MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 2 3

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

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Choose one:

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

Fill in SPDES ID in upper right hand corner.

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OR

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

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

Na	me	of S	Sing	gle	En	tity												

OR

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

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

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MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 2 3

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

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MCC form for period ending March 9, 2 0 2 3

| SPDES ID | Name of MS4 | Saratoga County ISWM Program | N Y R 2 0 C 0 0 6

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

- O An Annual Report for a single MS4
- 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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MCC form for period ending March 9, 2 0 2 3

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Name of MS4	Town of Ballston	N	Y	R	2	0	А	1	5	7

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)
- O A Joint Report

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4	Town of Charlton		N	Y	R	2	0	A	0	3	2

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)
- O A Joint Report

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$

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Name of MS4	TOWN OF CLIFTON PARK	N	Y	R	2	0	А	0	3	5

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4 Town of C	Greenfield]	1	Y	R	2	0	А	1	2	3

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)
- O A Joint Report

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4	Town of Halfmoon		N	Y	R	2	0	A	3	7	5

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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MCC form for period ending March 9, 2 0 2 3

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

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4	City of Mechanicville	N	Y	R	2	0	А	5	5	1

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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Name of MS4 TOWN OF MILTON		N	Y	R	2	0	А	1	0	8

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

- O An Annual Report for a single MS4
- 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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MCC form for period ending March 9, 2 0 2 3

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Name of MS4 To	OWN OF MOREAU	N	Y	R	2	0	А	1	5	8

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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MS4 Municipal Compliance Certification(MCC) Form

	SPDES ID	
Name of MS4 Village of Round Lake	N Y R 2 0 A 0 9	9
Each MS4 must submit an MCC form.		
Section 1 - MCC Identification Page		
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Indicate whether this MCC form is being submitted to certify endorsemen	at 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 be	inding agreements.	
If Joint Report, enter coalition name:		
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MS4 Municipal Compliance Certification(MCC) Form

	SPDES ID
Name of MS4 Saratoga County, Department of Public Works	N Y R 2 0 A 2 0 9
Each MS4 must submit an MCC form.	
Section 1 - MCC Identification Page	
Indicate whether this MCC form is being submitted to certify endorsement or	r acceptance of:
● An Annual Report for a single MS4	
○ A Single Entity (Per Part II.E of GP-0-10-002)	
O A Joint Report	
Joint reports may be submitted by permittees with legally bind	ling agreements.
If Joint Report, enter coalition name:	

MCC form for period ending March 9, 2 0 2 3

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Name of MS4	City of Saratoga Springs		N	Y	R	2	0	A	2	1	6

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)
- O A Joint Report

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MS4 Municipal Compliance Certification(MCC) Form

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O A Single Entity (Per Part II.E of GP-0-10-002)								
O A Joint Report								
Joint reports may be submitted by permittees with legally be	oinding a	gre	eme	nts.				
If Joint Report, enter coalition name:	1 1 1	_		-	_	_		

MS4 Municipal Compliance Certification(MCC) Form

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Name of MS4 Town of Stillwater	N Y R 2 0 A 5 4 9
Each MS4 must submit an MCC form.	
Section 1 - MCC Identification Page	
Indicate whether this MCC form is being submitted to certify endorsement or	acceptance of:
• An Annual Report for a single MS4	
○ A Single Entity (Per Part II.E of GP-0-10-002)	
O A Joint Report	
Joint reports may be submitted by permittees with legally bindi	ng agreements.
If Joint Report, enter coalition name:	-

MS4 Municipal Compliance Certification(MCC) Form

	SPDES ID
Name of MS4 Village of Stillwater	N Y R 2 0 A 5 4 7
Each MS4 must submit an MCC form.	
Section 1 - MCC Identification Page	
Indicate whether this MCC form is being submitted to certify endorsement	nt or acceptance of:
● An Annual Report for a single MS4	
○ A Single Entity (Per Part II.E of GP-0-10-002)	
O A Joint Report	
Joint reports may be submitted by permittees with legally b	pinding agreements.
If Joint Report, enter coalition name:	

MCC form for period ending March 9, 2 0 2 3

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Name of MS4	Town of Waterford	N	Y	R	2	0	А	0	3	7

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)
- O A Joint Report

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4	Town of Wilton	N	Y	R	2	0	A	1	1	4

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)
- O A Joint Report

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4	Saratoga County ISWM Program	N	Y	R	2	0	С	0	0	6

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4 Town of Ballston	N	Y	R	2	0	A	1	5	7

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4 Town of Charlton	N	Y	R	2	0	А	0	3	2

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
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- O Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- Report Preparer

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$

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Section 2 - Contact Information

Important Instructions - Please Read

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

- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
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- 5. Report Preparer (Consultants may provide company name in the space provided).

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

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

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

For each contact, select all that apply:

 Principal Executive Officer/Chief Elected O 	fficial
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O Duly Authorized Representative	ve	
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\bigcirc	Local	Stormwat	er Public	Contact

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O Report Preparer

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MCC form for period ending March 9, 2 0 2 3

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MCC form for period ending March 9, 2 0 2 3

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MCC form for period ending March 9, 2 0 2 3

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

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4 Town of Halfmoon	N	Y	R	2	0	А	3	7	5

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

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

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Section 2 - Contact Information

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

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Section 2 - Contact Information

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

First Name	MI Last Name
Scott	Ostrander
Title	
Town Supervissor	
Address	
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City	State Zip
Balllston Spa	N Y 1 2 0 2 0 -
eMail	
supervisor@town	o f m i l t o n n y . o r g
Phone	County
(5 18) 8 8 5 - 9 2 2 0	Saratoga

MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$

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Section 2 - Contact Information

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

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

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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Section 2 - Contact Information

Important Instructions - Please Read

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

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- Report Preparer

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

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- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

		SPI	DES	ID						
Name of MS4	Village of Round Lake	N	Y	R	2	0	A	0	9	9

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

		SPI	DES	ID						
Name of MS4	Village of Round Lake	N	Y	R	2	0	А	0	9	9

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

	_	SPI	DES	S ID					
Name of MS4 Saratoga County, Department of Public Works		N	Y	R	2	0	A		

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

First Name	MI Last Name
James	R Clark
Title	
Engineering Tec!	n n i c i a n
Address	
40 McMasterStr	e e t
City	State Zip
City B a 1 1 s t o n S p a	State Zip N Y 1 2 0 2 -
Ballston Spa eMail	
Ballston Spa eMail	N Y 1 2 0 2 -

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

Name of MS4	Saratoga	County,	Department	of Public	Works

SPDES ID

N Y R 2 0 A 2 0 9

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

First Name	MI Last Name
Blue	R Neils
Title	
SCCEIISWMProg	ram Coordinator
Address	
50 West High Str	eet
City	State Zip
Ballston Spa	N Y 1 2 0 2 0 -
eMail	
b r n 5 @ c o r n e 1 1 . e d u	
Phone	County
	County

MCC form for period ending March 9, 2 0 2 3

		SPI	DES	ID						
Name of MS4	City of Saratoga Springs	N	Y	R	2	0	А	2	1	6

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MCC form for period ending March 9, 2 0 2 3

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Name of MS4	City of Saratoga Springs	N	Y	R	2	0	А	2	1	6

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

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Name of MS4	South Glens Falls	N	Y	R	2	0	A	0	9	1

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

	SPI	DES	ID						
Name of MS4 Town of Stillwater	N	Y	R	2	0	A	5	4	9

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

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Name of MS4 Town of Stillwater	N	Y	R	2	0	A	5	4	9

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

Principal	Executive	Officer/Chief	Elected	Official

O Duly Authorized	Representative
-------------------	----------------

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

First Name E d w a r d	MI Last Name Kinowski
Title	
Town Supervisor	
Address	
8 8 1 H u d s o n A v e n i	u e
City	State Zip
Stillwater	N Y 1 2 1 7 0 -
eMail	
e k i n o w s k i @ s t i l l v	waterny.org
Phone	County
(518)664-6148	Saratoga

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

	_	SPI)ES	W.						
Name of MS4 Village of Stillwater		N	Y	R	2	0	А	5	4	7

Section 2 - Contact Information

Important Instructions - Please Read

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

- 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).

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

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

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

First Name	MI Last Name
Lindsay	Buck
Title	
Stormwater Manag	ement Coordinator
Address	
8 8 1 H u d s o n A v e n u	e
City	State Zip
Stillwater	State Zip N Y 1 2 1 7 0 -
Stillwater	
Stillwater eMail	N Y 1 2 1 7 0 -

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

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Name of MS4	Village of Stillwater		N	Y	R	2	0	A	5	4	7

Section 2 - Contact Information

Important Instructions - Please Read

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

- 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).

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

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

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MCC form for period ending March 9, 2 0 2 3

	SPL)ES	ID						
Name of MS4 Town of Waterford	N	Y	R	2	0	А	0	3	7

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information

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For each contact, select all that apply:

 Principal Executive Officer/Chief Elected O 	fficial
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\bigcirc	Local	Stormwat	er Public	Contact

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MS4 Municipal Compliance Certification (MCC) Form

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Parti	Section 3 - Partner Information Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? If Yes, complete information below. Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition. If No, proceed to Section 4 - Certification Statement. Partner/CoalitionName Sar a togaa County CCE ISW MProgram Program P																														
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MS4 Municipal Compliance Certification (MCC) Form

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MS4 Municipal Compliance Certification (MCC) Form

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MS4 Municipal Compliance Certification (MCC) Form

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MS4 Municipal Compliance Certification (MCC) Form

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SPDES ID

4643023765

MS4 Municipal Compliance Certification (MCC) Form

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MS4 Municipal Compliance Certification (MCC) Form

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MS4 Municipal Compliance Certification (MCC) Form

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MS4 Municipal Compliance Certification (MCC) Form

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MS4 Municipal Compliance Certification (MCC) Form

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MS4 Municipal Compliance Certification (MCC) Form

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MS4 Municipal Compliance Certification (MCC) Form

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If	f Yes, complete information below. Submit a separate sheet for each partner. Information provided in other formats will not be																															
	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																															
	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. f No, proceed to Section 4 - Certification Statement.																															
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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

Name of MS4 Saratoga County ISWM Program SPDES ID

N Y R 2 0 C 0 0 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	MI	I	ast Na	ame							,					
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Send completed form and any attachments to the DEC Central Office at:

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

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Name of MS4	Town of Ballston	N	Y	R	2	0	А	1	5	7

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

Submit Form

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

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Name of MS4	Town of Charlton	N	Y	R	2	0	A	0	3	2

Section 4 - Certification Statement

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

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-20-001 Part VII.

First Name J o s e p h	MI	Last Name G r a s s o
Title (Clearly print title of individual signing report) S u p e r v i s o r		
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Send completed form and any attachments to the DEC Central Office at:

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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Section 4 - Certification Statement

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

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Submit Form

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

SPDES ID

	SPE	ES	ID						
Name of MS4 Town of Greenfield	N	Υ	R	2	0	А	1	2	3

Section 4 - Certification Statement

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

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-20-001 Part VII.

First Name	MI	Last Name
K e v i n		Veitch
Title (Clearly print title of individual signing report)		
Supervisor		
Signature		Date 0 5 / 1 1 / 2 0 2 3

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

		SPD	ES	ID						
Name of MS4	Town of Halfmoon	N	Y	R	2	0	А	3	7	5

Section 4 - Certification Statement

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

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

First Name K e v i n	MI Last Name J T 0 1 1 i s e n
Title (Clearly print title of individual signing report)	
T o w n o f H a l f m o o n	Supervisor
Signature	
Kevin J. Digitally signed by Tollisen	Kevin J.
Tollisen Date: 2023.05.12	10:18:09 Date 0 5 / 1 2 / 2 0 2 3

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

Submit Form

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

	SPI	DES	S ID						
Name of MS4 From of Makenetta	Ŋ	¥	R	2	0	A	0	8	6

Section 4 - Certification Statement

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

First Name	MI	Last	Nam	e									
MAKK	臣	म व	A m	n _n	0	Ŋ	ф						
Title (Clearly print title of individual signing report)													
\$\frac{1}{2} \begin{array}{c c c c c c c c c c c c c c c c c c c													
Signature													
Mark E Digitally signed by Hammond	/ Mar	kΕ											
Hammond Date: 2023.05.22 -04'00'	16:0	1:33				Da 0	te 5	1	2	2 /	2	0	2 3

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

Submit Form

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

MS4 Municipal Compliance Certification(MCC) Form

	MCC form for period ending M	[arch 9, 2 0	2	3							
			SPL	DES	ID						
Name of MS4	City of Mechanicville		N	Y	R	2	0	Α	5	5	1

Section 4 - Certification Statement

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

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

First Name M i k e	MI	B u t	l e r						
Title (Clearly print title of individual signing report) M a y o r									
Signature Michael J. Buch Mayo	J)		Date	· /	2	, /	2	0 2	2

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, $2 \mid 0 \mid 2 \mid 3$

		SPE	DES	ID		75				95
Name of MS4	TOWN OF MILTON	N	Y	R	2	0	A	1	0	8
				_	_	_	_	-	_	-

Section 4 - Certification Statement

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

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

Firs	st Name												MI	Las	t Na	ame						5.5					
S	C	0	t	t												0	s	t	r	a	n	d	е	r			
Titl	е	(Cle	arly	pri	nt ti	itle	of in	div	idua	ıl sig	nin	g re	port	:)	N												
m	_	w	2		S		~	е	r	V	i	s		~							1				7 77		1

X Signature

Leg

Date

05/09/2023

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

	_	SPL	DES	ID						
Name of MS4 TOWN OF MOREAU		N	Y	R	2	0	А	1	5	8

Section 4 - Certification Statement

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

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

First Name	MI	Last Name
Theodore	Т	Kusnierz, Jr.
Title (Clearly print title of individual signing report)		
T O W N S U P E R V I S O R		
Signature Theodor J. Kusmers Li		Date 0 5 / 1 7 / 2 0 2 3

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

SPDES ID

		SPI	DES	ID						
Name of MS4	Village of Round Lake	N	Y	R	2	0	A	0	9	9

Section 4 - Certification Statement

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

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

First Name	MI	Las	t Na	me								
G a r y		P	u	t	n	a	m					
Title (Clearly print title of individual signing report)												
Mayor												
Signature												
							Date					
yan Julnan							0 8	1	11	12	0	23
				_								

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 3

		SPI	DES	\mathbb{D}						
Name of MS4	Saratoga County, Department of Public Works	N	Y	R	2	0	A	2	0	9

Section 4 - Certification Statement

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

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

First Name	MI Last Name
C h a d	M C o o k e
Title (Clearly print title of individual signing report)	
Commissioner of	Public Works
Signature	Date 05/31/2023

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

Submit Form

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

SPDES ID

Name of MS4

South Glens Falls

N Y R 2 0 A

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 Nicholas	MI J	Last Name Bodkin
Title (Clearly print title of individual signing report) M a y o r		
Signature		Date 0 J / 0 7 / 2023

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, $\begin{bmatrix} 2 & 0 & 2 & 3 \end{bmatrix}$ SPDES ID Name of MS4 Town of Stillwater $\begin{bmatrix} N & Y & R & 2 & 0 & A & 5 & 4 & 9 \end{bmatrix}$

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.

