authority
- Other #

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 ○ No Authority

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- Notices of Violation #

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- Stop Work Orders #

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 ○ No Authority
- Criminal Actions #

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 ○ No Authority
- Termination of Contracts #

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 ○ No Authority
- Administrative Fines #

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 ○ No Authority
- Civil Penalties #

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 ○ No Authority
- Administrative Orders #

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 ○ No Authority
- Enforcement Actions or Sanctions #

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 ○ No Authority
- Other #

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 ○ No Authority

3951056357

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
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 No Authority
- Stop Work Orders #

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

 No Authority
- Criminal Actions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

 No Authority
- Termination of Contracts #

| | | | | |
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 No Authority
- Administrative Fines #

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 No Authority
- Civil Penalties #

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 No Authority
- Administrative Orders #

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| | | | | 0 |
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 No Authority
- Enforcement Actions or Sanctions #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
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 No Authority
- Other #

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 No Authority

3951056357

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- | | | | | | | | | |
|---|---|---|--|--|--|--|--|---|
| <input checked="" type="radio"/> Notices of Violation | # | 0 | | | | | | <input type="radio"/> No Authority |
| <input checked="" type="radio"/> Stop Work Orders | # | 0 | | | | | | <input type="radio"/> No Authority |
| <input checked="" type="radio"/> Criminal Actions | # | 0 | | | | | | <input type="radio"/> No Authority |
| <input checked="" type="radio"/> Termination of Contracts | # | 0 | | | | | | <input type="radio"/> No Authority |
| <input type="radio"/> Administrative Fines | # | | | | | | | <input checked="" type="radio"/> No Authority |
| <input type="radio"/> Civil Penalties | # | | | | | | | <input checked="" type="radio"/> No Authority |
| <input type="radio"/> Administrative Orders | # | | | | | | | <input checked="" type="radio"/> No Authority |
| <input checked="" type="radio"/> Enforcement Actions or Sanctions | # | 0 | | | | | | |
| <input type="radio"/> Other | # | | | | | | | <input type="radio"/> No Authority |

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

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| | | | | | 2 |
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 ○ No Authority
- Stop Work Orders #

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 ○ No Authority
- Criminal Actions #

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 ○ No Authority
- Termination of Contracts #

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 ○ No Authority
- Administrative Fines #

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 ○ No Authority
- Civil Penalties #

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 ○ No Authority
- Administrative Orders #

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 ○ No Authority
- Enforcement Actions or Sanctions #

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 ○ No Authority
- Other #

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 ○ No Authority

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| | | | | | | | | | |
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| <input type="radio"/> Notices of Violation | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Stop Work Orders | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Criminal Actions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Termination of Contracts | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
| | | | | | 0 | | | | |
| <input type="radio"/> Administrative Fines | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
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| | | | | | | | | | |
| <input type="radio"/> Administrative Orders | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
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| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
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3951056357

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

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 No Authority
- Stop Work Orders #

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 No Authority
- Criminal Actions #

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 No Authority
- Termination of Contracts #

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 No Authority
- Administrative Fines #

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 No Authority
- Civil Penalties #

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 No Authority
- Administrative Orders #

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 No Authority
- Enforcement Actions or Sanctions #

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 No Authority
- Other #

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 No Authority

3951056357

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| <input type="radio"/> Notices of Violation | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
| | | | | | 0 | | | | |
| <input type="radio"/> Stop Work Orders | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
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| <input type="radio"/> Criminal Actions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input checked="" type="radio"/> No Authority |
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| <input type="radio"/> Termination of Contracts | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input checked="" type="radio"/> No Authority |
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| <input type="radio"/> Administrative Fines | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
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| <input type="radio"/> Civil Penalties | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
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| <input type="radio"/> Administrative Orders | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
| | | | | | 0 | | | | |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | |
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| <input type="radio"/> Other | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | | 0 | <input type="radio"/> No Authority |
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| <input type="radio"/> Notices of Violation | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Stop Work Orders | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | <input type="radio"/> No Authority |
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| <input type="radio"/> Criminal Actions | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | <input type="radio"/> No Authority |
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| <input type="radio"/> Termination of Contracts | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | <input type="radio"/> No Authority |
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| <input type="radio"/> Administrative Fines | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Civil Penalties | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Administrative Orders | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Other | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |

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| <input type="radio"/> Notices of Violation | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Stop Work Orders | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Criminal Actions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Termination of Contracts | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Administrative Fines | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Civil Penalties | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Administrative Orders | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |
| <input type="radio"/> Other | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | | |

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Stop Work Orders #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Criminal Actions #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Termination of Contracts #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Administrative Fines #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Civil Penalties #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Administrative Orders #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Enforcement Actions or Sanctions #

| | | | | | |
|--|--|--|--|--|---|
| | | | | | 0 |
|--|--|--|--|--|---|

 ○ No Authority
- Other #

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

 ○ No Authority

3951056357

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- | | | | | | | | | |
|--|---|---|--|---|--|--|---|---|
| <input type="radio"/> Notices of Violation | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table> | | | | | 0 | <input type="radio"/> No Authority |
| | | | | 0 | | | | |
| <input type="radio"/> Stop Work Orders | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table> | | | | | 0 | <input type="radio"/> No Authority |
| | | | | 0 | | | | |
| <input type="radio"/> Criminal Actions | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Termination of Contracts | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table> | | | | | 0 | <input type="radio"/> No Authority |
| | | | | 0 | | | | |
| <input type="radio"/> Administrative Fines | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Civil Penalties | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table> | | | | | 0 | <input type="radio"/> No Authority |
| | | | | 0 | | | | |
| <input type="radio"/> Administrative Orders | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table> | | | | | 0 | <input type="radio"/> No Authority |
| | | | | 0 | | | | |
| <input type="radio"/> Other | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- | | | | | | | | | |
|--|---|---|--|--|--|--|--|------------------------------------|
| <input type="radio"/> Notices of Violation | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Stop Work Orders | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Criminal Actions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Termination of Contracts | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Administrative Fines | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Civil Penalties | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Administrative Orders | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | |
| | | | | | | | | |
| <input type="radio"/> Other | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|-------------------------|
| Village of Ballston Spa |
|-------------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 7 | 6 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|--|--|--|
| | | |
|--|--|--|

 %

 4. What percent of active construction sites were inspected more than once? NT

| | | |
|--|--|--|
| | | |
|--|--|--|

 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Ballston |
|------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 5 | 7 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|--|---|
| | | 7 |
|--|--|---|

 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|---|---|
| | 1 | 5 |
|--|---|---|

 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

 4. What percent of active construction sites were inspected more than once? NT

| | | |
|--|---|---|
| | 7 | 5 |
|--|---|---|

 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Charlton |
|------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 3 | 2 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|---|--|--|
| 1 | | |
|---|--|--|

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

 4. What percent of active construction sites were inspected more than once? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------------|
| TOWN OF CLIFTON PARK |
|----------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 3 | 5 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|---|---|
| | 1 | 5 |
|--|---|---|

 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|---|---|
| | 2 | 7 |
|--|---|---|

 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

 4. What percent of active construction sites were inspected more than once? NT

| | | |
|--|---|---|
| | 5 | 0 |
|--|---|---|

 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------|
| Town of Greenfield |
|--------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 2 | 3 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|---|---|
| | 0 | 3 |
|--|---|---|

 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|---|---|
| | 0 | 2 |
|--|---|---|

 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

 4. What percent of active construction sites were inspected more than once? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

9445612573

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Halfmoon |
|------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 7 | 5 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|--|---|
| | | 3 |
|--|--|---|

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|---|---|
| | 3 | 4 |
|--|---|---|

3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

4. What percent of active construction sites were inspected more than once? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|---------------|
| Town of Malta |
|---------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 8 | 6 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|--|---|
| | | 5 |
|--|--|---|

 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|---|---|
| | 2 | 8 |
|--|---|---|

 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|--|---|---|
| | 9 | 6 |
|--|---|---|

 %

 4. What percent of active construction sites were inspected more than once? NT

| | | |
|--|---|---|
| | 7 | 1 |
|--|---|---|

 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|-----------------------|
| City of Mechanicville |
|-----------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 5 | 1 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

4. What percent of active construction sites were inspected more than once? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

9445612573

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------|
| TOWN OF MILTON |
|----------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 0 | 8 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|--|---|
| | | 3 |
|--|--|---|
 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|--|---|
| | | 5 |
|--|--|---|
 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %
 4. What percent of active construction sites were inspected more than once? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %
 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT
 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