Firs	rst Name								MΙ		Las	t N	ame																			
E	d	w	a	r	d												K	i	n	0	w	ន	ķ	i								
Titl	e (Cle	arly	y pri	nt ti	itle	of ir	div	idua	l <u>si</u> g	min	g re	por	t)																		
Т	0	w	n		S	u	р	e,	r	v	i	ន	0	r																		
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	6	M] []}	A) o] (K		//] 11P	W		b,	/									Dat O	5	/	C	9	· /	1 2	, E	7 7	2 3	3

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

Submit Form

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

-		SPI	ES	\mathbb{D}						
Name of MS4	Village of Stillwater	N	Y	R	2	0	A	5	4	7

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	\mathbf{MI}	Last Name							
J u d y		Wood	- S	h a	a w				
Title (Clearly print title of individual signing report)									
Mayor									
Signature									
Judith Wood Digitally signed b	y Juditł	Wood							
Stiavy	40.00	-4	ъ.						
Shaw Date: 2023.04.25	12:23:	2.1	Da		<i>I</i>			0 0	
-0400			0	4	2	5 /	2	0 2	3

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

Submit Form

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

		SPL	DES	ID							
	- 1	3.7	v	P	_		Δ		3	-7	
Name of MS4 Town of Waterford		IN	Y	R	2	U	A	U	3	/	ı
Truthe of trib	l l					-		$\overline{}$			1

Section 4 - Certification Statement

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

First Name	MI	Last Name				
John	E	Lawle	r			
Title (Clearly print title of individual signing report)						
Town Supervisor						
Signature Ohr Zewles			Date 0 5 /	30	120	23

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

Submit Form

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 2 3

		SPI	DES	ID						
Name of MS4	Town of Wilton	N	Y	R	2	0	А	1	1	4

Section 4 - Certification Statement

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

First Name	MI	Last Name
J o h n		Lant
Title (Clearly print title of individual signing report)		
Supervisor - Tov	ı n	o f W i 1 t o n
John Lant Digitally signed Date: 2023.05.2	by Joh 3 13:5	nn Lant 59:07 Date

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

Submit Form

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

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

		_	SPI	DES	ID						
Name of MS4/Coalition	Saratoga County ISWM Program		N	Y	R	2	0	С	0	0	6

Minimum Control Measure 1. Public Education and Outreach

On behalf of an individual MS4			
On behalf of a coalition			
How many MS4s contributed to this report?	1	9	

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

1. Targeted Public Education and Outreach Best Management Practices

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

$0 + h_0$	12																												
Li	a w	n	/	0	r g	a	n	i	С	D	е	b	r	i	s														
• O	her:																C	No	ne										
• G	reen	Infra	ıstrı	ıctı	are/Be	tter	Site	De	esig	n/Lov	w In	npa	et D)eve	elop	ment	C	W	etla	nd I	Prot	tect	ion						
• St	orm .	Drai	n M	Iarl	king													Wa	ater	Co	nse	rva	tion	1					
S1	nart (Grov	vth														•	Ve	hic	le V	Vas	hing	3						
In	frastı	ructu	ire]	Ma	intena	nce											C	Tra	ash	Ma	ınag	gem	ent						
• III	icit I	Discl	narg	ge I	Detect	ion	and	Eli	min	ation								Rij	pari	an	Cor	rido	or F	rot	ecti	on/	Res	tora	tion
 Household Hazardous Waste Disposal 										○ Recycling																			
• G	enera	1 Sto	orm	wa	ter Ma	anag	geme	ent I	Info	ormat	ion							Pe	t W	aste	e M	ana	gen	nen	t				
C	onstr	uctio	n S	lite	S												C	Pe	stic	ide	and	Fe	rtili	izer	Ap	plio	catio	on	

2. Specific audiences targeted during this reporting period:

Public Employees	Contractors
Residential	Developers
Businesses	• General Public
○ Restaurants	○ Industries
• Other:	○ Agricultural
P l a n n i n	g and Zoning Boards
Othom	

Other

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

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

Name of MS4/Coalition Town of Ballston	N Y R 2 0 A 1 5 7
Minimum Control Measure 1. Public Ed	lucation and Outreach
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	
1. Targeted Public Education and Outreach Best Managem	nent Practices
Check all topics that were included in Education and Outreach	during this reporting period:
The information for MCM1 is for the Saratoga County ISWM Program plus T	own of Ballston Activities
Construction Sites	Pesticide and Fertilizer Application
General Stormwater Management Information	● Pet Waste Management
O Household Hazardous Waste Disposal	○ Recycling
● Illicit Discharge Detection and Elimination	Riparian Corridor Protection/Restoration
Infrastructure Maintenance	O Trash Management
Infrastructure MaintenanceSmart Growth	Trash ManagementVehicle Washing
Smart Growth	Vehicle Washing
Smart GrowthStorm Drain Marking	Vehicle WashingWater Conservation
 Smart Growth Storm Drain Marking Green Infrastructure/Better Site Design/Low Impact Development 	 Vehicle Washing Water Conservation Wetland Protection

Residential	Developers
Businesses	General Public
○ Restaurants	○ Industries

• Other: • Agricultural

Planning & Zoninng Boards

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

	 SPI	DES	ID						
Name of MS4/Coalition Town of Charlton	N	Y	R	2	0	А	0	3	2

Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one)	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. Targeted Public Education and Outreach Best Management Practices

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

- Construction Sites
 Pesticide and Fertilizer Application
- General Stormwater Management Information
 Pet Waste Management
- Household Hazardous Waste Disposal
 Recycling
- Illicit Discharge Detection and Elimination Riparian Corridor Protection/Restoration
- Infrastructure Maintenance Trash Management
- Storm Drain Marking Water Conservation
- Green Infrastructure/Better Site Design/Low Impact Development Wetland Protection
- Other: ○ None е d i С а t i n d i а 1 0 S р 0 S

Other

2. Specific audiences targeted during this reporting period:

- Public EmployeesContractors
- ResidentialDevelopers
- Restaurants Industries
- Other:
 O Agricultural

i n Ζ 0 i Т d а $n \mid n$ g n n W В r g 0 0 а

Other

SPDES ID

4286299954

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 2 \begin{vmatrix} 3 & 0 \end{vmatrix}$

Name of MS4/Coalition TOWN OF CLIFTON PARK	N Y R 2 0 A 0 3 5										
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										
1. Targeted Public Education and Outreach Best Manageme	ent Practices										
Check all topics that were included in Education and Outreach de	uring this reporting period:										
• Construction Sites	O Pesticide and Fertilizer Application										
● General Stormwater Management Information	Pet Waste Management										
 Household Hazardous Waste Disposal 	O Recycling										
○ Illicit Discharge Detection and Elimination ○ Riparian Corridor Protection/Restora											
O Infrastructure Maintenance	O Trash Management										
○ Smart Growth	O Vehicle Washing										
O Storm Drain Marking	O Water Conservation										
● Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection										
Other:	○ None										
Other											
2. Specific audiences targeted during this reporting period:											
● Public Employees ● Contractors											
● Residential • Developers											
○ Businesses • General Public											
○ Restaurants ○ Industries											
Other: Agricultural Other											

Other

MS4 Annual Report Form

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

Name of MS4/Coalition	Town of Greenfield	SPDES ID N Y R 2 0 A 1 2 3			
Minimum Control Measure 1. Public Education and Outreach					
The information in this	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. Targeted Public	Education and Outreach Best Manageme	ent Practices			
Check all topics that were included in Education and Outreach during this reporting period:					
Construction Sites		O Pesticide and Fertilizer Application			
• General Stormwater Management Information		O Pet Waste Management			
O Household Hazardous Waste Disposal		Recycling			
● Illicit Discharge Detection and Elimination		Riparian Corridor Protection/Restoration			
○ Infrastructure Maintenance		■ Trash Management			
○ Smart Growth		O Vehicle Washing			
○ Storm Drain Marking		O Water Conservation			
• Green Infrastructure/Better Site Design/Low Impact Development		O Wetland Protection			
Other:		○ None			
2. Specific audiences targeted during this reporting period:					
• Public Employees	Contractors				
O Residential	Developers				
O Businesses	• General Public				
○ Restaurants	○ Industries				
• Other:	○ Agricultural				

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPDES ID			
Name of MS4/Coalition Town of Halfmoon	N Y R 2 0 A 3 7 5			
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 Manageme	ent Practices			
Check all topics that were included in Education and Outreach during this reporting period:				
Construction Sites	O Pesticide and Fertilizer Application			
 General Stormwater Management Information 	Pet Waste Management			
O Household Hazardous Waste Disposal	○ Recycling			
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration			
● Infrastructure Maintenance	O Trash Management			
• Smart Growth	O Vehicle Washing			
Storm Drain Marking	O Water Conservation			
• Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection			
• Other:	○ None			
Lawn/organicwaste ma	n a g m e n t			
2. Specific audiences targeted during this reporting period:				
● Public Employees ● Contractors				
ResidentialDevelopers				
○ Businesses • General Public				
○ Restaurants ○ Industries				
○ Other: ○ Agricultural				
Other				

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Name of MS4/Coalition Town of Malta		N Y R 2 0 A 0 8 6
<u>Minir</u>	num Control Measure 1. Public Ed	ucation and Outreach
The information in this	s section is being reported (check one):	
On behalf of an indi On behalf of a coali How m	ividual MS4 tion any MS4s contributed to this report?	
1. Targeted Public	Education and Outreach Best Managemo	ent Practices
Check all topics that	were included in Education and Outreach d	uring this reporting period:
Construction Sites	M	Pesticide and Fertilizer Application
General Stormwater Management Information		Pet Waste Management
 Household Hazardous Waste Disposal 		• Recycling
● Illicit Discharge Detection and Elimination		O Riparian Corridor Protection/Restoration
○ Infrastructure Maintenance		Trash Management
○ Smart Growth		O Vehicle Washing
O Storm Drain Markir	ng	Water Conservation
• Green Infrastructure	e/Better Site Design/Low Impact Development	Wetland Protection
Other:		○ None
Other		
2. Specific audience	ces targeted during this reporting period:	
O Public Employees	Contractors	
Residential	Developers	
O Businesses	General Public	
○ Restaurants	○ Industries	
• Other:	O Agricultural	
Other		

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

Name of MS4/Coalition City of Mechanicvlle	N Y R 2 0 A 5 5 1			
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 Manageme	ent Practices			
Check all topics that were included in Education and Outreach de	uring this reporting period:			
Construction Sites	• Pesticide and Fertilizer Application			
● General Stormwater Management Information	Pet Waste Management			
 Household Hazardous Waste Disposal 	○ Recycling			
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration			
○ Infrastructure Maintenance	O Trash Management			
○ Smart Growth	• Vehicle Washing			
O Storm Drain Marking	Water Conservation			
O Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection			
Other: L a w n / O r g a n i c D e b r i s Other	○ None			
2. Specific audiences targeted during this reporting period:				
Public Employees Contractors				
ResidentialDevelopers				
● Businesses ● General Public				
○ Restaurants ○ Industries				
Other: OAgricultural Other				

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

		SLDE2 ID
Name of MS4/Coalition	TOWN OF MILTON	N Y R 2 0 A 1 0 8
<u>Minir</u>	num Control Measure 1. Public Ed	ucation and Outreach
The information in this	s section is being reported (check one):	
On behalf of an indiOn behalf of a coaliHow ma		1
1. Targeted Public	Education and Outreach Best Managemo	ent Practices
Check all topics that	were included in Education and Outreach d	uring this reporting period:
• Construction Sites		• Pesticide and Fertilizer Application
General Stormwater Management Information		Pet Waste Management
O Household Hazardous Waste Disposal		○ Recycling
O Illicit Discharge Detection and Elimination		O Riparian Corridor Protection/Restoration
○ Infrastructure Maintenance		O Trash Management
○ Smart Growth		O Vehicle Washing
○ Storm Drain Marking		O Water Conservation
○ Green Infrastructure/Better Site Design/Low Impact Development		O Wetland Protection
Other:		○ None
Other		
2. Specific audience	ces targeted during this reporting period:	
Public Employees	Contractors	
Residential	Developers	
Businesses	• General Public	
○ Restaurants	○ Industries	
Other:	○ Agricultural	
Other		

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

	SPDES ID			
Name of MS4/Coalition TOWN OF MOREAU	N Y R 2 0 A 1 5 8			
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 Manageme	ent Practices			
Check all topics that were included in Education and Outreach d	uring this reporting period:			
• Construction Sites	O Pesticide and Fertilizer Application			
● General Stormwater Management Information	O Pet Waste Management			
O Household Hazardous Waste Disposal	○ Recycling			
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration			
○ Infrastructure Maintenance	○ Trash Management			
○ Smart Growth	Vehicle Washing			
O Storm Drain Marking	O Water Conservation			
O Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection			
Other:	○ None			
Other				
2. Specific audiences targeted during this reporting period:				
Public Employees Contractors				
○ Residential • Developers				
○ Businesses				
○ Restaurants ○ Industries				
Other: Agricultural				
Other				