9445612573

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| T | O | W | N | O | F | M | O | R | E | A | U |
|---|---|---|---|---|---|---|---|---|---|---|---|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 5 | 8 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|---|--|--|
| 0 | | |
|---|--|--|

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|---|--|--|
| 6 | | |
|---|--|--|

3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

4. What percent of active construction sites were inspected more than once? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| Village of Round Lake |
|-----------------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 9 | 9 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|--|---|
| | | 0 |
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 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|---|--|--|
| 2 | | |
|---|--|--|

 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

 4. What percent of active construction sites were inspected more than once? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---|
| Saratoga County, Department of Public Works |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 2 | 0 | 9 |
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

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 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

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 3. What percent of active construction sites were inspected during this reporting period? NT

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 4. What percent of active construction sites were inspected more than once? NT

| | | | |
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| n | / | a | % |
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 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

9445612573

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Saratoga Springs

SPDES ID

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| N | Y | R | 2 | 0 | A | 2 | 1 | 6 |
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
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| | | 7 |
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2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|---|---|
| | 3 | 2 |
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3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|--|---|---|
| | 9 | 0 |
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 %

4. What percent of active construction sites were inspected more than once? NT

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| | 3 | 1 |
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 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

9445612573

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| South Glens Falls |
|-------------------|

SPDES ID

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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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| | | |
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|--|---|
| | | 0 |
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2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|--|---|
| | | 0 |
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3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 0 | 0 | 0 |
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 %

4. What percent of active construction sites were inspected more than once? NT

| | | |
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| 0 | 0 | 0 |
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 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------|
| Town of Stillwater |
|--------------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 4 | 9 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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| | | |
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
|--|---|---|
| | 1 | 2 |
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 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|--|---|
| | | 9 |
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 3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
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 %

 4. What percent of active construction sites were inspected more than once? NT

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| | 1 | 2 |
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 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| Village of Stillwater |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

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| | | 0 |
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 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
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| | | 0 |
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 3. What percent of active construction sites were inspected during this reporting period? NT

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 %

 4. What percent of active construction sites were inspected more than once? NT

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 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| Town of Waterford |
|-------------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 7 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

| | | |
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| | | 0 |
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 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
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| | | 0 |
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 3. What percent of active construction sites were inspected during this reporting period? NT

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|---|---|---|
| 1 | 0 | 0 |
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 %

 4. What percent of active construction sites were inspected more than once? NT

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| 1 | 0 | 0 |
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 %

 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

9445612573

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------------|
| Village of Waterford |
|----------------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 4 | 6 | 9 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

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|--|--|---|
| | | 0 |
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 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

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| | | 0 |
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 3. What percent of active construction sites were inspected during this reporting period? NT

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 4. What percent of active construction sites were inspected more than once? NT

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 %
 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT
 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| Town of Wilton |
|----------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 1 | 4 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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| | | |
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

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|--|--|---|
| | | 4 |
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2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

| | | |
|--|---|---|
| | 2 | 4 |
|--|---|---|

3. What percent of active construction sites were inspected during this reporting period? NT

| | | |
|---|---|---|
| 1 | 0 | 0 |
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 %

4. What percent of active construction sites were inspected more than once? NT

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|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

Address

City

Zip

Phone

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○ Library

Address

City

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○ Other

Address

City

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○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

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Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

7482169883

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

Address

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Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

Address

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Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

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7482169883

MS4 Annual Report Form

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

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○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

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7482169883

MS4 Annual Report Form

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

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○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

7482169883

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

Address

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Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

Address

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Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

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7482169883

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

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Submit additional pages as needed.

MS4/Coalition Office

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Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------------|
| Village of Ballston Spa |
|-------------------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 7 | 6 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village monitors 100% of active construction sites which disturb 1 acre or more of soil.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

No notices of violation or stop work orders were issued during this reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to enforce the Village of Ballston Spa Stormwater Construction Law;
Continue to require, review, and enforce projects that require a SWPPP;
Continue to inspect all such active sites in the Village of Ballston Spa.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Ballston |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 5 | 7 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Staff and Town Designated Engineer performed site visits on a quarterly basis to review SWPPP compliance. Reports and necessary repairs were provided to each site contractor and owner.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Inspections have been performed on 100% of all active sites on a quarterly basis.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 4 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to visit each construction site quarterly. Continue to maintain list of active construction sites to track activity and ensure compliance.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Charlton |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

continue review of development projects by PB and Town Engineer, continue municipal review of temporary mitigation efforts used during construction to combat erosion, review written storm water pollution prevention plans & erosion and sediment control plan drawings, issue approval of developer SWPPP and erosion plans, supervise field conditions, continue implementation of small construction program, continue inform developers of their obligations under Local Law #2 of 2007

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Only 1 project in Town during report period 1-acre disturbance. No prolonged erosion problems during construction. No erosion and sediment related complaints with permitted project. Highway Superintendent & Building Inspector typically at construction sites weekly & have been trained to review E&S provisions. Town Engineer typically reviews construction projects 4 times per year. Private inspector retained by developers conducts weekly reports and copy Town Engineer.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

continue with items listed above as applications are submitted for additional projects.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| TOWN OF CLIFTON PARK |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Review and comment on 100% of all SWPPP's.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

100% of all submitted plans were reviewed. 100% of all submitted plans were compliant NYSDEC and Town requirements prior to approval.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continued review of all SWPPP's by the Planning Dept. Stormwater Management Technician, Building Dept. and an outside engineering firm to ensure compliance.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town continues to review all development projects and enforces compliance with the NYS Stormwater Design Manual for water quality compliance. The Town reviews all applications for building permits and addresses the need for temporary and permanent erosion control measures. During the reporting period the Town issued 148 building permits (most all less than 1 acre disturbance) and three on going large developments (over one acre with active SWPPP's).

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Town personnel understand the requirements of the Construction Site Runoff and Post Construction Runoff Control and follow a standard program within the Town to review and track all new construction projects for the initial planning and application to the final construction. The Town regularly inspects active sites and maintains records of inspections and violations.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to implement and follow the program that is established in the Town.

7935007876

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Stormwater Control local law authorizes the enforcement to reduce runoff from construction sites. Copies of all inspection reports completed by the developer's inspector are received via email and kept on record by the SMO. Active construction sites are inspected by the SMO on a regular basis and after heavy rainfall events. The Town's consulting engineering firm reviews all SWPPPs for construction projects during the review process. A pre-construction meeting is held with all

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town's local law is continually enforced. Inspections on construction sites are performed regularly by the SMO. Copies of inspection reports performed by developer's certified inspector are received weekly for all active sites and maintained on record by the SMO. When a complaint or violation is detected, the SMO ensures that compliance is obtained in a reasonable time frame.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to review all SWPPPs for proposed projects, pre-construction meetings will be held, construction site inspections will occur, enforcement actions will be taken when necessary to ensure compliance with regulations.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Malta |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

MS4 will inspect each active construction site a least once per report year, will maintain an inventory of all active construction sites, will maintain an archive of all inspection records and enforcement actions, and will record all relevant employee training.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town inspected 27 of the 28 active construction sites, an increase from the prior reporting year. Of the 28 sites inspected, 19 of them were inspected multiple times. The Town strives to inspect all sites in a year and will continue working towards this goal. The program had only one stormwater management officer to inspect active construction sites during the active construction season for the the season. The town reduced its stormwater management staffing to one in March 2019.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will periodically review our list of active construction sites to ensure that inspections are distributed among them. 100% of all active construction sites will be inspected this reporting year.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The measurable goal tracked was the number of active construction sites.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Two sites were authorized for disturbance of over an acre during the reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

SWPPPs will continue to be reviewed, and projects inspected and tracked.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| TOWN OF MILTON |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Review and comment on all plans subject to the General Permit that require a SWPPP.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

All plans subject to the General Permit and requiring a SWPPP met the requirements of the NYSDEC Design Manual, General Permit and Town regulations.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continued review of all project SWPPP by Town staff and consultants hired by the Town

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| TOWN OF MOREAU |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Continue coordinated review of construction plans and modify process as necessary to ensure conformance with the local law and any/all applicable NYS Technical Standards.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Construction Plan reviews were performed by a Third-Party Contractor; LaBerge Group. NYSDEC SWPPP Review Form is being used to document these reviews. LaBerge Group reviewed one (1) SWPPPs for applicant projects; completed SWPPP Review Forms are included in each project's file at the Building Department Offices. This Measurable Goal has been met this reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town of Moreau SWPPP Review SOP will continue to be implemented as described above.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Village of Round Lake |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

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| Require SWPPP submittal as part of overall project application & approval process for any/all project/s that will disturb one acre or more; conduct technical & substantive review of all SWPPPs submitted; conduct (minimum) 3 inspections of any/all active sites within Village jurisdiction (typically 1) at ground-breaking; 2) interim; 3) final inspection for permanent stabilization. More inspections as needed. |
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B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

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| The two (2) active sites within Village jurisdiction were inspected more than once during the reporting period. Both issued Notices of Violation for SWPPP implementation deficiencies. Timely, effective corrective actions were verified by the SMO (acting) |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

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| Continue to implement above cited protocols, meeting requirements as outline in SPDES GP-0-15-003; Part VII.A.4). |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

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| Saratoga County, Department of Public Works |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

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| To ensure that all County of Saratoga County capital construction projects which require it, comply with the NYS DEC SPDES GP-0-10-001 (or as amended or revised) Permit. |
|---|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

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| No active projects/qualifying construction projects this reporting-year. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

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| Continue self-inspection and compliance commitments for all Saratoga County capital projects requiring GP-0-10-001 coverage and/or Local MS4 construction jurisdiction. |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

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| City of Saratoga Springs |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

- Require SWPPP for construction activity and review plan for compliance with state & local regs.
- Ensure construction sites are regularly inspected by owner as well as periodically by the MS4.
- Enforce local law for land disturbance requiring erosion/sediment control & pollution prevention.
- Verify excavation/site contractor has received legitimate training in erosion & sediment control.
- Require project owner, site contractor, & design engineer to attend pre-construction meeting.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

- (11) SWPPP's for land disturbance were received by the City Engineer for review and approval.
- (40) site inspections by City staff in addition to review of project owner's inspection reports.
- City Code Chapter 242 codifies requirements for erosion/sediment control & pollution prevention.
- E&SC training certificate required part of SWPPP document. Training notices sent to contractors.
- (7) pre-construction meetings held for projects of 1 acre or more requiring a SWPPP.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

- City Engineer will continue to review SWPPP's for construction & other land disturbance activities.
- City Engineer will continue to monitor and inspect construction sites for SWPPP compliance.
- Local law requiring erosion/sediment control & pollution prevention will be administered.
- City Engineer will verify trained site contractors & provide notification of E&SC training classes.
- City Engineer will conduct pre-construction meetings for projects requiring a SWPPP.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| South Glens Falls |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Require SWPPPs be submitted for all projects disturbing 1 or more acres in the Village of South Glens Falls.
Inspect all active sites with approved SWPPPs at least once each reporting year.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

All required SWPPPs were reviewed.
All active sites w/SWPPPs (1) were inspected at least once this reporting year.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue ongoing implementation of measures detailed in the SGF SWMP Plan for SWPPP requirements, site inspections, and enforcement of the local SW Construction law.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

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| Town of Stillwater |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

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| As of November 2016 the Town of Stillwater has developed their Stormwater Management Plan (SWMP) and passed the Stormwater Management Local Law. |
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B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

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| The Stormwater Management Local Law and Stormwater Management Plan were adopted by the Town Board in November of 2016. Continued implementation of the program is being undertaken by the Stormwater Committee. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

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| Continue creation of Standard Operation Procedures for Coalition members to create a consistent approach The Town has adopted the SWMP in November 2016. The Town of Stillwater intends to continue review of the current Zoning Code, and begin analysis of necessary changes and adaptations that may be necessary to ensure continuity with the Stormwater Local Law passed on November 2016. |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

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| Village of Stillwater |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

As of November 2016 the Village of Stillwater has developed their Stormwater Management Plan (SWMP) and passed the Stormwater Management Local Law.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Stormwater Management Local Law and Stormwater Management Plan were adopted by the Village Board of Trustees in November of 2016. Continued implementation of the program is being undertaken by the Town of Stillwater through an Inter-municipal Agreement.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue creation of Standard Operation Procedures for Coalition members to create a consistent approach
The Village completed the drafting of the SWMP in November 2016. Continue creation of Standard Operation Procedures for Coalition members to create a consistent approach

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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Name of MS4/Coalition

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| Town of Waterford |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town continues to review SWPPPS for 100% of all projects disturbing 1 or more acres of land to ensure compliance with the Town of Waterford local stormwater law and NYSDEC regulations. The Town also records any notices of violation and/or stop work orders issued in relation to active/approved sites.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Two projects, disturbing under 1 acre, submitted erosion and sediment control plans and were visually inspected weekly.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to review all SWPPPS, inspect active construction sites, and require stormwater and erosion and sediment control practices on construction sites of all sizes.

7935007876

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Conduct review of 100% of proposed SWPPPs submitted for Village approval. Conduct one formal compliance inspection annually of each active construction site within the Village that disturbs one or more acres.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

N/A. There were no SWPPPs submitted. There were no active or approved construction projects within the Village which disturbed one or more acres.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Conduct a review of 100% of SWPPPs submitted for Village approval. Conduct one formal compliance inspection of any construction project within the Village that disturbs one or more acres.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Wilton |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|--|
| SWPPP Review - Goal that 100% of SWPPP's meet NYS Standards. |
|--|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|--|
| 100% of submitted plans were reviewed. After necessary changes and revisions, the plans were approved. |
|--|

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|--|
| Continue to review and comment on SWPPP's as they are submitted to the Town, with continued goal of 100% of SWPPP's meeting all NYS Standards. |
|--|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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SPDES ID

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Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
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1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained | | | | | | | | | |
|--|--|------------------|-----------------------|---|--|--|--|--|--|--|--|--|
| <input type="checkbox"/> Alternative Practices | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="checkbox"/> Filter Systems | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="checkbox"/> Infiltration Basins | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="checkbox"/> Open Channels | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="checkbox"/> Ponds | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="checkbox"/> Wetlands | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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| <input type="checkbox"/> Other | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>0</td></tr></table> | | | 0 | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table> | | | |
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2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes
- Overlay Districts
- Zoning
- None
- Watershed Plans
- Municipal Comprehensive Plans
- Open Space Preservation Program
- Local Law or Ordinance
- Land Use Regulation/Zoning
- Other Comprehensive Plan

● Other:

P l a n n i n g B o a r d R e v i e w s

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Charlton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 2 |
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Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|---|--|--|
| 1 | | |
|---|--|--|

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained | | | | | | |
|--|--|------------------|-----------------------|--|---|---|---|--|---|
| <input checked="" type="radio"/> Alternative Practices | <table border="1" style="display: inline-table;"><tr><td></td><td>1</td></tr></table> | | 1 | <table border="1" style="display: inline-table;"><tr><td></td><td>0</td></tr></table> | | 0 | <table border="1" style="display: inline-table;"><tr><td></td><td>0</td></tr></table> | | 0 |
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| <input checked="" type="radio"/> Filter Systems | <table border="1" style="display: inline-table;"><tr><td></td><td>1</td></tr></table> | | 1 | <table border="1" style="display: inline-table;"><tr><td></td><td>1</td></tr></table> | | 1 | <table border="1" style="display: inline-table;"><tr><td></td><td>0</td></tr></table> | | 0 |
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| <input checked="" type="radio"/> Infiltration Basins | <table border="1" style="display: inline-table;"><tr><td></td><td>2</td></tr></table> | | 2 | <table border="1" style="display: inline-table;"><tr><td></td><td>0</td></tr></table> | | 0 | <table border="1" style="display: inline-table;"><tr><td></td><td>0</td></tr></table> | | 0 |
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| <input checked="" type="radio"/> Open Channels | <table border="1" style="display: inline-table;"><tr><td>6</td><td>5</td></tr></table> | 6 | 5 | <table border="1" style="display: inline-table;"><tr><td>6</td><td>5</td></tr></table> | 6 | 5 | <table border="1" style="display: inline-table;"><tr><td></td><td>0</td></tr></table> | | 0 |
| 6 | 5 | | | | | | | | |
| 6 | 5 | | | | | | | | |
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| <input checked="" type="radio"/> Ponds | <table border="1" style="display: inline-table;"><tr><td></td><td>2</td></tr></table> | | 2 | <table border="1" style="display: inline-table;"><tr><td></td><td>2</td></tr></table> | | 2 | <table border="1" style="display: inline-table;"><tr><td></td><td>0</td></tr></table> | | 0 |
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| <input type="radio"/> Wetlands | <table border="1" style="display: inline-table;"><tr><td></td><td></td></tr></table> | | | <table border="1" style="display: inline-table;"><tr><td></td><td></td></tr></table> | | | <table border="1" style="display: inline-table;"><tr><td></td><td></td></tr></table> | | |
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| <input type="radio"/> Other | <table border="1" style="display: inline-table;"><tr><td></td><td></td></tr></table> | | | <table border="1" style="display: inline-table;"><tr><td></td><td></td></tr></table> | | | <table border="1" style="display: inline-table;"><tr><td></td><td></td></tr></table> | | |
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2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes
- Municipal Comprehensive Plans
- Overlay Districts
- Open Space Preservation Program
- Zoning
- Local Law or Ordinance
- None
- Land Use Regulation/Zoning
- Watershed Plans
- Other Comprehensive Plan