Other:

Other

O Agricultural

MS4 Annual Report Form

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Village of Round Lake YR 2 0 A 0 9 Name of MS4/Coalition 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 1 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 Pesticide and Fertilizer Application General Stormwater Management Information Pet Waste Management Household Hazardous Waste Disposal Recycling Illicit Discharge Detection and Elimination O Riparian Corridor Protection/Restoration O Infrastructure Maintenance Trash Management Smart Growth O Vehicle Washing O Storm Drain Marking O Water Conservation O Green Infrastructure/Better Site Design/Low Impact Development O Wetland Protection Other: O None Other 2. Specific audiences targeted during this reporting period: Public Employees Contractors Residential O Developers Businesses • General Public Restaurants O Industries

MS4 Annual Report Form

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

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

	SPDES ID
Name of MS4/Coalition Saratoga County ISWM Program	N Y R 2 0 C 0 0 6
Minimum Control Measure 1. Public Ed	ucation 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 ≤ 	
1. Targeted Public Education and Outreach Best Management	ent Practices
Check all topics that were included in Education and Outreach d	uring this reporting period:
 Construction Sites 	O Pesticide and Fertilizer Application
General Stormwater Management Information	Pet Waste Management
Household Hazardous Waste Disposal	○ Recycling
Illicit Discharge Detection and Elimination	Riparian Corridor Protection/Restoration
● Infrastructure Maintenance	○ Trash Management
Smart Growth	• Vehicle Washing
Storm Drain Marking	Water Conservation
• Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
● Other: L a w n / 0 r g a n i c D e b r i s Other	○ None
2. Specific audiences targeted during this reporting period:	
Public Employees Contractors	
ResidentialDevelopers	
Businesses General Public	
○ Restaurants ○ Industries	
Other: O Agricultural	
Planning and Zoning E	Bolards

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

Name of MS4/Coalition City of Saratoga Springs	SPDES ID N Y R 2 0 A 2 1 6
Minimum Control Measure 1. Public Ed	ucation 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 Manageme	ent Practices
Check all topics that were included in Education and Outreach de	uring this reporting period:
Construction Sites	Pesticide and Fertilizer Application
General Stormwater Management Information	Pet Waste Management
 Household Hazardous Waste Disposal 	Recycling
O Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
○ Infrastructure Maintenance	○ Trash Management
○ Smart Growth	• Vehicle Washing
Storm Drain Marking	Water Conservation
○ Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
Other:	○ None
Other	
2. Specific audiences targeted during this reporting period:	
O Public Employees • Contractors	
ResidentialDevelopers	
● Businesses ● General Public	
○ Restaurants ○ Industries	
Other: Agricultural	
Other	

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

Name of MS4/Coalition South Glens Falls	SPDES ID N Y R 2 0 A 0 9 1
Minimum Control Measure 1. Public Ed	ucation 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 Manageme	ent Practices
Check all topics that were included in Education and Outreach de	uring this reporting period:
onedit an topics that were included in Education and Oddiedon a	aring time reporting period.
 Construction Sites 	O Pesticide and Fertilizer Application
General Stormwater Management Information	Pet Waste Management
O Household Hazardous Waste Disposal	○ Recycling
Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
O Infrastructure Maintenance	O Trash Management
○ Smart Growth	O Vehicle Washing
O Storm Drain Marking	O Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
Other:	○ None
Other	
2. Specific audiences targeted during this reporting period:	
Public Employees Contractors	
ResidentialDevelopers	
O Businesses General Public	
○ Restaurants ○ Industries	
Other: O Agricultural Other	

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

		SPDES ID
Name of MS4/Coalition	Town of Stillwater	N Y R 2 0 A 5 4 9
<u>Mini</u>	mum Control Measure 1. Public E	ducation and Outreach
The information in this	is section is being reported (check one):	
On behalf of an indOn behalf of a coalHow m		
1. Targeted Public	c Education and Outreach Best Manager	nent Practices
Check all topics that	t were included in Education and Outreach	during this reporting period:
 Construction Sites 		O Pesticide and Fertilizer Application
General Stormwater	r Management Information	O Pet Waste Management
○ Household Hazardo	ous Waste Disposal	○ Recycling
O Illicit Discharge De	etection and Elimination	O Riparian Corridor Protection/Restoration
Infrastructure Main	ntenance	○ Trash Management
○ Smart Growth		O Vehicle Washing
O Storm Drain Markir	ng	O Water Conservation
Green Infrastructure	e/Better Site Design/Low Impact Development	Wetland Protection
Other:		O None
0+5		
Other 2. Specific audience	ces targeted during this reporting period	:
Public Employees	Contractors	
Residential	Developers	
O Businesses	General Public	
○ Restaurants	○ Industries	
Other:	○ Agricultural	
Other		

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 2 \begin{vmatrix} 3 & 0 \end{vmatrix}$

	SPDES ID
Name of MS4/Coalition Village of Stilwater	N Y R 2 0 A 5 4 7
Minimum Control Measure 1. Public Ed	ucation 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 Manageme	ent Practices
Check all topics that were included in Education and Outreach du	aring this reporting period:
Construction Sites	O Pesticide and Fertilizer Application
General Stormwater Management Information	O Pet Waste Management
O Household Hazardous Waste Disposal	O Recycling
O Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
○ Infrastructure Maintenance	O Trash Management
○ Smart Growth	O Vehicle Washing
O Storm Drain Marking	O Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
Other:	O None
Othon	
Other 2. Specific audiences targeted during this reporting period:	
O Public Employees • Contractors	
○ Residential • Developers	
○ Businesses • General Public	
○ Restaurants ○ Industries	
Other: O Agricultural Other	

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

Name of MS4/Coalition Town of Waterford						SP N	DES Y	S ID		0	А	0	3	7	
Minimum Control Measure	1. Pu	bli	c Ed	luca	<u>itio</u>	<u>1 ar</u>	ıd (Οu	ıtre	ac	<u>h</u>				
The information in this section is being reported (che	ck 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 I	Best M	an	agem	ent	Prac	ctice	S								
Check all topics that were included in Education	and Ou	ıtre	each d	lurir	ng th	is rej	ort	ting	g pe	rioc	1:				
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● General Stormwater Management Information		Pet '	Wast	e M	[ana	agen	nent	-							
 Household Hazardous Waste Disposal 	•	Recy	cling	3											
● Illicit Discharge Detection and Elimination	•														n
O Infrastructure Maintenance					Tras	h Ma	anag	gem	ent						
○ Smart Growth				•	Vehi	cle V	Was	hin	g						
Storm Drain Marking				0	Wate	er Co	onse	rva	tion						
• Green Infrastructure/Better Site Design/Low Impac	et Deve	lop	ment	0	Wetl	and	Pro	tect	ion						
• Other:				0	Non	e									
Other															
2. Specific audiences targeted during this rep	orting	pe	riod:												
○ Public Employees															
ResidentialDevelopers															
BusinessesGeneral Public															
● Restaurants ○ Industries															
○ Other: ○ Agricultural															
Other															

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Name of MS4/Coalition Town of Wilton	N Y R 2 0 A 1 1 4
Minimum Control Measure 1. Public Edu	ucation 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 Manageme	ent Practices
Check all topics that were included in Education and Outreach du	aring this reporting period:
Construction Sites	O Pesticide and Fertilizer Application
● General Stormwater Management Information	Pet Waste Management
O Household Hazardous Waste Disposal	○ Recycling
O Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
○ Infrastructure Maintenance	● Trash Management
• Smart Growth	O Vehicle Washing
○ Storm Drain Marking	O Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
Other:	○ None
Other	
2. Specific audiences targeted during this reporting period:	
○ Public Employees ○ Contractors	
○ Residential • Developers	
○ Businesses	
○ Restaurants ○ Industries	
Other: OAgricultural Other	

N Y R 2 0 C 0 0 6

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \ 0 \ 2 \ 3$

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name	of M	[S4/	Coa	litic	n	own	of B	allsto	on														N	Y	R	2	0	А	1	5	7
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This report is being submitted for the reporting period ending March 9, 2 0 2 3

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name	me of MS4/Coalition TOWN OF CLIFTON PARK																		N	Y	R	2	0	А	0	3	5				
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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

Name	of M	of MS4/Coalition Town of Greenfield																	N	Y	R	2	0	A	1	2	3				
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Intermunicipal Stormwater Management (ISWM) Program

SPDES ID

MS4 Annual Report Form

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

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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MS4 Annual Report Form

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

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,	2	0	2	3
If submitting this form as part of a joint report on behalf of a coalition leave SPD				

TOWN OF MILTON Υ R 1 8 Name of MS4/Coalition 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply: Construction Site Operators Trained 2 #Trained O Direct Mailings # Mailings O Kiosks or Other Displays # Locations O List-Serves # In List O Mailing List # In List O Newspaper Ads or Articles # Days Run O Public Events/Presentations # Attendees O School Program # Attendees ○ TV Spot/Program # Days Run 1 0 Printed Materials: Total # Distributed Locations (e.g. libraries, town offices, kiosks) f М i t 0 n i d i В u 1 n g D е р t Other: • Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed. http://www.saratogastormwater.org/Municipal-govt-ED/on%20line%20resc/Public%20ed/EPA%20MS4%20 compliance%20guide.pdf http://www.saratogastormwater.org/NPS%20Top%2010%20presentation.pdf

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID Name of MS4/Coalition Village of Round Lake YR 2 0 A 0 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 O Direct Mailings # Mailings Kiosks or Other Displays # Locations 3 List-Serves 6 0 # In List 0 Mailing List # In List O Newspaper Ads or Articles # Days Run Public Events/Presentations # Attendees 3 0 O School Program # Attendees O TV Spot/Program # Days Run Printed Materials: Total # Distributed Locations (e.g. libraries, town offices, kiosks) i l 1 a g e Η a d i L k L b 0 u n a e r a r У 1 i 5 o u n t У Bu i d n g Other: Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed. URI W W a t 0 g a S t 0 r m W a t е 0 i d r r g е S r t g S a a 0 a t i d g C 0 u n У r е S e n t h S t m URL W W W S a r a t t i 0 g a S 0 r m a t e r 0 r g r е S d i е n t S p u b 1 C e d u C i a t h 0 n t m

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, |2|If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID YR 2 0 A 0 South Glens Falls Name of MS4/Coalition 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply: O Construction Site Operators Trained #Trained Direct Mailings 3 # Mailings 3 3 3 2 Kiosks or Other Displays # Locations O List-Serves # In List O Mailing List # In List # Days Run O Newspaper Ads or Articles O Public Events/Presentations # Attendees O School Program # Attendees O TV Spot/Program # Days Run Printed Materials: Total # Distributed Locations (e.g. libraries, town offices, kiosks) 1 i u b G C 0 r k S а r а g е а d 0 f f i С V i 1 1 n е S a g f f i 0 С е Other: Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed. h t t S p W a r a t 0 S W g а 0 r m W a t е 0 r g S a r а t 0 g a ---С 0 u n t У r е S i d n t h t е S m URL h t t p W S а r 0 а S t 0 r t g m W а е r 0 r S а r а t 0 C t t g g а 0 u n У C 0 n r a С t 0 r S d e

MS4 Annual Report Form

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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 Direct Mailings Kiosks or Other Displays Kiosks or Other Displays List-Serves Hin List Mailing List Newspaper Ads or Articles Public Events/Presentations School Program Hattendees TV Spot/Program Printed Materials: Locations (e.g. libraries, town offices, kiosks) Town Haall Harbor Center Legal Locations Cother: Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed. Next Locations on the page of	Name	of M	S4/	Coa	litic	on	`own	of V	Vate	ford														N	Y	R	2	0	А	0	3	7
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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, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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MS4 Annual Report Form

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MS4 Annual Report Form

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g	/	С	0	n	t	r	a	С	t	0	r	s	-	d	е	v	е	1	0	р	е	r	s	_	С	0	n	s	t	r	u
С	t	i	0	n	-	r	u	n	0	f	f		h	t	m																
UR	L										•							•								•		•			•
h	t	t	р	:	/	/	W	W	w		s	a	r	а	t	0	g	а	s	t	0	r	m	W	а	t	е	r		0	r
g	/	С	0	n	t	r	a	С	t	0	r	s	-	d	е	v	е	1	0	р	е	r	s	-	р	0	s	t	-	С	0
n	s	t	r	u	С	t	i	0	n		h	t	m																		
UR	L																						•								
h	t	t	р	:	/	/	W	W	w		s	a	r	а	t	0	g	а	s	t	0	r	m	W	а	t	е	r		0	r
g	/	m	u	n	i	С	i	р	a	1	i	t	i	е	s	-	р	u	b	1	i	С	-	е	d	u	С	a	t	i	0
n		h	t	m																											

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

		SPD	ES	ID						
Name of MS4/Coalition	Saratoga County ISWM Program	N	Y	R	2	0	С	0	0	6

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 de	etailed 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 (267 attendees, 1,068hrs of training); the ISWM Program website 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 (187 attendees, 748hrs of education/training).

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

	1				
samp	les/	pari	tici	pant	s/events

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

Voc	\bigcirc	Mo

(ex.:

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

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

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
- -Update existing "Story Maps" to website via ESRI ArcGIS Online Story Map tool

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

If submitting this form as part of a joint report on behalf of a coalition is	
	PDES ID
Name of MS4/Coalition Town of Ballston	N Y R 2 0 A 1 5 7
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieving identified in your Stormwater Management Program Plan (SWMPP), includ III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in	this reporting period.
Staff will start attending the ISWM meetings and Watershed Management I informational kiosk within the Town Hall will be refreshed with informatio will continue to be involved in the County ISWM Program.	_
B. Briefly summarize the observations that indicated the overall effecti Goal.	veness of this Measurable
The informational kiosk is monitored and replenished as necessary. Effective management operations at on-going construction projects in town and limit observerd.	I
C. How many times was this observation measured or evaluated in this	reporting period? (ex.: samples/participants/eve
D. Has your MS4 made progress toward this Measurable Goal during t	
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMF	PP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goathe next reporting cycle (including an implementation schedule).	als of this MCM during
Have staff Stormwater Management Officer attend monthly ISWM meeting kiosk in Town Hall will be refreshed with informational materials as needed pre-construction meetings with contractors.	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	SPL	DES	ID						
Name of MS4/Coalition Town of Charlton	N	Y	R	2	0	A	0	3	2

4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Actively participate in the Saratoga County Intermunicipal program. Continue providing articles in Town Newsletter (1,635). 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.