Other:

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 0

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition TOWN OF CLIFTON PARK

SPDES ID
N Y R 2 0 A 0 3 5

Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 1

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained |
|--|---|---|---|
| <input checked="" type="radio"/> Alternative Practices | 6 | 1 | 0 |
| <input checked="" type="radio"/> Filter Systems | 5 | 1 | 0 |
| <input checked="" type="radio"/> Infiltration Basins | 4 4 | 1 0 | 0 |
| <input checked="" type="radio"/> Open Channels | 3 | 1 | 0 |
| <input checked="" type="radio"/> Ponds | 4 3 | 2 0 | 6 |
| <input type="radio"/> Wetlands | | | |
| <input type="radio"/> Other | | | |

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes
- Municipal Comprehensive Plans
- Overlay Districts
- Open Space Preservation Program
- Zoning
- Local Law or Ordinance
- None
- Land Use Regulation/Zoning
- Watershed Plans
- Other Comprehensive Plan

Other:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition South Glens Falls

SPDES ID
NYR20A091

Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

| | # Inventoried | # Inspections | # Times Maintained |
|--|---|---|---|
| <input type="radio"/> Alternative Practices | | | 0 |
| <input type="radio"/> Filter Systems | | | |
| <input checked="" type="radio"/> Infiltration Basins | 5 | 3 | 5 |
| <input type="radio"/> Open Channels | | | |
| <input type="radio"/> Ponds | | | |
| <input type="radio"/> Wetlands | | | |
| <input type="radio"/> Other | | | |

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes
- Municipal Comprehensive Plans
- Overlay Districts
- Open Space Preservation Program
- Zoning
- Local Law or Ordinance
- None
- Land Use Regulation/Zoning
- Watershed Plans
- Other Comprehensive Plan

Other:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Village of Ballston Spa |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 7 | 6 |
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
|--|--|---|
| | | 0 |
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

| | | |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Ballston |
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SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
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| | | 0 |
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Charlton |
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SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
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| | | 0 |
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------------|
| TOWN OF CLIFTON PARK |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 5 |
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- 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

- 4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

- 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

- 4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
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- 5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Greenfield |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 2 | 3 |
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
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| | | 0 |
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Halfmoon |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 7 | 5 |
|---|---|---|---|---|---|---|---|---|

- 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No
- 4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No
- 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No
- 4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|
- 5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---------------|
| Town of Malta |
|---------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 8 | 6 |
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| City of Mechanicville |
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SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| TOWN OF MILTON |
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SPDES ID

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- 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

- 4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

- 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

- 4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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- 5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| TOWN OF MOREAU |
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SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| Village of Round Lake |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|

- 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

- 4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

- 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

- 4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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- 5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---|
| Saratoga County, Department of Public Works |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 2 | 0 | 9 |
|---|---|---|---|---|---|---|---|---|

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------------|
| City of Saratoga Springs |
|--------------------------|

SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| South Glens Falls |
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SPDES ID

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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------|
| Town of Stillwater |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 5 | 4 | 9 |
|---|---|---|---|---|---|---|---|---|

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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| | | 8 |
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| Village of Stillwater |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 5 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

- 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

- 4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

- 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

- 4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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| | | 0 |
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- 5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| Town of Waterford |
|-------------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 7 |
|---|---|---|---|---|---|---|---|---|

- 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No

- 4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No

- 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No

- 4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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- 5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------------|
| Village of Waterford |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 4 | 6 | 9 |
|---|---|---|---|---|---|---|---|---|

- 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
 Yes No
- 4b. Does the MS4 have a banking and credit system for stormwater management practices?
 Yes No
- 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
 Yes No
- 4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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| | | 0 |
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- 5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| Town of Wilton |
|----------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------------|
| Village of Ballston Spa |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|--|
| Receive and review 100% of all SWPPPs for applicable construction/development projects; Receive, document and respond to all public complaints regarding stormwater pollution and construction. |
|--|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|--|
| No applicable construction/development projects were either active or seeking approval in the Village of Ballston Spa during this reporting period; The Village of Ballston Spa does not own, operate or maintain any Post-Construction Stormwater Management Practices (SMPs). |
|--|

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|---|
| Receive and review 100% of all SWPPPs for applicable construction/development projects; Receive, document and respond to all public complaints regard stormwater pollution and construction; |
|---|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Ballston |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 5 | 7 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Continued to update the SMP Excel database of Town-maintained SMPs. Planning Board activity was monitored and the Board requires stormwater maintenance agreements for all SMPs that will be privately maintained.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Planning Board activity is continually monitored. The Highway Department has purchased GPS and Diamond Maps to map out Town Assets. We are able to map out stormwater basins and outfalls, along with other town assets such as roadways, water mains, valves and hydrants.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to update the SMP Excel database of Town-maintained SMPs. Add privately maintained SMPs to spreadsheet. Monitor Planning Board activity and require stormwater maintenance agreements for all SMPs that will be privately maintained. Continue to develop inventory of town assets as described above.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.

Continue to ensure the use of permanent stormwater management treatment facilities for applicable development projects, institute perpetual care agreements or require public dedication to promote long term health of treatment facilities, continue to inspect exist. storm management facilities concurrent with dry weather outfall observations.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Charlton has had only two major residential development projects in at least 20 years. Currently there are only eight modern era stormwater management facilities town wide. The oldest of those facilities is less than ten years old. Their designs are modern and they are in working condition. Outflow from those storm facilities is observed at least 2 times per year and is typically clean and free of sediment or pollutants.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

1 major subdivision project continues to be under construction. The Town has inspected the site numerous times to ensure compliance with their SWPPs. The Town also receives reports from private inspector. The Town hired a new Zoning Officer in 2019 and a new Highway Super in 2018. Both have been briefed on MS4 issues by Town Engineer.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------------|
| TOWN OF CLIFTON PARK |
|----------------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 5 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Continue Post Construction Inspection and Maintenance Program of all Stormwater Management Practices. In 2019 the Saratoga County Intermunicipal Stormwater Management Program input the SMPs in ARCGIS. Inspection and Observation Forms have been added to Survey 123 to link to ARCGIS.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The observations generate a list of action items that will require follow up.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to inspect stormwater management areas, record observations, prioritize, and create follow up actions.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------|
| Town of Greenfield |
|--------------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 2 | 3 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town has inventoried all existing Post-Construction Runoff Control facilities and has established a maintenance plan for each location. As new projects are dedicated within the Town the post-Construction Runoff Control data base will be updated to add any new facilities to the maintenance schedule.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town Highway Department has been keeping logs of maintenance visits to all existing locations and has established a program to monitor and repair locations as needed.

C. How many times was this observation measured or evaluated in this reporting period?

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| | | | 2 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to follow the program established within the Town.

1610116332

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Halfmoon |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 7 | 5 |
|---|---|---|---|---|---|---|---|---|

6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town adopted and implemented a town-wide ordinance to authorize enforcement to reduce pollutant runoff from active construction sites. The SMO is responsible for the inspection of such sites to ensure proper operation and maintenance of requirements under current regulations.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

All active construction sites are inspected prior to the Notice of Termination being signed. When necessary a maintenance bond is held by the Town to ensure the BMPs function appropriately. The Town Highway Dept. maintains records of post-construction practices that have been inspected and received maintenance in the reporting year.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Prior to dedication to the Town, a final inspection is performed of all BMPs. Inspections and maintenance will continue to be performed by the Town Highway Dept. All records are kept for such actions.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Malta | | | | | | | | | |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 8 | 6 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The town will develop a complete inventory of municipally owned stormwater management practices and those privately owned that discharge to the MS4. Periodically inspect and maintain an archive of inspections.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

No treatment practices have been inventoried or inspected but the town has begun mapping the stormwater management practices.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The town will continue mapping its facilities and plans to continue research to determine which facilities the town is responsible for maintaining.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| City of Mechanicville |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The measurable goal tracked was the number of permanent stormwater management practice inspections.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The City's water plant retention pond was fully rehabbed this reporting year. Two privately owned retention ponds within the MS4 boundaries was inspected and cleaned.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The City will inspect their stormwater management practice in the next reporting cycle.