The Planning Board has an understanding of Stormwater management requirements and reviews all new projects within the town for compliance with the Stormwater General Permit. The Planning Board has a designated member to concentrate on storm and SWPPP related issues. In general the town sees very little in the way of development and the town continues to be primarily a farm community.

C.	How m	nany times	was this obse	rvation mea	asured or e	valuated in t	his reporting	period?
~•			***************************************	- ,				Perrout

		2	
	(ex.: samples/	participants	/events
Has your MS4 made progress toward this Measurable Goal during this r	enorting ne	riod?	

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

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

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

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.

			SPDES ID	
Name of MS4/Coalition	TOWN OF CLIFTON PARK		N Y R 2 0 A 0 3 5	
4. Evaluating Prog	gress Toward Measurable Go	als MCM 1		
identified in your St	ort on your progress and project cormwater Management Progran tional pages as needed.	*	chieving measurable goals P), including requirements in Part	
A. Briefly summar	rize the Measurable Goal iden	tified in the SW	VMPP in this reporting period.	
Continue participati Public Education ar	ion in the Saratoga County CCF and Outreach.	E ISWM Program	m's Stormwater Management	
B. Briefly summar Goal.	ize the observations that indicate	cated the overal	ll effectiveness of this Measurable	
All selected BMPs	detailed in the ISWM Program	Plan continue to	be implemented.	
C. How many time	es was this observation measur	red or evaluated	d in this reporting period?	
D. Has your MS4	made progress toward this Mo	easurable Goal	(ex.: samples/participants/evo	ent
= 1 = 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1	F- 08- 000 00 War at 1110		• Yes O No	
E. Is your MS4 on	schedule to meet the deadline	set forth in the	e SWMPP? • Yes O No	

F. Briefly summarize the stormwater activities planned to meet the 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" displays/kiosks; ongoing throughout the year
- -Continue direct education/outreach programming; COVID19 Restricted
- -Continue SW Regional Training Center w/ John Dunkle; COVID19 Restricted

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

_		_	SPI	DES	ID						
Name of MS4/Coalition	Town of Greenfield		N	Y	R	2	0	А	1	2	3

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. Town sends newsletter to residents (2,513), four times a year and will continue providing information brochures at town hall. Continue to educate Board members.

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

Attendance at road and stream cleanups, and annual household trash and e-waste collections are very popular with abundant amount of citizen participation. Attendance at these events continues to grow.

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

				2	
samp	les/	part	ici	pant	s/events

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

Voc	\bigcirc No

(ex.:

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

Yes	\bigcirc	Ν	0
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F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Road and stream cleanup events will continue in the spring 2023. In 2022 the town held multiple road side cleanups (>5). Home household waste collection was held twice in 2022, 154 mattresses, 188.43 tons of household waste material, 32.14 tons of metal and 45 pallets of electronic recyclables where collected and disposed of by the town. In 2023 the Town will continue participation in County program.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

	_	SPL	DES	ID						
Name of MS4/Coalition Town of Halfmoon		N	Y	R	2	0	А	3	7	5

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 o	bservation	measured or	evaluated	in this	reporting period?
----	----------	-----------	--------	------------	-------------	-----------	---------	-------------------

(ex.: samples/participants/events)

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

● Yes ○ No

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

■ Yes ○ No

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

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

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

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

	SPDES ID								
Name of MS4/Coalition Town of Malta	1	ΙΥ	R	2	0	А	0	8	6

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 22 brochures taken this year. 238 pet waste fliers distributed with dog licenses. Will continue to ensure that Town Clerk is distributing literature with pet licenses and renewals. Website has received 213 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?							
	1						
	'ex.: samples/participants/events	;)					
D. Has your MS4 made progress toward this Measurable Goal during this I	reporting period?						
	● Yes □ No						
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	● Yes □ No						

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

New 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 town newsletter.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID)
Name of MS4/Coalition City of Mechanicule	N Y R	2 0 A 5 5 1
4. Evaluating Progress Toward Measurable	e Goals MCM 1	
Use this page to report on your progress and pro- identified in your Stormwater Management Pro- III.C.1. Submit additional pages as needed.	• •	_
A. Briefly summarize the Measurable Goal i	identified in the SWMPP in this re	porting period.
The City participated in the Saratoga County C Public Education and Outreach program.	CCE ISWM Program's Stormwater M	Ianagement
B. Briefly summarize the observations that i Goal.	indicated the overall effectiveness	of this Measurable
All selected BMPs detailed in the ISWM Progr	ram Plan continue to be implemented	d.
C. How many times was this observation me	easured or evaluated in this report	ing period?
		x.: samples/participants/events
D. Has your MS4 made progress toward this	s Measurable Goal during this rep	orting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the dead	dline set forth in the SWMPP?	● Yes ○ No
F. Briefly summarize the stormwater activit the next reporting cycle (including an imp	<u>.</u>	is MCM during
The City will continue to implement the Sarato Outreach.	oga County ISWM Program for Educ	cation and

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

			SPDES ID	
Name of MS4/Coalition	City of Mechanicville		N Y R 2 0 A	5 5 1
Use this page to repidentified in your St	ogress Toward Measurable Goals Moort on your progress and project plan tormwater Management Program Planitional pages as needed.	s toward achieving	_	n Part
	rize the Measurable Goal identified	in the SWMPP i	n this renorting ne	riod.
The City wanted a public to report sus www.mechanicvill	more robust form of stormwater educated illicit discharges and more. The estormwater.com, educates the public stormwater mapping, and more.	ation, as well as pr neir stormwater we	rovide the ability to bsite,	the
B. Briefly summar Goal.	rize the observations that indicated	the overall effecti	iveness of this Mea	asurable
Forty two unique v	risitors (excludes 1 repeat visitor) wer	at to the website.		
C. How many time	es was this observation measured o	r evaluated in this		? 4 2 participants/events
D. Has your MS4	made progress toward this Measur	able Goal during	this reporting per ● Yes	
E. Is your MS4 on	schedule to meet the deadline set f	orth in the SWM	PP? • Yes	s O No
•	rize the stormwater activities planning cycle (including an implementa	0	als of this MCM d	uring
The City will conti	nue to update the website and utilize	it for public educat	ion and involveme	nt.

This report is being submitted for the reporting period ending March 9, 2 0 2 3

			SPDES ID	
Name of MS4/Coalition	City of Mechanicville		N Y R 2 0 A 5	5 5 1
4. Evaluating Prog	ress Toward Measurable Goals	MCM 1		
identified in your Sto	ort on your progress and project plormwater Management Program Pional pages as needed.	•		Part
A. Briefly summari	ize the Measurable Goal identifi	ed in the SWMPP i	n this reporting per	riod.
	neld Fall cleanup days, which serving the storm sewer system. This			
B. Briefly summari Goal.	ize the observations that indicat	ed the overall effect	tiveness of this Mea	surable
Residents can leave	their lawn debris out at at any tim	e for regular pickup.		
C. How many times	s was this observation measured	l or evaluated in thi	s reporting period?	
				1
D. Has your MS4 m	nade progress toward this Meas	urable Goal during	this reporting perio	
E Jawann MC4 and	achadula ta maat tha daadkaa a	A foundle in the CVVIII	• Yes	
E. Is your MIS4 on s	schedule to meet the deadline se	et forth in the Swivi	PP? • Yes	○ No
•	ize the stormwater activities plang cycle (including an implemen	U	als of this MCM du	ring
The City plans to co	ntinue offering this service regula	arly.		

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

_			SPDES ID	
Name of MS4/Coalition	City of Mechanicville		N Y R 2 0	A 5 5 1
4. Evaluating Prog	gress Toward Measurable Goals	MCM 1		
identified in your St	ort on your progress and project plormwater Management Program Fitional pages as needed.			
A. Briefly summar	rize the Measurable Goal identif	ied in the SWMPP	in this reporting	g period.
	nicville utilizes their IDDE postcar ndividuals suspected of contributir			
B. Briefly summar Goal.	ize the observations that indicat	ed the overall effec	tiveness of this I	Measurable
	ven the postcard as a means of no dumping paint directly into the sto			
C. How many time	es was this observation measured	l or evaluated in thi	is reporting per	iod?
				1
D. Has your MS4 I	made progress toward this Meas	urable Goal during	g this reporting	es/participants/events period? Yes ONo
E. Is your MS4 on	schedule to meet the deadline se	et forth in the SWM	IPP?	Yes O No
•	rize the stormwater activities pla ng cycle (including an implemen	_	oals of this MCN	A during
They will continue	to distribute the the postcard as ne	eded.		

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

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

SI	PDES ID
Name of MS4/Coalition TOWN OF MILTON	I Y R 2 0 A 1 0 8
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieving a identified in your Stormwater Management Program Plan (SWMPP), includi 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 Pu Outreach.	blic Education and
B. Briefly summarize the observations that indicated the overall effective Goal.	eness of this Measurable
Selected BMPs detailed in ISWM Program Plan continue to be implemented	1
C. How many times was this observation measured or evaluated in this	reporting period?
	2
D. Has your MS4 made progress toward this Measurable Goal during the	(ex.: samples/participants/ever
D. Has your 19154 made progress toward this incasurable Goar during the	• Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMP	P? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goal the next reporting cycle (including an implementation schedule).	s of this MCM during

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.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

	SPL	DES	ID						
Name of MS4/Coalition TOWN OF MOREAU	N	Y	R	2	0	А	1	5	8

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 m	any times	was this	observation	measured o	r evaluated	in this	reporting period?
----	-------	-----------	----------	-------------	------------	-------------	---------	-------------------

	1		
	(ex.: samples/par	ticipants/ev	vents)
D. Has your MS4 made progress toward this Measurable Goal during this	reporting perio	d?	
	Yes	\bigcirc No	

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • 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,	2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID
Name of MS4/Coalition Village of Round Lake	N Y R 2 0 A 0 9 9
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Maintain constant stock of literature available at Village Hall and available to the interested public. Continue participation in the Saratoga County/CCE Intermunicipation (ISWM) Program Public Education and Outreach Program.	
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
Stock of materials was checked and determined adequate.	
C. How many times was this observation measured or evaluate	ed in this reporting period?
	(ex.: samples/participants/e
D. Has your MS4 made progress toward this Measurable Goal	during this reporting period? • Yes • No
E. Is your MS4 on schedule to meet the deadline set forth in th	
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	
The Round Lake Village newsletter (e-letter; distributed via email website) will include a 4-part series of homeowner/resident tips/tecleawn/Organic Debris disposal and Property Maintenance: 3) Illicit	chniques covering 1) Pet Waste; 2)

Cisterning, & Rain Gardens. One article will appear in each of the Village's Quarterly newsletters.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

SPDES ID

Name of MS4/Coalition Saratoga County ISWM Program

N Y R 2 0 C 0 0 6

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 (267 attendees, 1,068hrs of training); the ISWM Program website 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 (187 attendees, 748hrs of education/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 O No

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

♥ Yes ○ No

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

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

-Update existing "Story Maps" to website via ESRI ArcGIS Online Story Map tool

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

	SPI	DES	ID						
Name of MS4/Coalition City of Saratoga Springs	N	Y	R	2	0	А	2	1	6

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 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.
- (10,300) utility bills mailed quarterly with information about stormwater pollution prevention.
- Brochures and other printed material made available to general public in City Engineers Office.
- Pet waste and waterfowl feeding signs posted at Congress Park, Farmers Market, and other locales.
- (25) "Don't Pollute" storm drain decals installed or replaced this report year.

Continued northination in Southern Co. CCC I SWM Drawn and the activities

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

		3	6	5	
samp	les/	part	ici	pant	:s/events

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

● Yes ○ No

(ex.:

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

● Yes ○ 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 provide waste collection bags.
- Install new or replace worn "Don't Pollute" storm drain decals.

Continue norticination in Seventage Co. CCE I SWM Drawon mublic ad Praytogesh activities

SPDES ID

6932504403

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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	N Y R 2 0 A 0 9 1
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward ac identified in your Stormwater Management Program Plan (SWMPP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
Continue participation in the Saratoga County CCE ISWM Program Public Education and Outreach.	n's Stormwater Management
B. Briefly summarize the observations that indicated the overal Goal.	l effectiveness of this Measurable
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? (ex.: samples/participants/events)
D. Has your MS4 made progress toward this Measurable Goal d	luring this reporting period? • Yes • No
E. Is your MS4 on schedule to meet the deadline set forth in the	SWMPP? • Yes O No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedu	the goals of this MCM during le).
Continue implementation of the Saratoga County ISWM Program E-Maintain website: ongoing throughout the year	ducation/Outreach Program

-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

6932504403

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \ 0 \ 2 \ 3$

Name of MS4/Coalition	Town of Stillwater	N Y R 2 0 A 5 4 9
4. Evaluating Prog	gress Toward Measurable Goals MCM 1	
identified in your St	ort on your progress and project plans toward ormwater Management Program Plan (SWMF tional pages as needed.	
A. Briefly summar	ize the Measurable Goal identified in the S	WMPP in this reporting period.
materials for develo	ater provided stormwater materials with site papers (11 total) and residents at the Stillwater Saratoga Lake Water Quality Report. The Tow Saratoga County ISWM Program for Public County	Fown Hall. A public workshop was on of Stillwater continues to
B. Briefly summar Goal.	ize the observations that indicated the over	all effectiveness of this Measurable
Plan Review, Special Subdivision Review	ater ensured compliance through the review of al Use Permit Review, Planned Development 7. Participation with the Saratoga ISWM Prograd Outreach that can be achieved.	District Review, and Major
C. How many time	s was this observation measured or evaluat	red in this reporting period?
D. Has your MS4 n	nade progress toward this Measurable Goa	l during this reporting period?
E. Is your MS4 on	schedule to meet the deadline set forth in th	● Yes ○ No he SWMPP? ● Yes ○ No
-	ize the stormwater activities planned to meding cycle (including an implementation sche	Č Ç
The Town will ensu Continued participa	ater will continue to maintain the website links are that direct education materials are available tion in ongoing provided training opportunitie tion in the Saratoga County ISWM Program.	e at the Town Hall kiosk.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

SPI	DES ID
Name of MS4/Coalition Village of Stilwater N	Y R 2 0 A 5 4 7
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieving midentified in your Stormwater Management Program Plan (SWMPP), includin III.C.1. Submit additional pages as needed.	AMERICAN SERVICE SERVI
A. Briefly summarize the Measurable Goal identified in the SWMPP in the	his reporting period.
The Village of Stillwater includes stormwater materials with site plan applical made available to developers and residents at the Stillwater Town Hall. The Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Saratoga County ISWM Program for Public Continues to participate with the Sarato	Village of Stillwater
B. Briefly summarize the observations that indicated the overall effective Goal.	ness of this Measurable
Compliance with review of development procedures for Site Plan Review was Participation with the Saratoga ISWM Program continues to build on areas of Outreach that can be achieved.	
C. How many times was this observation measured or evaluated in this re	porting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this Measurable Goal during thi	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goals the next reporting cycle (including an implementation schedule).	of this MCM during
The Village maintains website links for stormwater references. The Village ensures that direct education materials are available at the Stillwa Continued participation in ongoing provided training opportunities.	ter Town Hall.

Continued participation in the Saratoga County ISWM Program.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Waterford	N Y R 2 0 A 0 3 7
Name of MS4/Coalition 10wn of waterford	
4. Evaluating Progress Toward Measurable Goals MCM	1
Use this page to report on your progress and project plans tovidentified in your Stormwater Management Program Plan (SV III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in t	he SWMPP in this reporting period.
The Town maintained educational kiosks at the Town Hall a among other pamphlets and brochures, information about sto	,
B. Briefly summarize the observations that indicated the Goal.	overall effectiveness of this Measurable
Four different stormwater pamphlets/brochures are made ava "Where does all the Dirty Water Go?"; "10 Things You Can Pollution"; "Stormwater Regulations and the Construction In	do to Prevent Stormwater Runoff
C. How many times was this observation measured or eva	aluated in this reporting period?
D. Has your MS4 made progress toward this Measurable	(ex.: samples/participants/events Goal during this reporting period?
	• Yes • No
E. Is your MS4 on schedule to meet the deadline set forth	in the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to the next reporting cycle (including an implementation	9
The Town will continue to maintain the educational kiosk.	

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

	SPDES ID
Name of MS4/Coalition Town of Waterford	N Y R 2 0 A 0 3 7
4. Evaluating Progress Toward Measurable Goals	MCM 1
Use this page to report on your progress and project plaidentified in your Stormwater Management Program P III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identifi	ed in the SWMPP in this reporting period.
The Town maintained its stormwater website: www.w public, notifies of stormwater program events, include	
B. Briefly summarize the observations that indicate Goal.	ed the overall effectiveness of this Measurable
The website received 61 visitors during this reporting	period.
C. How many times was this observation measured	6 1
D. Has your MS4 made progress toward this Meass	(ex.: samples/participants/events urable Goal during this reporting period?
E. J	• Yes • No
E. Is your MS4 on schedule to meet the deadline se	t forth in the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planthe next reporting cycle (including an implement	
The Town will continue to update the website and util	ize it for public education and involvement.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	_	SPL	DES	ID						
Name of MS4/Coalition Town of Wilton		N	Y	R	2	0	А	1	1	4

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.

Selected BMPs detailed in the ISWM Program Plan continue to be implemented when practical.

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



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

• Yes O No

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

● Yes ○ 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 education/outreach programming; ongoing throughout the year, when feasible.
- Continue SW Regional Training Center; ongoing throughout the year, when feasible.

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

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

			-	SPL	DES	ID						
Name of MS4/Coalition	Saratoga County ISWM Program			N	Y	R	2	0	C	0	0	6
3.6.	C / 134	4 D I II I		. /TD			•					

Minimum Control Measure 2. Public Involvement/Participation

 On behalf of an individual MS4 On behalf of a coalition 			
How many MS4s contributed to this report?	1	9	

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

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

• Cleanup Events	# Events				0				
O Comments on SWMP Received	# Comments								
● Community Hotlines Phone # ()	_							
Phone # (5 1 8) 8 8 5 - 8 9 9 5 Phone # (-							
Phone # (Phone # (-							
Phone # (Phone # (-							
Phone # (Phone # (_							
Phone # (Phone # ()	-							
O Community Meetings	# Attendees								
○ Plantings	Sq. Ft.								
 Storm Drain Markings 	# Drains				0				
O Stakeholder Meetings	# Attendees								
O Volunteer Monitoring	# Events								
Other:									
2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? • Yes • No									
• List-Serve	# In List		6	1 .	4				
O Newspaper Advertising	# Days Run								
○ TV/Radio Notices	# Days Run								
Other:									

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

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

		SPDES ID				
Name of MS4/Coalition Town of Ballston		N Y R 2	0	A 1	5	7
Minimum Control Measure 2. Public In	volvem	ent/Participa	<u>atio</u>	<u>n</u>		
The information in this section is being reported (check one):						
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 						
1. What opportunities were provided for public participal development, evaluation and improvement of the Storm (SWMP) Plan during this reporting period? Check all	nwater M	Tanagement Pi	-	'am		
Cleanup Events		# Events				1
O Comments on SWMP Received		# Comments				
● Community Hotlines Phone #	()] - [
Phone # (5 1 8) 4 9 0 - 2 7 1 5 Phone #	()] - [
Phone # (5 1 8) 8 8 5 - 8 9 9 5 Phone #	(] - [
Phone # (Phone #	()] - [
Phone # (Phone #	()] - [
Phone # (Phone #	()	- [
O Community Meetings		# Attendees				
○ Plantings		Sq. Ft.				
O Storm Drain Markings		# Drains				
O Stakeholder Meetings		# Attendees				
O Volunteer Monitoring		# Events				
Other: Watershershershers	e n t	P l a n				
2. Was public notice of availability of this annual report a Program (SWMP) Plan provided?	and Stori	nwater Manag	,	ent Yes	0	No
• List-Serve		# In List			3	9
O Newspaper Advertising		# Days Run				
○ TV/Radio Notices		# Days Run				
Other: TownBoard Meetin	g A	n n o u n	С			
• Web Page URL: Enter URL(s) on the following two pages.						

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

	DI DES ID				
Name of MS4/Coalition Town of Charlton	N Y R 2	0 4	0	3	2
Minimum Control Measure 2. Public Involv	ement/Particip	ation	<u>l</u>		
The information in this section is being reported (check one):					
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 					
1. What opportunities were provided for public participation is development, evaluation and improvement of the Stormwate (SWMP) Plan during this reporting period? Check all that	er Management P	-	ı m		
• Cleanup Events	# Events				1
O Comments on SWMP Received	# Comments				0
● Community Hotlines Phone # (] -			
Phone # (5 1 8) 8 8 5 - 8 9 9 5 Phone # (_			
Phone # (Phone # (_			
Phone # (Phone # (] - [
Phone # (Phone # (_			
Phone # (Phone # (-			
O Community Meetings	# Attendees				
○ Plantings	Sq. Ft.				
Storm Drain Markings	# Drains				5
O Stakeholder Meetings	# Attendees				
O Volunteer Monitoring	# Events				
Other: Town&PlanningBoard	mts.	2 4	:		
2. Was public notice of availability of this annual report and S Program (SWMP) Plan provided?	tormwater Mana	gemei • Y			No
● List-Serve	# In List	1	L 6	3	5

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

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O Newspaper Advertising

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O TV/Radio Notices

• Other:

H a

1 | 1

Days Run

Days Run

MS4 Annual Report Form

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		N Y R 2	0	A 0	3	5
Minimum Control Measure 2. Public Invo	lvemen	t/Particip	atio	<u>)n</u>		
The information in this section is being reported (check one):						
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	1					
1. What opportunities were provided for public participation development, evaluation and improvement of the Stormw (SWMP) Plan during this reporting period? Check all the	ater Ma	nagement P	_	ram		
● Cleanup Events		#Events				2
O Comments on SWMP Received		# Comments				Ī
● Community Hotlines Phone # (-			
Phone # (5 1 8) 8 8 5 - 8 9 9 5 Phone # (Ī -			
Phone # (Phone # ()	-			
Phone # (Phone # ()	-			
Phone # (Phone # (Ī -			
Phone # (Phone # (_			
○ Community Meetings		# Attendees				
○ Plantings		Sq. Ft.				
O Storm Drain Markings		# Drains				
O Stakeholder Meetings		# Attendees				
O Volunteer Monitoring		#Events				
● Other: 0 Stewardship Walk	S					
2. Was public notice of availability of this annual report and Program (SWMP) Plan provided?	d Stormv	vater Manaş	_	ent Yes	0	N
● List-Serve		# In List		6	1	4
O Newspaper Advertising		# Days Run				
○ TV/Radio Notices		# Days Run				
Other:						

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

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

SPDES ID

	 SPD	<u>ES</u>	ID						
Name of MS4/Coalition Town of Greenfield	N	Y	R	2	0	A	1	2	3

Minimum Control Measure 2. Public Involvement/Participation

	_	•	`			
On behalf of an individual MS4						
On behalf of a coalition						
How many MS4s con	trib	uted to	this rep	ort?	1	

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

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

Cleanup Events	# Events		> 5
O Comments on SWMP Received	#Comments		0
Community Hotlines	Phone # ()	-	
Phone # (5 1 8) 8 8 5 - 8 9 9 5	Phone # ())	-	
Phone # ()	Phone # ()	-	
Phone # ()	Phone # ()	-	
Phone # ()	Phone # ()	-	
Phone # ()	Phone # ()	-	
O Community Meetings	# Attendees		
○ Plantings	Sq. Ft.		
O Storm Drain Markings	#Drains		
O Stakeholder Meetings	# Attendees		
O Volunteer Monitoring	# Events		
● Other: Town&Planning	Board mts.	2 4	
2. Was public notice of availability of this annu Program (SWMP) Plan provided?	al report and Stormwater Manago	ement • Yes	○ No
○ List-Serve	# In List		
O Newspaper Advertising	# Days Run		
○ TV/Radio Notices	# Days Run		

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

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Other: T

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This report is being submitted for the reporting period ending March 9, 2 0 2 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Ν Y R 2 0 A 3 7 5 Name of MS4/Coalition Town of Halfmoon Minimum Control Measure 2. Public Involvement/Participation The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply: Cleanup Events # Events 1 O Comments on SWMP Received #Comments Community Hotlines Phone # 1 0 Phone # 8 9 5 Phone # Phone # Phone # Phone # Phone # Phone # Phone # Phone # Phone # O Community Meetings # Attendees Plantings Sq. Ft. O Storm Drain Markings #Drains O Stakeholder Meetings # Attendees O Volunteer Monitoring # Events Other: 2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? **Yes** \bigcirc No List-Serve 1 2 # In List 6 O Newspaper Advertising # Days Run O TV/Radio Notices # Days Run Other:

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

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Malta													N	Y	R	2	0	А	0	8	6				
- -	Mini	imun	n (Con	tro	M	eas	sui	e 2	2. F	Publi	e Iı	1V(lv	em	en	t/P	ar	tic	ip <i>a</i>	ıtio	<u>)n</u>			
The information in this section is being reported (check one):																									
On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?																									
1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:																									
O Cleanup Ev	vents																	# E	ven	its					
O Comments	on SV	WMP :	Rec	eive	ed												# C	omi	nen	ts					
Community	/ Hotl	lines									Phon	e #	(5	1	8)	8	9	9	-	2	6	8	5
Phone #	5	1 8)[8	8 5	_	8	9	9	5	Phon	e #	()				-				
Phone #)			_					Phon	e #	()				-				
Phone #)] -					Phon	e #	()				-				
Phone #)] -					Phon	e #	()				-				
Phone #)			_					Phon	e #	()				-				
O Community	Mee	tings		·		_								,			# 1	Atte	nde	es					
O Plantings																		S	q. F	₹t.					
O Storm Drai	n Maı	rkings																# D	raiı	ns					
O Stakeholder	r Mee	etings															# 1	Atte	nde	es					
O Volunteer	Monit	oring																# E	ven	ts					
Other:																									
2. Was pub Program								this	s an	nua	al rep	ort	and	l S	tor	mw	ate	er N	A aı	nag		ent]Ye			No
O List-Serve																		# I:	n Li	st					
O Newspaper	Adve	ertising	5														#]	Day	s Rı	ın					
O TV/Radio	Notice	es															#]	Day	s Rı	ın					
Other: T	O W	n	В	0	a :	r d	L	M	е	е	t i	n	g			4	/	2	4	/	2	0	2	3	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition City of Mechanicville					N	Y	R	2	0	A	5	5	1
Minimum Control Measure 2.	Public I	nvol	ven	nen	t/P	ar	tici	ipa	<u>ıtic</u>	<u>)n</u>			
The information in this section is being reported (check	one):												
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this re 	port?												
1. What opportunities were provided for public development, evaluation and improvement of (SWMP) Plan during this reporting period?	f the Stor	mwa	ter :	Mai	nag			-	-	ran	1		
○ Cleanup Events						# E	ven	ts					
O Comments on SWMP Received					# C	omr	nen	ts					
Community Hotlines	Phone #	(5 1	8)	8	8	5	-	8	9	9	5
Phone # ()	Phone #	()				_				
Phone # ()	Phone #	()				-				
Phone # ()	Phone #	()				_				
Phone # ()	Phone #	()				-				
Phone # ()	Phone #	()				_				
O Community Meetings					# 1	Atte	nde	es					
○ Plantings						S	q. F	t.					
O Storm Drain Markings						# D	rair	ıs					
O Stakeholder Meetings					# 1	Atte	nde	es					
Comments on SWMP Received #Comments Phone # (5 1 8) 8 8 5 - 8 9 Phone # (
Other:													
•	al report	and	Sto	mv	vate	er N	A ar	ıag				0	No
○ List-Serve						# I1	n Li	st					
O Newspaper Advertising					#]	Days	s Ru	ın					
○ TV/Radio Notices					#]	Days	s Ru	ın					
Other: A n n o u n c e d a t C	o u n	С	i l		M	t	g		5	/	1	0	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