1610116332

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| TOWN OF MILTON |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 0 | 8 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Spring 2009: review asbuilts between 3/10/03 and passage of LL2-2006 (Strmwater Local Law) and determine which require O&M Manuals
Ongoing:Continue to collect relevant record documents for conversion into digital data

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Coordinating with County with inventorying, mapping and creation/completion of GIS database of town infrastructure.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to inventory and locate existing infrastructure. County targets completion of existing mapping in 2020. Expected once base information assembled by County, Town will then maintain/update.

1610116332

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| TOWN OF MOREAU |
|----------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 5 | 8 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Updating the inventory of Post-Construction SMPs has been delayed pending finalization of the Draft MS4 Permit. The ISWM Program will provide an inventory to the Town of Moreau, based on the NYSDEC CGP Database.
Train new Town officials on LID, BSD, and Green Infrastructure.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

100% of relevant staff have received 50% of necessary training to use the ISWM Program Stormwater GIS and mobile data collection (tablets)..

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

A map that indicates the location of post-construction stormwater management practices (SMPs) in the Town will be developed along with a tracking worksheet for recording the type of SMP, owner information, inspection date, result and percent of SMPs inspected with satisfactory first time inspection findings.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Village of Round Lake |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|--|
| N/A. The Village of Round Lake does not own, operate, or maintain any SMPs as of this report. However, the MS4 collection/conveyance system is continuously inspected each year. |
|--|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|--|
| N/A. The Village of Round Lake does not own, operate, or maintain any SMPs as of this report. However, the MS4 collection/conveyance system is continuously inspected each year. |
|--|

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|--|
| N/A. The Village of Round Lake does not own, operate, or maintain any SMPs as of this report. However, the MS4 collection/conveyance system is continuously inspected each year. |
|--|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---|
| Saratoga County, Department of Public Works |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 2 | 0 | 9 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

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|---|
| Inspection and maintenance of applicable SMPs on County property or within the County Right-of-Way. |
|---|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|---|
| 8 of 8 SMPs currently on-line/in use were inspected this reporting period. 1 maintenance action was needed. NOTE: 6 of 8 SMPs were installed/constructed, permanently stabilized and put into service in reporting Year-9, (2011-12); the SMP Operations & Maintenance Plan for these practices call for annual inspection in/following year-2 of continuous operation. |
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C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

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| Continued implementation of SMP inspection program. |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------------|
| City of Saratoga Springs |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 2 | 1 | 6 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

- Maintain current inventory of City and privately owned stormwater management practices.
- Ensure SWPPP meets water quantity and quality standards set by NYS-DEC Design Manual.
- Enforce a local law for development which requires post-construction management of storm runoff.
- Ensure long-term maintenance and operation of stormwater management practices.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

- (31) new Stormwater Management Practices were inventoried and added to database.
- (11) SWPPP's for land disturbance were received by the City Engineer for review and approval.
- City Code Chapter 242 sets requirements for post-construction management of storm runoff.
- Formalized owner maintenance agreement required for private stormwater management practices.
- City-owned stormwater management practices inspected & maintained by Dept. of Public Works.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

- Newly installed stormwater management practices will be inventoried and added to database.
- City Engineer will continue to review SWPPP's for development and land disturbing activities.
- Local law requiring post-construction stormwater management practices will be administered.
- Require private stormwater management practices to have owner maintenance agreements.
- City will continue to inspect and maintain City owned stormwater management practices.

1610116332

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| South Glens Falls |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Inventory, inspect and /or maintain post-construction SMPs as required by the O&M Plan for each.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

7SMPs were inventoried, 5 were inspected and 4 maintenance actions were taken.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue implementation of MM5 measures as detailed in SGF SWMP plan.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Town of Stillwater |
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SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

As of this reporting year the Town of Stillwater has developed their Stormwater Management Plan (SWMP) and continues with implementation. The Town adopted the Stormwater Management Local Law in November 2016.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town Highway Department has maintained detailed records of BMPs that were monitored and maintained during this reporting year. A total of 64.5 cubic yards was removed via street sweeping, and 169 linear yards of open swales were maintained and hydroseeded. 50 cubic yards of debris was removed through culvert cleaning and maintenance

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town has adopted a Drainage District Local Law to establish districting for funding the inspection and maintenance of post-construction practices. Thus far, two Drainage Districts have been created. Continued creation of Standard Operation Procedures for Coalition members to create a consistent approach

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Stillwater

SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village of Stillwater has developed their Stormwater Management Plan (SWMP) and continues with implementation.
The Village adopted the Stormwater Management Local Law in November 2016.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Village Highway Department has maintained detailed records of BMPs that were monitored and maintained during this reporting year. A total of 2.5 cubic yards of material was removed from catch basins and street sweeping, and 6.8 linear miles of streets were maintained.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The watersheds were mapped and a full outfall reconnaissance was undertaken through the coalition that the Village is a member, the Saratoga County ISWM Program. The information obtained from this will be mapped with GIS and made available to all members of the coalition.
The Village of Stillwater is working on the implementation of their Stormwater Management Plan (SWMP).

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| Town of Waterford |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 7 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town has a robust inspection and maintenance program for all ditches, catch basins, and stormwater management practices.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has two stormwater management ponds. Both ponds were inspected, with one pond (Gadwell) needing and receiving maintenance a total of 3 times this reporting year.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to implement and track operations related to its maintenance program.

1610116332

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The question of MS4 ownership within the Village remains in doubt. All existing stormwater infrastructure was constructed by the Town of Waterford Sewer District #1 as a result of an Order on Consent issued by NYS DEC (c1994-5 & 2000). At this time the Village program entails assuring new construction that disturbs one or more acres complies with the Local Stormwater Construction Law and the Post-Construction requirements thereof

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Because no projects were proposed or approved within the Village the past reporting year which disturbed one or more acres, no observations could be made.

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Application and Enforcement of the Local Stormwater Construction Law and the Post-Construction requirements by the Village Planning Board, should a project propose to disturb one or more acres.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| Town of Wilton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 1 | 4 |
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6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|--|
| Continue with post construction stormwater practices, inspections and maintenance as required. |
|--|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|--|
| Continue inspections with reported condition and maintenance requirements as needed. |
|--|

C. How many times was this observation measured or evaluated in this reporting period?

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

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| Post construction practices needed to the Town will continue to be inspected and maintained as required. |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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| Village of Ballston Spa |
|-------------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 7 | 6 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

**Self-Assessment
Operation/Activity/Facility
performed within the past 3**

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>years?</u> | |
|---|---|--|------------------------------|--|
| Street Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Bridge Maintenance..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Winter Road Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Salt Storage..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Solid Waste Management..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Right of Way Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Marine Operations..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Hydrologic Habitat Modification..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Parks and Open Space..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Municipal Building..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Stormwater System Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Other..... | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 5 | 7 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 3 | 2 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|---|--|--|
| 1 | | |
|---|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------------|
| TOWN OF CLIFTON PARK |
|----------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 3 | 5 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 2 | 3 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Halfmoon |
|------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 7 | 5 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|----------------------------------|---|----------------------------------|
| | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|---------------|
| Town of Malta |
|---------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 8 | 6 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

**Self-Assessment
Operation/Activity/Facility
performed within the past 3**

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>years?</u> | |
|---|---|--|---|--|
| Street Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Bridge Maintenance..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Winter Road Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Salt Storage..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Solid Waste Management..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Right of Way Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Marine Operations..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Hydrologic Habitat Modification..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Parks and Open Space..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Municipal Building..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Stormwater System Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 5 | 1 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|-------------------------------------|---|-------------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Bridge Maintenance..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Salt Storage..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Right of Way Maintenance..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------|
| TOWN OF MILTON |
|----------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 0 | 8 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|--------------------------|---|-------------------------------------|
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Bridge Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------|
| TOWN OF MOREAU |
|----------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 5 | 8 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

**Self-Assessment
Operation/Activity/Facility
performed within the past 3**

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>years?</u> | |
|---|--------------------------------------|-------------------------------------|--------------------------------------|-------------------------------------|
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Bridge Maintenance..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 9 | 9 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Self-Assessment</u> <u>Operation/Activity/Facility</u> <u>performed within the past 3</u> <u>years?</u> | | | |
|---|---|-------------------------------------|---------------------------|-------------------------------------|
| | <u>Addressed in SWMP?</u> | | | |
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Bridge Maintenance..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Salt Storage..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Parks and Open Space..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 0