TOWN OF MILTON Ν Υ R 2 Α 0 8 Name of MS4/Coalition Minimum Control Measure 2. Public Involvement/Participation The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition 1 How many MS4s contributed to this report? 1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply: O Cleanup Events # Events O Comments on SWMP Received # Comments 0 Community Hotlines Phone # 0 0 Phone # Phone # Phone # Phone # 0 0 0 0 Phone # Phone # 0 0 0 0 Phone # Phone #

○ Community Meetings
○ Plantings
○ Storm Drain Markings
Drains

O Stakeholder Meetings # Attendees
O Volunteer Monitoring # Events

0

Phone #

0

Other:

2. Was public notice of availability of this annual report and Stormwater Management
Program (SWMP) Plan provided?

○ Yes

No

○ List-Serve

In List

○ Newspaper Advertising

Days Run

O TV/Radio Notices # Days Run

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

0

Phone #

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Minimum Control Measure 2.	Public I	nvo	lven	ien	t/P	ar	tic	ipa	<u>atic</u>	<u>)n</u>			
The information in this section is being reported (check	k one):												
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this remains the contributed to the contr	eport?												
1. What opportunities were provided for public development, evaluation and improvement of (SWMP) Plan during this reporting period?	of the Stor	mw	ater 1	Mai	nag				_	ran	n		
○ Cleanup Events						# E	ver	nts					
O Comments on SWMP Received					# C	omi	ner	ıts					
Community Hotlines	Phone #	(5 1	8)	7	9	2	_	4	7	6	2
Phone # (5 1 8) 8 8 5 - 8 9 9 5	Phone #	()				_				
Phone # () -	Phone #	()				_				
Phone # () -	Phone #	()				_				
Phone # () -	Phone #	()				 				
Phone # () -	Phone #	()				_				
O Community Meetings	_				# .	Atte	nde	es					
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O Storm Drain Markings						# D	rai	ns					
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MS4 Annual Report Form This report is being submitted for the reporting period ending March 9, 2 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Village of Round Lake N Y R 2 0 A Name of MS4/Coalition Minimum Control Measure 2. Public Involvement/Participation The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply: Cleanup Events # Events 2 O Comments on SWMP Received #Comments O Community Hotlines Phone # Phone # Phone # Phone # Phone # Phone # Phone # Phone# Phone # Phone # Phone # Community Meetings # Attendees 3 0 Plantings 5 0 Sq. Ft. O Storm Drain Markings # Drains Stakeholder Meetings 5 # Attendees O Volunteer Monitoring # Events 4 Other: 2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? Yes O No List-Serve # In List 6 0 0 O Newspaper Advertising # Days Run O TV/Radio Notices # Days Run

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

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Minimum Control Measure 2. Public Involvement/Participation

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

On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report?

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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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.

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Town of Stillwater

Town of Stillwater

Town of Stillwater

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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. SPDES ID 7 Village of Stillwater NYR2 0 A 5 Name of MS4/Coalition Minimum Control Measure 2. Public Involvement/Participation The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply: #Events O Cleanup Events O Comments on SWMP Received #Comments O Community Hotlines Phone# Phone # Phone# Phone# Phone # Phone# Phone # Phone # Phone # Phone # Phone # O Community Meetings # Attendees O Plantings Sq. Ft. Storm Drain Markings #Drains # Attendees O Stakeholder Meetings O Volunteer Monitoring # Events Other: 2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? Yes O No # In List O List-Serve O Newspaper Advertising # Days Run # Days Run O TV/Radio Notices Other:

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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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Town of Waterford

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Name of MS4/Coalition Minimum Control Measure 2. Public Involvement/Participation The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply: Cleanup Events # Events 1 Comments on SWMP Received 0 #Comments Community Hotlines Phone # 8 8 9 5 Phone # Phone # Phone # Phone # Phone # Phone # Phone # Phone # Phone # Phone # O Community Meetings # Attendees Plantings Sq. Ft. O Storm Drain Markings #Drains O Stakeholder Meetings # Attendees O Volunteer Monitoring # Events i Other: R е С n D $H \mid H \mid H \mid W$ У С g а У S a y S 2. Was public notice of availability of this annual report and Stormwater Management Yes \bigcirc No **Program (SWMP) Plan provided?** O List-Serve # In List O Newspaper Advertising # Days Run O TV/Radio Notices # Days Run Other: P i 0 S t е d o n W е b S t е

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 \end{bmatrix}$ 3

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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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MS4 Annual Report Form

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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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MS4 Annual Report Form

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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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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 $\Big|^{Town\ of\ Ballston}$

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MS4 Annual Report Form

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Name of MS4/Coalition Town of Charlton

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MS4 Annual Report Form

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Name of MS4/Coalition Town of Greenfield

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Name of MS4/Coalition Town of Halfmoon

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MS4 Annual Report Form

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Name of MS4/Coalition

TOWN OF MILTON

MS4 Annual Report Form

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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, 2

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Name of MS4/Coalition Saratoga County ISWM Program 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents? Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed. MS4/Coalition Office Annual Report SWMP Plan Comments Department С С Е Ι S W Μ Ρ S ar а t g a r g r a m 0 0 Address 5 i S t 0 t Η h t r е W е S g е City Zip Y 1 S N В а S t 0 n р а Phone O Library Address O SWMP Plan O Comments O Annual Report Zip City Phone O Annual Report O SWMP Plan Comments Other Address City Zip Phone • Web Page URL: Annual Report O SWMP Plan Comments t t t t r а t е р W W S а r а g а S 0 m W i i 1 i í d d i t i 1 u С р а t е S а 0 n а g m n 0 u r С е S h t m Please provide specific address of page where report can be accessed - not home page. eMail Comments 5 @ С 1 1 d 0 r n е е u b r n

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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, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

SPDES ID Name of MS4/Coalition Town of Stillwater Ν YR 0 A 5 4 9 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents? Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed. MS4/Coalition Office Annual Report
 SWMP Plan
 Comments Department 1 a n n i n D t m e g е р а n Address 8 d Α 8 1 Hu s 0 n е n u е v Zip City 2 7 0 S i 1 Ν Y 1 1 t 1 W а t е r Phone 5 1 1 6 O Library Address O Annual Report O SWMP Plan O Comments City Zip Phone Other O Annual Report O SWMP Plan O Comments Address City Zip

Web Page URL:	O Annual Report	O SWMP Plan	O Comments

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SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \\ 2 & 3 \end{bmatrix}$

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

NYR 7 Village of Stillwater 0 A 5 4 Name of MS4/Coalition 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents? Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed. MS4/Coalition Office Annual Report
 SWMP Plan
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SPDES ID

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

3. Where can the public access copies of this annual report, Stormwater Management

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Name of MS4/Coalition Town of Wilton

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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This report is being submitted for the reporting period ending March 9, 2 0 2 3

	_	SPI	DES ID						
Name of MS4/Coalition Saratoga County ISWM Program		N	YR	2	0	С	0	0	6
4.a. If this report was made available on the internet, what da	ate was i	t po	sted?	1					
Leave blank if this report was not posted on the internet.	0	4	/ 1	9	/	2	0	2	3
4.b. For how many days was/will this report be posted?							9	9	9
If submitting a report for single MS4, answer 5.a If submitt	ting a joi	nt re	eport,	ans	wei	r 5.1	b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting peri	od?	/) /	Ye	es		No
If No, is one planned?					0	Ye	es		No
5.b. Was an Annual Report public meeting held for all MS4s	contrib	utin	g to t	his	rep	ort	t du	ırin	ıg
this reporting period?					0	Ye	es		No
If No, is one planned for each?					0	Ye	es		No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					0	Ye	es		No

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

<u> </u>	_	SPI	DES ID)					
Name of MS4/Coalition Town of Ballston		N	YR	2	0	А	1	5	7
4.a. If this report was made available on the internet, what da	ate was it	t po	sted						
Leave blank if this report was not posted on the internet.	0	4	/ 2	6]/[2	0	2	3
4.b. For how many days was/will this report be posted?							3	6	5
If submitting a report for single MS4, answer 5.a If submitt	ting a join	nt re	eport,	ans	weı	r 5.1	b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting perio	od?	/)]/[Ye	es		No
If No, is one planned?					0	Ye	es		No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	ıtin	g to t	his	rep	ort	t du	ırin	ıg
this reporting period?			J		-	Ye			No
If No, is one planned for each?					0	Ye	es		No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					0	Ye	es		No

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPDES ID		
Name of MS4/Coalition Town of Charlton	N Y R 2	2 0 A 0	3 2
4.a. If this report was made available on the internet, what date wa	s it posted?		
Leave blank if this report was not posted on the internet.	/	/	
4.b. For how many days was/will this report be posted?			
If submitting a report for single MS4, answer 5.a If submitting a	joint report, ar	iswer 5.b	
5.a. Was an Annual Report public meeting held in this reporting p If Yes, what was the date of the meeting?	eriod?	○ Yes	⊗ No
If No, is one planned?		○ Yes	& No
5.b. Was an Annual Report public meeting held for all MS4s contr	ibuting to thi	s report d	uring
this reporting period?		○ Yes	No
If No, is one planned for each?		○ Yes	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.		○ Yes	• No

0614183104

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 2 \begin{vmatrix} 3 & 3 \end{vmatrix}$

				SPDI	ES ID					
Name of MS4/Coalition	TOWN OF CLIFTON PARK			N I	YR	2	0	A	0 3	5
4.a. If this report v	was made available on the in	ternet, what da	ite was it	t pos	sted?					
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4.b. For how many	y days was/will this report b	e posted?							3 6	5
If submitting a	report for single MS4, answer	5.a If submitti	ing a joir	nt rep	port,	ans	wer	5.b		
	al Report public meeting hel t was the date of the meeting?	d in this report	ing perio	od?	/) 	Yes		No
If No, is one	e planned?						0	Yes		No
5.b. Was an Annu	al Report public meeting hel	d for all MS4s	contribu	ıting	to tl	nis	rep	ort (duri	ng
this reporting	g period?						0	Yes		No
If No, is one	e planned for each?						0	Yes		No
If Yes, attach co	ts received during this report comments, responses and change	ges made to					0	Yes		No

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPDES ID
Name of MS4/Coalition Town of Greenfield	N Y R 2 0 A 1 2 3
4.a. If this report was made available on the internet, what date w	vas it posted?
Leave blank if this report was not posted on the internet.	
4.b. For how many days was/will this report be posted?	
If submitting a report for single MS4, answer 5.a If submitting a	a joint report, answer 5.b
5.a. Was an Annual Report public meeting held in this reporting If Yes, what was the date of the meeting?	period?
If No, is one planned?	○ Yes ○ No
5.b. Was an Annual Report public meeting held for all MS4s cont	tributing to this report during
this reporting period?	○ Yes • No
If No, is one planned for each?	○ Yes ● No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.	○ Yes ● No

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$ 3

SPDES ID		
Name of MS4/Coalition Town of Halfmoon N Y R 2	0 A 3	7 5
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?	9	9 9
If submitting a report for single MS4, answer 5.a If submitting a joint report, and	swer 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? $ \boxed{0 \mid 4 \mid / \mid 0 \mid 5} $	/ 2 0	2 3
If No, is one planned?	○ Yes	○ No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this	report dı	ıring
this reporting period?	○ Yes	No
If No, is one planned for each?	○ Yes	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.	○ Yes	• No

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPDES ID
Name of MS4/Coalition Town of Malta	N Y R 2 0 A 0 8 6
4.a. If this report was made available on the internet, what date	was it posted?
Leave blank if this report was not posted on the internet.	0 4 / 2 4 / 2 0 2 3
4.b. For how many days was/will this report be posted?	9 9 9
If submitting a report for single MS4, answer 5.a If submitting	g a joint report, answer 5.b
5.a. Was an Annual Report public meeting held in this reporting If Yes, what was the date of the meeting?	g period?
If No, is one planned?	□Yes •No
5.b. Was an Annual Report public meeting held for all MS4s con	ntributing 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.	

This report is being submitted for the reporting period ending March 9, 2 0 2 3

		SPD	ES ID	SPDES ID Name of MSA/Coalition City of Mechanic ville Name of MSA/Coalition City of Mechanic ville				
Name of MS4/Coalition City of Mechanicville		N	YR	2	0 2	A 5	5	1
4.a. If this report was made available on the internet, what da	te was it	t po	sted?	•				
Leave blank if this report was not posted on the internet.	0	6	/ 0	1	/ 2	2 0	2	3
4.b. For how many days was/will this report be posted?						3	6	5
If submitting a report for single MS4, answer 5.a If submitti	ing a joir	nt re	port,	ans	wer	5.b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ing perio	od?	/			Yes		No
If No, is one planned?					0	Yes		No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	tin	g to t	his	repo	rt d	urin	ıg
this reporting period?					0	Yes	0	No
If No, is one planned for each?					0	Yes	0	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					0	Yes		No

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

	SPD	DES ID					
Name of MS4/Coalition TOWN OF MILTON	N	YR	2	0 A	. 1	0	8
4.a. If this report was made available on the internet, what date	e was it po	sted?					
Leave blank if this report was not posted on the internet.	0 6	/ 0	1	1 2	0	2	3
4.b. For how many days was/will this report be posted?					3	6	5
If submitting a report for single MS4, answer 5.a If submitting	ng a joint re	eport,	ans	wer 5	5.b		
5.a. Was an Annual Report public meeting held in this reporting If Yes, what was the date of the meeting?	ng period?	/ 0		○ Y / _	es		No
If No, is one planned?				O Y	es	•	No
5.b. Was an Annual Report public meeting held for all MS4s co	ontributin	g to tl	his	repo	rt d	urir	ıg
this reporting period?				\circ Y	es		No
If No, is one planned for each?				O Y	es	•	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.				O Y	es		No

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	5	SPD	ES ID					
Name of MS4/Coalition TOWN OF MOREAU		N	YR	2	0 2	A 1	5	8
4.a. If this report was made available on the internet, what date	e was it	po	sted?	•				
Leave blank if this report was not posted on the internet.	0		/ 0	4	/	2 0	2	3
4.b. For how many days was/will this report be posted?						9	9	9
If submitting a report for single MS4, answer 5.a If submittin	g a join	ıt re	port,	ans	wer	5.b		
5.a. Was an Annual Report public meeting held in this reportin If Yes, what was the date of the meeting?	g perio	od?	/			Yes		No
If No, is one planned?					0	Yes	•	No
5.b. Was an Annual Report public meeting held for all MS4s co	ontribu	tin	g to t	his	repo	ort d	uriı	ng
this reporting period?					0	Yes		No
If No, is one planned for each?					0	Yes	•	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					0	Yes	•	No

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	_	S	SPDI	ES ID	1					
Name of MS4/Coalition Village of Round Lake			N .	YR	2	0	A	0	9	9
4.a. If this report was made available on the internet, what da	ate wa	s it	pos	ted?	,					
Leave blank if this report was not posted on the internet.		0	3	0	8	/	2	0	2	3
4.b. For how many days was/will this report be posted?									6	0
If submitting a report for single MS4, answer 5.a If submitti	ing a j	oin	t rep	ort,	ans	wei	· 5.1	b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ing pe	erio	d?	/		0	Ye	s	•]	No
If No, is one planned?						0	Ye	s	•]	No
5.b. Was an Annual Report public meeting held for all MS4s of	contri	but	ing	to t	his 1	rep	ort	du	rin	g
this reporting period?						0	Ye	S		No
If No, is one planned for each?						0	Yes	S	• 1	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.						0	Yes	S	• 1	No

0614183104

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 & 3 \end{bmatrix}$

	_ :	SPDE	$s_{\rm ID}$					
Name of MS4/Coalition Saratoga County ISWM Program		N Y	R	2	0 C	0	0	6
4.a. If this report was made available on the internet, what d	ate was it	post	ed?					
Leave blank if this report was not posted on the internet.	0	4 /	1	9	1 2	2 0	2	3
4.b. For how many days was/will this report be posted?						9	9	9
If submitting a report for single MS4, answer 5.a If submit	ting a join	t rep	ort,	ansv	wer 5	5.b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting perio	od? /			○ Y / [Zes		No
If No, is one planned?					\circ Y	∕es	•	No
5.b. Was an Annual Report public meeting held for all MS4s	s contribu	ting	to tl	nis 1	repo	rt d	urin	ıg
this reporting period?					\circ Y	/es		No
If No, is one planned for each?					\circ 7	l'es		No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					O Y	les .	•	No

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	_ <u>S</u>	<u>PDES</u>	ID					
Name of MS4/Coalition City of Saratoga Springs	1	N Y	R	2	0 A	. 2	1	6
4.a. If this report was made available on the internet, what da	ate was it	poste	d?		_			
Leave blank if this report was not posted on the internet.	0	5 /	0	2	/ 2	2 0	2	3
4.b. For how many days was/will this report be posted?						9	9	9
If submitting a report for single MS4, answer 5.a If submitt	ting a joint	repo	rt, a	ans	wer 5	i.b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting period	d? /			○ Y /	es		No
If No, is one planned?					\circ Y	es	•	No
5.b. Was an Annual Report public meeting held for all MS4s	contribut	ing to	o th	is 1	repo	rt dı	urin	ıg
this reporting period?					\circ Y	es		No
If No, is one planned for each?					\circ Y	'es		No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to					\circ Y	'es		No
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, 2 0 2 3

	SPD	ES ID)				
Name of MS4/Coalition South Glens Falls	N	YR	2	0	A 0	9	1
4.a. If this report was made available on the internet, what date was it	po	sted?	•				
Leave blank if this report was not posted on the internet.		/ 0		/[
4.b. For how many days was/will this report be posted?					3	6	5
If submitting a report for single MS4, answer 5.a If submitting a join	ıt re	port,	ans	wer	5.b		
5.a. Was an Annual Report public meeting held in this reporting period	od?	. —		0	Yes	9	No
If Yes, what was the date of the meeting?		/ 0		/			
If No, is one planned?				0	Yes	0	No
5.b. Was an Annual Report public meeting held for all MS4s contribu	ting	g to tl	his 1	repo	ort d	urir	ıg
this reporting period?				0	Yes	9	No
If No, is one planned for each?				0	Yes	9	No
6. Were comments received during this reporting period?				0	Yes	9	No
If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.							

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPDES ID		
Name of MS4/Coalition Town of Stillwater	NYR2	0 A 5	4 9
4.a. If this report was made available on the internet, what date	e was it posted?		
Leave blank if this report was not posted on the internet.	0 5 / 0 1	/ 2 0	2 3
4.b. For how many days was/will this report be posted?			3 0
If submitting a report for single MS4, answer 5.a If submitting	g a joint report, ansv	ver 5.b	
5.a. Was an Annual Report public meeting held in this reportin	g period?	O Yes	No
If Yes, what was the date of the meeting?		1	
If No, is one planned?		○ Yes	• No
5.b. Was an Annual Report public meeting held for all MS4s co	ontributing to this r	eport dı	aring
this reporting period?		○ Yes	No
If No, is one planned for each?		○ Yes	• No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.		○ Yes	• No

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPDES ID	29 200 200 20	200
Name of MS4/Coalition Village of Stillwater	N Y R 2	0 A 5	4 7
4.a. If this report was made available on the internet, what date	was it posted?		
Leave blank if this report was not posted on the internet.	0 5 / 0 1	2 0	2 3
4.b. For how many days was/will this report be posted?			3 0
If submitting a report for single MS4, answer 5.a If submitting	a joint report, answ	er 5.b	
5.a. Was an Annual Report public meeting held in this reporting If Yes, what was the date of the meeting?	g period?	O Yes	• No
If No, is one planned?		○ Yes	• No
5.b. Was an Annual Report public meeting held for all MS4s conthis reporting period?	7. 70 7.	_	-
		○ Yes	• No
If No, is one planned for each?		○ Yes	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.		○ Yes	• No

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$ 3

SPDES ID Name of MS4/Coalition Town of Waterford N Y R 2 0 A 0 3 7								
Name of MS4/Coalition Town of Waterford		N	YR	2	0 .	A C	3	7
4.a. If this report was made available on the internet, what date v	vas it	po	sted:	?				
Leave blank if this report was not posted on the internet.	0	6	/ 0	1	/	2 0	2	3
4.b. For how many days was/will this report be posted?						3	6	5
If submitting a report for single MS4, answer 5.a If submitting	a join	nt re	port,	ans	wer	5.b.		
5.a. Was an Annual Report public meeting held in this reporting If Yes, what was the date of the meeting?	perio	od?	/			Yes		No
If No, is one planned?						Yes	•	No
5.b. Was an Annual Report public meeting held for all MS4s con-	tribu	ting	g to t	his	repo	rt d	luri	ng
this reporting period?						Yes	0	No
If No, is one planned for each?						Yes	0	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.						Yes	•	No

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$ 3

		SPD	ES ID					
Name of MS4/Coalition Town of Wilton		N	YR	2	0 2	A 1	1	4
4.a. If this report was made available on the internet, what da	ite was it	t po	sted?	,				
Leave blank if this report was not posted on the internet.	0	5	/ 1	7	/	2 0	2	2
4.b. For how many days was/will this report be posted?						9	9	9
If submitting a report for single MS4, answer 5.a If submitti	ing a joir	nt re	port,	ans	wer	5.b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ing perio	od?	/			Yes	•	No
If No, is one planned?					0	Yes	•	No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	tin	g to t	his	repo	rt d	uri	ng
this reporting period?					0	Yes		No
If No, is one planned for each?					0	Yes	•	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					0,	Yes		No

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

		SPD	ES	ID						
Name of MS4/Coalition	Saratoga County ISWM Program	N	Y	R	2	0	С	0	0	6

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.

Facilitation of on-time, individual Saratoga County Local MS4s' 2023 Annual Reports, including this addendum thereto.

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

Annual Reporting:

Awaiting changeover in permitting to resume combined annual reporting for Saratoga County MS4s; Volunteerism and Stewardship:

0% Participation by all registered volunteer groups - this goal has not been met. Volunteerism remains a low-priority for stewardship groups in 2022, due to lingering effects of COVID protocols.

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

-					
	2				
	7 /	·	 	. a / 077	

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

Yes O No

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

● Yes ○ No

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

Continue implementation of Saratoga County Biological Monitoring & Assessment - Kayaderosseras Ck (BioMAK) and the Dwass Kill (BioMAD) in coordination with the NYS DEC WAVE Program;

Resume administration of all Adopt-A-Highway Programs, SOP of ISWM Program publication of a Combined Saratoga County MS4 Annual Report, post-pandemic.

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

If submitting this form as part of a joint report on behalf of a	coalition leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition Town of Ballston	N Y R 2 0 A 1 5 7
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Continue to work with the ISWM program to discuss strategy for changes to the MS4 permit within their respective programs. Drareviewed to address the new potential requirements.	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
The ISWM program participants continue to coordinate to discus potential changes to the MS4 permit within their respective program participants continue to coordinate to discus potential changes to the MS4 permit within their respective program participants continue to coordinate to discus potential changes to the MS4 permit within their respective program participants continue to coordinate to discus potential changes to the MS4 permit within their respective program participants.	
C. How many times was this observation measured or evaluat	ted in this reporting period?
·	
	(ex.: samples/participants/e
D. Has your MS4 made progress toward this measurable goal	l during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	he SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	eet the goals of this MCM during
Continue to work with the ISWM program to discuss strategy for changes to the MS4 permit within their respective programs. Drareviewed to address the new potential requirements.	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID
Name of MS4/Coalition Town of Charlton	N Y R 2 0 A 0 3 2
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
Participate in Saratoga County Intermunicipal Storm program. Co giveaway. Continue waste collection and recycling events as poss of County MS4 program	1 0
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
Attendance at tree planting giveaway and roadside pickup events of participation.	continues to see resident
C. How many times was this observation measured or evaluate	ed 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	ne SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheduler)	et the goals of this MCM during
Generally, continue participation in County program and town with typically done in late April on a weekend as weather permits.	de cleanup events. Events are

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MS4	Annual	Report	Form
TULDI	Ammuai	IXCDOIL	T OI III

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

		SPDES ID
Name of MS4/Coalition	TOWN OF CLIFTON PARK	N Y R 2 0 A 0 3 5
7. Evaluating Pro	gress Toward Measurable Goals MCM 2	
identified in your St	ort on your progress and project plans toward formwater Management Program Plan (SWM tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the	SWMPP in this reporting period.
	r and support local stewardship activities. pate with the ISWM Program publication of a	a Combined Saratoga County MS4
B. Briefly summar Goal.	rize the observations that indicated the ove	erall effectiveness of this Measurable
The Town of Clifto	n Park MS4 Annual Report was delivered co	omplete and on-time.
C. How many time	es was this observation measured or evalua	ated in this reporting period?
D. Has your MS4 i	made progress toward this measurable goa	(ex.: samples/participants/ev al during this reporting period?
J	1 0	Yes O No
E. Is your MS4 on	schedule to meet the deadline set forth in	the SWMPP? • Yes • No
·	rize the stormwater activities planned to m ing cycle (including an implementation sch	neet the goals of this MCM during
1 *	ed measures detailed in the Town of Clifton pate in the ISWM Program publication of a C	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	 SPL	DES	ID						
Name of MS4/Coalition Town of Greenfield	N	Y	R	2	0	А	1	2	3

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.

Continue to offer residents opportunity to dispose of home household waste (up to 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 2023. In 2022 the town held multiple road side and stream corridor cleanups (>5). Home household waste collection was offered twice in 2022, 154 mattresses, 188.43 tons of household waste material, 32.14 tons of metal and 45 pallets of electronic recyclables where collected and disposed of by the town. In 2023 the Town will continue participation in County program.

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

					2		
(ex.:	samp	les/	part	ici	pant	s/events	3

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

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

Yes		No
1 62	\cup	INO

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.

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.
Name of MS4/Coolition Town of Halfmoon SPDES ID N Y R 2 0 A 3 7 5
Name of MS4/Coalition Town of Halfmoon N Y R 2 0 A 3 7 5
7. Evaluating Progress Toward Measurable Goals MCM 2
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
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?
(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
 Yes ○ 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.

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPDES ID
Name of MS4/Coalition Town of Malta	N Y R 2 0 A 0 8 6
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The Town of Malta will endeavor to continue outreach for volunt	teers for drain marking.
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
The Planning Department being understaffed, and lack of interest	1 .
program did not have public participation in 2022 due to lingering	g effects of COVID 19 protocols.
C. How many times was this observation measured or evaluate	ted in this reporting period?
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events during this reporting period?
, , , , , , , , , , , , , , , , , , ,	☐ Yes • No
E. Is your MS4 on schedule to meet the deadline set forth in t	he SWMPP? ■ Yes □ No
F. Briefly summarize the stormwater activities planned to me	– –
the next reporting cycle (including an implementation sche	8
The Town of Malta will endeavor to hold an informational meeting regarding SMP owner/operator responsibility as well as providing requirements and/or training.	