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Saratoga County, Department of Public Works

SPDES ID
N Y R 2 0 A 2 0 9

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

Self-Assessment
Operation/Activity/Facility
performed within the past 3

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>years?</u> | |
|---|---|--|---|--|
| Street Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Bridge Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Winter Road Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Salt Storage..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Solid Waste Management..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Right of Way Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Marine Operations..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Hydrologic Habitat Modification..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Parks and Open Space..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Municipal Building..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Stormwater System Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Vehicle and Fleet Maintenance..... | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------------|
| City of Saratoga Springs |
|--------------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 1 | 6 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|----------------------------------|---|-------------------------------------|
| | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Solid Waste Management..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Other..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 4 | 9 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Other..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|----------------------------------|---|----------------------------------|
| | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Solid Waste Management..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Other..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 3 | 7 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|--------------------------------------|----------------------------------|---|----------------------------------|
| | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID
N Y R 2 0 A 4 6 9

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Self-Assessment</u> <u>Operation/Activity/Facility</u> <u>performed within the past 3</u> <u>years?</u> | | | |
|---|---|-------------------------------------|---------------------------|-------------------------------------|
| | <u>Addressed in SWMP?</u> | | | |
| Street Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Bridge Maintenance..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Winter Road Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Salt Storage..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Solid Waste Management..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| New Municipal Construction and Land Disturbance.. | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Right of Way Maintenance..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Marine Operations..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Hydrologic Habitat Modification..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Parks and Open Space..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Municipal Building..... | <input checked="" type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Stormwater System Maintenance..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Vehicle and Fleet Maintenance..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| Other..... | <input type="radio"/> Yes | <input checked="" type="radio"/> No | <input type="radio"/> Yes | <input checked="" type="radio"/> No |

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------|
| Town of Wilton |
|----------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 1 | 4 |
|---|---|---|---|---|---|---|---|---|

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
|--|--|--|

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

| <u>Operation/Activity/Facility</u> | <u>Addressed in SWMP?</u> | | <u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u> | |
|---|----------------------------------|----------------------------------|---|----------------------------------|
| | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> Yes | <input type="radio"/> No |
| Street Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Bridge Maintenance..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Winter Road Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Salt Storage..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Solid Waste Management..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| New Municipal Construction and Land Disturbance.. | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Right of Way Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Marine Operations..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hydrologic Habitat Modification..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Parks and Open Space..... | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Municipal Building..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Stormwater System Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Vehicle and Fleet Maintenance..... | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Other..... | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition:

| |
|-------------------------|
| Village of Ballston Spa |
|-------------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 7 | 6 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|---|---|---|---|
| | 7 | . | 7 | 5 |
|--|---|---|---|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 4 | 0 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 4 | 0 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied # Acres

| | | | | | |
|--|--|--|--|---|--|
| | | | | . | |
|--|--|--|--|---|--|

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|--|--|
| | |
|--|--|

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| | |
|--|--|
| | |
|--|--|

 /

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|---|---|
| | 4 | 3 |
|--|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Ballston |
|------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 5 | 7 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 5 | 4 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 4 | 6 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 3 | 0 |
|--|--|--|---|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|--|--|---|---|--|
| | | | 0 | . | |
|--|--|--|---|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|--|---|
| | 3 |
|--|---|

 /

| | | |
|--|---|---|
| | 2 | 2 |
|--|---|---|

 /

| | | | | |
|--|---|---|---|---|
| | 2 | 0 | 1 | 7 |
|--|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|------------------|
| Town of Charlton |
|------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 3 | 2 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 1 | 5 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 2 | 0 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 4 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied # Acres

| | | | | | | |
|--|--|--|--|--|---|--|
| | | | | | . | |
|--|--|--|--|--|---|--|

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 0 | 4 |
|---|---|

 /

| | |
|---|---|
| 0 | 1 |
|---|---|

 /

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 9 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|---|---|
| | 2 | 5 |
|--|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------------|
| TOWN OF CLIFTON PARK |
|----------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 3 | 5 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|---|---|
| | | | 2 | 4 |
|--|--|--|---|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|---|---|---|
| | | 4 | 5 | 4 |
|--|--|---|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|---|---|---|
| | | 2 | 5 | 0 |
|--|--|---|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 6 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|---|---|---|---|
| | 3 | 2 | 0 | 0 |
|--|---|---|---|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|--|---|---|---|---|
| | | 9 | 3 | . | 8 |
|--|--|---|---|---|---|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 0 | 2 |
|---|---|

 /

| | |
|---|---|
| 2 | 0 |
|---|---|

 /

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|---|---|
| | 5 | 0 |
|--|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------|
| Town of Greenfield |
|--------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 2 | 3 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 2 | 4 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 7 |
|--|--|--|--|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 1 | 5 |
|--|--|--|---|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|--|--|--|---|--|
| | | | | . | |
|--|--|--|--|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|--|--|
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| | |
|--|--|
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 /

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 2 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
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| | 6 | 7 |
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6445134838

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 0

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 7 | 5 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|---|---|---|
| | | 2 | . | 5 |
|--|--|---|---|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|---|---|---|---|---|
| 1 | 3 | 7 | . | 5 |
|---|---|---|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 9 | 7 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|---|---|---|
| | | 6 | 2 | 2 |
|--|--|---|---|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|--|---|---|---|---|
| | | 1 | 0 | . | 0 |
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3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
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4. What was the date of the last training?

| | | | | | | | | | |
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| 0 | 2 | / | 2 | 0 | / | 2 | 0 | 2 | 0 |
|---|---|---|---|---|---|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

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| | | 2 |
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | | |
|---|---|---|---|
| 1 | 0 | 0 | % |
|---|---|---|---|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of Malta

SPDES ID
NYR20A086

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 7
- Streets Swept (Number of miles X Number of times swept) # Miles 442
- Catch Basins Inspected and Cleaned Where Necessary # 523
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 13
- Phosphorus Applied In Chemical Fertilizer # Lbs.
- Nitrogen Applied In Chemical Fertilizer # Lbs. 3095
- Pesticide/Herbicide Applied # Acres 12.3
(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period? 3

4. What was the date of the last training? 02 / 20 / 2020

5. How many municipal employees have been trained in this reporting period? 3

6. What percent of municipal employees in relevant positions and departments receive stormwater management training? 100 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|-----------------------|
| City of Mechanicville |
|-----------------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 5 | 1 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|---|---|---|
| | | 8 | 6 | 0 |
|--|--|---|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 3 | 6 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 3 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied # Acres

| | | | | | |
|--|--|--|---|---|--|
| | | | 0 | . | |
|--|--|--|---|---|--|

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
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| | | | | 0 |
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4. What was the date of the last training?

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5. How many municipal employees have been trained in this reporting period?

| | | |
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| | | 0 |
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|--|---|
| | | 0 |
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 %

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|----------------|
| TOWN OF MILTON |
|----------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 0 | 8 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
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| | | | | 0 |
|--|--|--|--|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|--|--|---|---|--|
| | | | 0 | . | |
|--|--|--|---|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

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| | | | | 0 |
|--|--|--|--|---|

4. What was the date of the last training?

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| 0 | 2 |
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|---|---|
| 2 | 3 |
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| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 1 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 0 |
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|--|---|
| | | 0 |
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6445134838

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---|---|---|---|---|---|---|---|---|---|---|---|
| T | O | W | N | O | F | M | O | R | E | A | U |
|---|---|---|---|---|---|---|---|---|---|---|---|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 5 | 8 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
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| 9 | 0 | | | |
|---|---|--|--|--|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | | |
|--|--|--|--|--|---|--|
| | | | | | . | |
|--|--|--|--|--|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

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|---|--|--|--|--|
| 0 | | | | |
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4. What was the date of the last training?

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5. How many municipal employees have been trained in this reporting period?

| | | |
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|---|---|--|
| 8 | 5 | |
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 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 9 | 9 |
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2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 1 | 2 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 6 | 0 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|--|---|---|---|--|
| | | 0 | 0 | . | |
|--|--|---|---|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

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4. What was the date of the last training?