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

Name of MS4/Coalition City of Mechanicville	SPDES ID N Y R 2 0 A 5 5 1
7. Evaluating Progress Toward Measurable Goals MCM 2 Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	2
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The City participated in the Saratoga County CCE ISWM Program Public Participation and Involvement program.	m's Stormwater Management
B. Briefly summarize the observations that indicated the over Goal.	call effectiveness of this Measurable
All selected BMPs detailed in the ISWM Program Plan continue	to be implemented.
C. How many times was this observation measured or evaluate	
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	9
The City will continue to implement the Saratoga County ISWM and Participation.	Program for Public Involvement

Intermunicipal Stormwater Management (ISWM) Program

MS4 Annual Report Form

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

Name of MS4/Coalition	City of Mechanicville		N Y R 2 0 A 5	5 5 1
7. Evaluating Pro	gress Toward Measurable Goals	s MCM 2		
identified in your St	oort on your progress and project p tormwater Management Program I itional pages as needed.		-	Part
A. Briefly summar	rize the Measurable Goal identif	fied in the SWMPP	in this reporting per	riod.
collection of housel	ost solid waste drop-off days in an hold appliances and mattresses. He ts to drop these items off during re	azardous waste mate	erials are not accepted.	
B. Briefly summar	rize the observations that indica	ted the overall effec	ctiveness of this Meas	surable
1 0	w offered to Mechanicville resider e potential for participation.	nts daily, during DP	W business hours, whi	ich
C. How many time	es was this observation measure	d or ovaluated in th	nis reporting period?	
C. How many time	es was this observation measure	u or evaluateu iii tii	is reporting period:	1
			(ex.: samples/pa	rticipants/events
D. Has your MS4	made progress toward this meas	surable goal during	this reporting period Yes	d? ○ No
E. Is your MS4 on	schedule to meet the deadline s	et forth in the SWN		O 1 10
20 10 your 1/10 1 on	solicitude to intert the deduction of		• Yes	\bigcirc No
•	rize the stormwater activities plaing cycle (including an implement	O	oals of this MCM du	ring
The City plans to co	ontinue offering this to residents.			

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition	TOWN OF MILTON	SPDES ID N Y R 2 0 A 1 0 8
7. Evaluating Pro	gress Toward Measurable Goals MCM 2	
identified in your S	oort on your progress and project plans toward tormwater Management Program Plan (SWM itional pages as needed.	e e
A. Briefly summa	rize the Measurable Goal identified in the S	SWMPP in this reporting period.
Participation in the Report.	ISWM Program publication of a combined S	aratoga County MS4 Annual
B. Briefly summa Goal.	rize the observations that indicated the over	rall effectiveness of this Measurable
The Town of Milto	on MS4 Annual Report was completed within	the required time frames.
C. How many tim	es was this observation measured or evalua	ted in this reporting period?
D. Has your MS4	made progress toward this measurable goa	(ex.: samples/participants/events I during this reporting period? ● Yes ○ No
E. Is your MS4 or	schedule to meet the deadline set forth in	
•	rize the stormwater activities planned to moing cycle (including an implementation sch	8
Participation in the	ISWM Program publication of a combined S	aratoga County MS4 Annual Report

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	SPL	DES	ID						
Name of MS4/Coalition TOWN OF MOREAU	N	Y	R	2	0	А	1	5	8

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?

2		
 7	 	

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

_			
	$V_{\Delta c}$	\bigcirc	No

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

Yes	\bigcirc No
r es	$ \circ$ \circ

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.

2013032775

MS4 Annual Report Form

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR2 0 A Village of Round Lake Name of MS4/Coalition 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. C. How many times was this observation measured or evaluated in this reporting period? 7 (ex.: samples/participants/events) D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). Continue all protocols cited above. No new initiatives planned for next reporting year.

2013032775

MS4 Annual Report Form

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

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

Soratoga County ISWM Program	SPDES ID N Y R 2 0 C 0 0 6
Name of MS4/Coalition Saratoga County ISWM Program	
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward achi identified in your Stormwater Management Program Plan (SWMPP), III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWM	IPP in this reporting period.
Facilitation of on-time, individual Saratoga County Local MS4s' 2023 this addendum thereto.	3 Annual Reports, including
B. Briefly summarize the observations that indicated the overall of Goal.	effectiveness of this Measurable
Annual Reporting: Awaiting changeover in permitting to resume combined annual report Volunteerism and Stewardship:	rting for Saratoga County MS4s;
0% Participation by all registered volunteer groups - this goal has not remains a low-priority for stewardship groups in 2022, due to lingering	
C. How many times was this observation measured or evaluated i	in this reporting period?
	2
D. Has your MS4 made progress toward this measurable goal du	<pre>(ex.: samples/participants/events ring this reporting period?</pre>
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the S	
	• Yes O No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedul	-

Continue implementation of Saratoga County Biological Monitoring & Assessment -Kayaderosseras Ck (BioMAK) and the Dwass Kill (BioMAD) in coordination with the NYS DEC WAVE Program;

Resume administration of all Adopt-A-Highway Programs, SOP of ISWM Program publication of a Combined Saratoga County MS4 Annual Report, post-pandemic.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

	_	SPL)ES	ΙD						
Name of MS4/Coalition City of Saratoga Springs		N	Y	R	2	0	А	2	1	6

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.

- (1) Household Hazardous Waste Collection Day is scheduled for October 14, 2023.
- (10,300) utility bills mailed quarterly hi-liting costs incurred from leaky plumbing fixtures.
- Stormwater management program documents made publicly available for public review.
- Contact information and access to City stormwater officials was provided.
- (53) street trees planted by Sustainable Saratoga volunteers.

	TT	4	41-1-	- 1 4		141	· 41- ·	
C.	How many	umes w	as this	observation	measured or	evaluated	in this	reporting period?

(ex.: samples/participants/events						
(ex.: samples/participants/events					111	
	(ex.: sam	les/	part	ici	 pant	s/events

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

Yes	\circ	No

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

• Yes	ノト	•

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

- Next household hazardous waste collection day for residents will be held every 2 years.
- Quarterly utility bills will continue to promote water conservation by consumers.
- Stormwater management program documents will continue to be made publicly available.
- 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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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

Name of MS4/Coalition South Glens Falls SPDES ID N Y R 2 0 A 0 9 1
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?
(ex.: samples/participants/events,
D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
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.

This report is	being submitted	or the reporting period	l ending March 9,	2	0	2	3
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Name of MS4/Coalition Town of Stillwater	SPDES ID N Y R 2 0 A 5 4 9
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMPIIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	VMPP in this reporting period.
The Stormwater Management Plan is available for Public review a available at the Town of Stillwater Town Hall, Planning Departme	1
B. Briefly summarize the observations that indicated the overa Goal.	Il effectiveness of this Measurable
The Town of Stillwater MS4 Annual Report was delivered comple and the Saratoga County ISWM Program Coordinator.	te and on-time to the NYS DEC
C. How many times was this observation measured or evaluate	d in this reporting period?
D. Has your MS4 made magness toward this measurable goal of	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal of	• Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP?
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation sched	· ·
The Town of Stillwater continues to participate with the Saratoga C Maintain the Annual Report and SWMP for public review if reques	<u> </u>

SPDES ID

This report is being submitted for the reporting period ending March 9), 2	0	2	3

Name of MS4/Coalition Village of Stillwater	N Y R 2 0 A 5 4 7
7 Evaluating Progress Toward Massurable Coals MCM 2	
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	5
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The Village Stormwater Management Plan is available for Public Annual Report SWMP are available at the Town of Stillwater To	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
The Village of Stillwater MS4 Annual Report was delivered com and the Saratoga County ISWM Program Coordinator.	plete and on-time to the NYS DEC
C. How many times was this observation measured or evaluat	
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/event. during this reporting period?
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	· ·
The Village of Stillwater continues to participate with the Saratog The Village will maintain links on the Village webpage. Maintain the Annual Report and SWMP for public review if requ	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID
Name of MS4/Coalition Town of Waterford	N Y R 2 0 A 0 3 7
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The Town hosts cleanup days.	
B. Briefly summarize the observations that indicated the over Goal.	call effectiveness of this Measurable
On April 22, 2022 the Canal Clean Sweep took place and report a bank and area surrounding Lock 4 on the Old Champlain Canal is Museum and cultural Center.	
C. How many times was this observation measured or evaluation	ted in this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal	during this reporting period?
E. Is your MS4 on schedule to meet the deadline set forth in t	● Yes ○ No
E. 15 your 14154 on senedule to meet the deadline set for them to	• Yes O No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
The Town will continue to publicize and host these cleanup days	when applicable.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

			SPDES ID	
Name of MS4/Coalition To	wn of Waterford		N Y R 2 O A	0 3 7
7. Evaluating Progre	ess Toward Measurable Goa	ls MCM 2		
1 0 1	on your progress and project mwater Management Program and pages as needed.	<u>.</u>	~	ı Part
A. Briefly summarize	e the Measurable Goal identi	ified in the SWMPP	in this reporting per	riod.
The Town continues to	o collect residential yard waste	e (green waste) annua	ully.	
B. Briefly summarize Goal.	e the observations that indica	ated the overall effec	ctiveness of this Mea	surable
The Town collected 3	,030 yards of green waste duri	ng the reporting year.		
C. How many times v	was this observation measur	ed or evaluated in th	is reporting period?	
, and the second				0 3 0
				articipants/events
D. Has your MS4 ma	de progress toward this mea	surable goal during	this reporting perio Yes	
E. Is your MS4 on sc	hedule to meet the deadline	set forth in the SWM		
			• Yes	○ No
•	e the stormwater activities pl cycle (including an impleme	0	oals of this MCM du	ıring
The Town will continu	ue to collect residential yard w	vaste annually.		

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

If submitting this form as part of a joint report on behalf of a	coalition leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition Town of Waterford	N Y R 2 0 A 0 3 7
. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward dentified in your Stormwater Management Program Plan (SWMFII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The Town hosted their annual Household Hazardous Waste Colle Recycling Days.	ection Day and Electronic
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Household Hazardous Waste Day took place on October 22, 2022 Electronic Recycling Days were held on April 16 and September between the 3 days of 2,752lb.	
C. How many times was this observation measured or evaluat	ted in this reporting period?
	2 7 5 2
	(ex.: samples/participants/eve
D. Has your MS4 made progress toward this measurable goal	during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	8
The Town will continue to host the annual Household Hazardous Electronic Recycling Days.	Waste Collection Day and

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Wilton	SPDES ID N Y R 2 0 A 1 1 4
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP) III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
Continue to support local stewardship activities. Continue to participate with the ISWM Program.	
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
The Town of Wilton MS4 Annual Report was delivered complete	and made available to public.
C. How many times was this observation measured or evaluate	ed in this reporting period?
	(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal	during this reporting period?
E. Is your MS4 on schedule to meet the deadline set forth in th	● Yes ○ No ne SWMPP?
•	● Yes ○ No
F Priofly summarize the stormy ator activities planned to make	et the goals of this MCM during
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheduler).	9

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 2 \begin{vmatrix} 3 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Ballston	N Y R 2 0 A 1 5 7	
Minimum Control Measure 3. 1	Illicit Discharge Detection and Elimination	
The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1. Enter the number and approx. percent of outfalls mapped: 5 5 # 1 0 0 %		
2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?		
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this	
O Auto Recyclers	O Landscaping (Irrigation)	
O Building Maintenance	O Marinas	
O Churches	O Metal Plateing Operations	
O Commercial Carwashes	Outdoor Fluid Storage	
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance	
O Construction Vehicle Washouts	○ Printing	
O Cross-Connections	O Residential Carwashing	
O Distribution Centers	○ Restaurants	
O Food Processing Facilities	O Schools and Universities	
O Garbage Truck Washouts	Septic Maintenance	
○ Hospitals	O Swimming Pools	
○ Improper RV Waste Disposal	○ Vehicle Fueling	
O Industrial Process Water	O Vehicle Maint./Repair Shops	
Other:	○ None	
O Sewersheds:		

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 2 \begin{vmatrix} 3 & 0 \end{vmatrix}$

Name of MS4/Coalition Town of Charlton	N Y R 2 0 A 0 3 2	
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. 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)?		
3.a. What types of generating sites/sewershoreporting period?	eds were targeted for inspection during this	
O Auto Recyclers	Landscaping (Irrigation)	
Building Maintenance	O Marinas	
○ Churches	O Metal Plateing Operations	
O Commercial Carwashes	Outdoor Fluid Storage	
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance	
O Construction Vehicle Washouts	○ Printing	
O Cross-Connections	 Residential Carwashing 	
O Distribution Centers	Restaurants	
O Food Processing Facilities	O Schools and Universities	
O Garbage Truck Washouts	Septic Maintenance	
O Hospitals	O Swimming Pools	
O Improper RV Waste Disposal	Vehicle Fueling	
O Industrial Process Water	O Vehicle Maint./Repair Shops	
Other:	○ None	
O Sewersheds:		

SPDES ID

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$ 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	N Y R 2 0 A 0 3 5	
Minimum Control Measure 3.	3. Illicit Discharge Detection and Elimination	
The information in this section is being reported	ed (check one):	
On behalf of an individual MS4		
On behalf of a coalition How many MS4s contributed to	to this report?	
1. Enter the number and approx. percen	ent of outfalls mapped: 3 7 5 # 1 0 0 %	
2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?		
3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?		
O Auto Recyclers	○ Landscaping (Irrigation)	
O Building Maintenance	Marinas	
O Churches	O Metal Plateing Operations	
Commercial Carwashes	Outdoor Fluid Storage	
Commercial Laundry/Dry Cleaners	Parking Lot Maintenance	
Construction Vehicle Washouts	O Printing	
Cross-Connections	Residential Carwashing	
O Distribution Centers	· ·	
	• Restaurants	
O Food Processing Facilities	O Schools and Universities	
O Garbage Truck Washouts	Septic Maintenance	
○ Hospitals	Swimming Pools	
○ Improper RV Waste Disposal	Vehicle Fueling	
○ Industrial Process Water	O Vehicle Maint./Repair Shops	
Other:	○ None	
○ Sewersheds:		

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Greenfield	N Y R 2 0 A 1 2 3	
Minimum Control Measure 3. I	llicit 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: 6 # 1 0 0 %		
2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?		
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this	
O Auto Recyclers	O Landscaping (Irrigation)	
Building Maintenance	O Marinas	
○ Churches	O Metal Plateing Operations	
O Commercial Carwashes	Outdoor Fluid Storage	
O Commercial Laundry/Dry Cleaners	 Parking Lot Maintenance 	
O Construction Vehicle Washouts	○ Printing	
O Cross-Connections	O Residential Carwashing	
O Distribution Centers	○ Restaurants	
O Food Processing Facilities	O Schools and