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| | | | |
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| 2 | 0 | 2 | 0 |
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5. How many municipal employees have been trained in this reporting period?

| | | |
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| | | 1 |
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|---|---|
| | 2 | 0 |
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 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition:

| |
|---|
| Saratoga County, Department of Public Works |
|---|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 0 | 9 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 6 |
|--|--|--|--|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 6 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied # Acres

| | | | | | | |
|--|--|--|--|--|---|--|
| | | | | | . | |
|--|--|--|--|--|---|--|

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|

4. What was the date of the last training?

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| 0 | 4 |
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| 2 | 7 |
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| | | | |
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| 2 | 0 | 1 | 4 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 0 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|---|---|---|
| 1 | 0 | 0 |
|---|---|---|

 %

6445134838

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------------|
| City of Saratoga Springs |
|--------------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 1 | 6 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|---|---|
| | | | 1 | 0 |
|--|--|--|---|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|---|---|---|
| | | 2 | 9 | 2 |
|--|--|---|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | |
|--|--|---|---|
| | | 7 | 7 |
|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|---|---|
| | | | 2 | 1 |
|--|--|--|---|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|---|---|---|
| | | 7 | 4 | 0 |
|--|--|---|---|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|--|---|---|---|---|
| | | 3 | 8 | . | 4 |
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3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

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4. What was the date of the last training?

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| 2 | 0 | 1 | 6 |
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5. How many municipal employees have been trained in this reporting period?

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|--|--|---|
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
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| | 9 | 0 |
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6445134838

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres
- Streets Swept (Number of miles X Number of times swept) # Miles
- Catch Basins Inspected and Cleaned Where Necessary #
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #
- Phosphorus Applied In Chemical Fertilizer # Lbs.
- Nitrogen Applied In Chemical Fertilizer # Lbs.
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres .

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

4. What was the date of the last training?

/ /

5. How many municipal employees have been trained in this reporting period?

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

%

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

| | | | |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|--------------------|
| Town of Stillwater |
|--------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 5 | 4 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 3 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 4 | 0 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|---|---|---|
| | | 8 | 0 | 0 |
|--|--|---|---|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|--|--|--|---|---|
| | | | | . | 5 |
|--|--|--|--|---|---|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 4 |
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4. What was the date of the last training?

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| 2 | 0 | 1 | 9 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

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|--|--|---|
| | | 7 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|---|---|---|
| 1 | 0 | 0 |
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 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
|---|---|---|---|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|-----------------------|
| Village of Stillwater |
|-----------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 8 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | | |
|--|--|--|--|--|---|--|
| | | | | | . | |
|--|--|--|--|--|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 4 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 1 | 0 |
|---|---|

 /

| | |
|---|---|
| 1 | 7 |
|---|---|

 /

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 9 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 1 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|---|---|
| | 5 | 0 |
|--|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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|---|---|---|---|
| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

| |
|-------------------|
| Town of Waterford |
|-------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 3 | 7 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 3 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 4 | 8 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|---|---|---|
| | | 7 | 4 | 6 |
|--|--|---|---|---|
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

| | | | | | |
|--|--|---|---|---|--|
| | | 2 | 5 | . | |
|--|--|---|---|---|--|

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 5 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 1 | 0 |
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| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 9 |
|---|---|---|---|

5. How many municipal employees have been trained in this reporting period?

| | | |
|--|--|---|
| | | 5 |
|--|--|---|

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
|--|---|---|
| | 4 | 2 |
|--|---|---|

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| Town of Wilton |
|----------------|

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 1 | 4 |
|---|---|---|---|---|---|---|---|---|

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

| | | | | |
|--|--|--|--|---|
| | | | | 8 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|---|---|---|
| | | 4 | 7 | 4 |
|--|--|---|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|---|---|
| | | | 3 | 9 |
|--|--|--|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|--|--|---|
| | | | | 5 |
|--|--|--|--|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|
- Pesticide/Herbicide Applied # Acres

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

(Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|

4. What was the date of the last training?

| | |
|---|---|
| 1 | 0 |
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| 2 | 0 | 1 | 9 |
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5. How many municipal employees have been trained in this reporting period?

| | | |
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6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

| | | |
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| 1 | 0 | 0 |
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------------|
| Village of Ballston Spa |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 3 | 7 | 6 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|---|
| Continue Street Sweeping SOP, document all Miles of Street swept; Continue Parking Lot Sweeping SOP, document all acres of parking lot swept; Continue Catch Basin Inspection and Cleaning SOP, document all catch basins inspected and/or cleaned. |
|---|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|---|
| Continued the Street Sweeping SOP and record keeping program, swept the downtown area streets weekly, as weather allowed; Continued Parking Lot Sweeping SOP and record keeping program; Continue Catch Basin Inspection and Cleaning SOP and record keeping program. |
|---|

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|---|
| Continue Street Sweeping SOP, document all Miles of Street swept; Continue Parking Lot Sweeping SOP, document all acres of parking lot swept; Continue Catch Basin Inspection and Cleaning SOP, document all catch basins inspected and/or cleaned. |
|---|

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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| 2 | 0 | 2 | 0 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Ballston |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 5 | 7 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The town will continue to track the metrics regarding housekeeping practices. The highway department is diligent in performing street/parking lot sweeping, catch basin cleaning and maintenance of Town-owned stormwater management basins. Budget and staffing levels precluded specific stormwater training for employees this reporting period. Staff has received training in prior years.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The town has continued to track the metrics regarding housekeeping practices. The Town will look at training opportunities in the next year for any new staff.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The town has continued to track the metrics regarding housekeeping practices. The Town will look at training opportunities in the next year for any new staff. The highway department will continue its program of street/parking lot sweeping, catch basin cleaning and maintenance of Town-owned stormwater management basins.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|------------------|
| Town of Charlton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 2 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Maintain Town Hall storm system, housekeeping policies at Town Garage, training class for Highway Superintendent, street sweeping agreement with Ballston Spa, rotate storm sewer cleanout, ditch maintenance. Began brine pretreatment of roads to reduce salt usage,

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Charlton's water testing program continues to validate the lack of pollutants in the watershed. Town owned & managed facilities are in good condition and are well maintained. Municipal facilities are observed daily and maintenance issues are addressed as soon as possible.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|---|---|---|
| | 3 | 6 | 5 |
|--|---|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Charlton's good housekeeping MCM is in full implementation in accordance with its Storm Water Management Program Plan. The Town will continue to pursue the same policies in the upcoming year. In early 2018, the Town hired a new Highway Superintendent. Some reporting parameters were not available from the departing Superintendent. The Highway Super continues to work with the TE and outside training opportunities to become familiar with MS4 provisions.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------------|
| TOWN OF CLIFTON PARK |
|----------------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 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), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.

Maintain all selected BMPs detailed in the Town of Clifton Park MS4 SWMP Plan.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

A significant amount of debris removed from the stormwater system as a result of maintenance.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Maintain all selected BMPs detailed in the Town of Clifton Park MS4 SWMP Plan. Continued maintenance of the town's streets and stormwater system. Expansion of the program to include the cleaning of retention ponds as time and manpower permits.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------|
| Town of Greenfield |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 2 | 3 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town Highway Department has established an inventory system and a maintenance schedule plan to inspect and maintain all existing stormwater practices in the Town. The Town regularly inspects and maintains all municipal properties and addresses any noted deficiencies in a timely manor. The Highway Department cleaned 16 lane miles of roadside ditches and replaced 18 culvert structures in 2019.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Continued communication between Town officials, Highway Department personnel and Town Engineer, has helped to establish a successful good housekeeping and pollution prevention plan within the Town

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 2 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to implement the maintenance program that has been established. The Highway Department has established a program to train their employees on stormwater related issues and will continue to provide opportunities for personnel to attend stormwater management training programs.

7123078468

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

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| N | Y | R | 2 | 0 | A | 3 | 7 | 5 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Records maintained of all areas that are reported on for this minimum control measure. A form is completed by the Highway Department for each activity reported on. The Town Highway Department reported 137.5 miles of road swept with 56.5 cubic yards of debris collected. 97 catch basins were also cleaned out removing 16.5 cubic yards of debris.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town Highway Department reported on 137.5 miles of road swept with 56.5 cubic yards of debris collected. 97 catch basins were also cleaned removing 16.5 cubic yards of debris.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Roads will be swept on a continual basis. Catch basins will be cleaned as needed. Annual roadside cleanups will be held. Reports will be written and maintained by the Town. Conduct a Self-Assessment and ISWM Program MCM 6/P2 Training by 12/31/2020.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---------------|
| Town of Malta |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 8 | 6 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The town will continue to work on training relevant staff, will hold its self-audit every three years and will maintain inspection, cleaning and repair records. Stormwater training for parks and highway staff is planned to be held every three years, this is due in Spring 2020.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town conducted a self-assessment last reporting 2018 and will conduct its next self-assessment no later than 2021. The Town revised its SWMP Plan in 2016 year to provide better guidance to town staff on BMP's to use and to align the plan with initiatives the town has been undertaking. Training for parks and highway staff was held in 2017.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The town will continue to work on training relevant staff, will conduct its next self-audit in 2021 and will maintain inspection, cleaning and repair records. Stormwater training will be provided this spring to parks and highway staff.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| City of Mechanicville |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 5 | 5 | 1 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The measurable goal tracked was the number of catch basins inspected and cleaned when necessary.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

DPW employees inspected, and removed sediment when necessary, 36 catch basins were inspected, with a total of 48 catch basins vacuumed and jetted. The net result of this maintenance was the reduction of incidences of localized stormwater system surcharging.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|---|---|
| | | 4 | 8 |
|--|--|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The City will include training in the next reporting cycle and will continue to inspect and maintain catch basins when necessary. A catch basin maintenance tracking program will be developed.

7123078468

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| TOWN OF MILTON |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Continue to keep accurate records of municipal pollution prevention and good housekeeping activities to assist in completion of annual MS4 report.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Record of PP/GH activities were available at the time of report completion.

C. How many times was this observation measured or evaluated in this reporting period?

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| | | | 1 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Keep records on forms found in SWMPP or in manner acceptable to the Town Stormwater Officer. Review record keeping procedures with responsible parties. To be further reviewed for completeness.

7123078468

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| TOWN OF MOREAU |
|----------------|

SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 5 | 8 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Keep all required records on forms found in SWMPP or in a manner acceptable to the Town's Stormwater Management Officer (SMO); implement all SOPs - on-going.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The receipt/keeping of records has kept pace with related activities with exception of the Recreation department.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|---|--|--|--|
| 1 | | | |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

A Self-Assessment will be conducted next reporting period, per SOP; Recreation Department Employees will receive training on Good Housekeeping/Pollution Prevention; all other program elements and SOPs will continue as planned.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village, as an automatically designated MS4 since 2003, has a fully developed MCM6 program of training, operations, and system inspection & maintenance.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Village continues all applicable SOPs and BMPs relative to Public Works and MS4 inspection, operations, and maintenance. Each year all catch basins, system connectors (i.e. culverts), inlet and outlet points are inspected; general GH/P2 measures are implemented as part of daily operations; all such measures have been fully implemented.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|---|---|---|
| | 1 | 6 | 5 |
|--|---|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Village Public Works will conduct a Self-Assessment of all applicable operations with assistance from the Saratoga County/CCE Saratoga ISWM Program in Reporting Year 17 (i.e. 2020 - 2021); all other SOPs and BMPs will continue to be implemented, any new/necessary SOPs/BMPs discovered through Self-Assessment will be included in the SWMP Plan and implemented the following year (i.e. Year-18, 2020 - 2021).

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|---|
| Saratoga County, Department of Public Works |
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SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 0 | 9 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|---|
| Continue with GH/PP BMP implementation at DPW/County Facilities (i.e. zero or limited exposure of potential SW Pollutants; no fertilizer application and organic debris management of turf grass areas; Employee trainings; MS4 system inspections; etc.) |
|---|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|--|
| Continuing: street/road sweeping; BMPs at DPW Facilities were maintained/implemented; catch basin inspection/cleaning program. |
|--|

C. How many times was this observation measured or evaluated in this reporting period?

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|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|--|
| Continue MM6 Program implementation. Resume employee training program with the goal of training 100% of DPW employees on pollution prevention BMPs and policies. |
|--|

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Saratoga Springs

SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 2 | 1 | 6 |
|---|---|---|---|---|---|---|---|---|

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.

- Implement Best Management Practices to address pollutants identified by way of self-assessment.
- Perform a self-assessment of municipal facilities and operations every (3) years.
- Provide City employees with pollution prevention and good housekeeping training every (3) years.
- Enforce local ordinances regarding pet waste disposal and waterfowl feeding.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

- Year-round implementation of Best Management Practices including parking lots/streets swept, storm drains cleaned, fertilizer/pesticide application, vehicle/equipment washing, fueling & repair, road salt storage, hazardous material handling & storage, spill prevention & clean-up.
- A self-assessment of municipal facilities/operations was performed in March 2020.
- Pollution prevention training for DPW employees was provided in February 2016.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|---|---|---|
| | 3 | 6 | 5 |
|--|---|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

- Best management practices will continue to be implemented and monitored for effectiveness.
- The next self-assessment of municipal facilities/operations is scheduled for February 2023.
- Pollution prevention training for DPW employees past due. Scheduled for Summer 2020 if possible.
- Ordinances prohibiting waterfowl feeding and improper pet waste disposal will remain in effect.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| South Glens Falls |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 9 | 1 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Work with town of Moreau and SCI Stormwater Program to offer refresher courses for employees.
Maintain MSD Sheets.
Update materials inventory updated.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Work with town of Moreau setting up training.
Maintain all MSDS.
Materials inventory updated.

C. How many times was this observation measured or evaluated in this reporting period?

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| | | | 1 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Using catchbasin record forms.
Use street sweeping forms.
Continue to update MSD Sheets as needed.
Materials inventory update as needed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|--------------------|
| Town of Stillwater |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 5 | 4 | 9 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

As of this reporting year the Town of Stillwater has developed their Stormwater Management Plan (SWMP). The goals for inspection and maintenance of the Town owned facilities are outlined in the plan.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

A detailed reporting form was established by the Town that the Highway Department uses to report on activities outlined in this report. The activities reported have been managed and maintained by the department effectively to insure proper operation of BMPs.

C. How many times was this observation measured or evaluated in this reporting period?

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| | | | 1 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town of Stillwater is working with the Coalition (Saratoga County ISWM Program) on the creation of Standard Operation Procedures for Coalition members to create a consistent approach.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-----------------------|
| Village of Stillwater |
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SPDES ID

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|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 5 | 4 | 7 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village of Stillwater has developed their Stormwater Management Plan (SWMP). Goals for inspection and maintenance of the Village owned facilities are outlined in the plan.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

A detailed reporting form was established by the Village that the Highway Department uses to report on activities outlined in this report. The activities reported have been managed and maintained by the department effectively to insure proper operation of BMPs.

C. How many times was this observation measured or evaluated in this reporting period?

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| | | | 1 |
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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village of Stillwater has developed their Stormwater Management Plan (SWMP). Goals for inspection and maintenance of the Village owned facilities are outlined in the plan. Through an Inter-municipal Agreement, a Stormwater Committee developed by the Town of Stillwater continues to educate the affected employees and set goals for the next step in the programs development.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| Town of Waterford |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 7 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town practices good housekeeping measures such as those listed herein, as well as measures identified in their Good Housekeeping/Pollution Prevention Plan.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town removed sediment from 59 catch basins, replaced 4 manhole risers, rebuilt 1 catch basin, and replaced 30 feet of 15-inch ABS pipe with 2 aprons.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|---|---|
| | | 6 | 6 |
|--|--|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to implement good housekeeping measures.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|-------------------|
| Town of Waterford |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 0 | 3 | 7 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|--|
| The Town collects brush and yard waste annually. |
|--|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|---|
| This reporting cycle, the Town collected 2,550 yards of brush and yard waste. |
|---|

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|---|---|---|---|
| 2 | 5 | 5 | 0 |
|---|---|---|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|---|
| The Town will continue collecting brush and yard waste. |
|---|

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

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| N | Y | R | 2 | 0 | A | 4 | 6 | 9 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Maintain all good housekeeping/pollution prevention programs.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Village continues to maintain it existing programs of Street, Winter Road, Solid Waste, Municipal Building, and Parks and Open Space management/maintenance to the maximum extent practicable.

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Maintain all in-house programs as well as street sweeping, litter/trash pick up (daily), and winter road maintenance contracts.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

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|----------------|
| Town of Wilton |
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SPDES ID

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| N | Y | R | 2 | 0 | A | 1 | 1 | 4 |
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7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

| |
|--|
| Regularly inspect, clean, maintain and repair catch basins. Maintenance and repairs are tracked. Perform good housekeeping practices. Determine sources of pollutants. |
|--|

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

| |
|--|
| Catch basins cleaned, maintained or repaired. Facilities maintained in good order. |
|--|

C. How many times was this observation measured or evaluated in this reporting period?

| | | | |
|--|--|--|---|
| | | | 1 |
|--|--|--|---|

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

| |
|--|
| Town crews will continue to inspect catch basins on a regular ongoing basis and make repairs/clean in a timely manner. Continue with educational training. |
|--|

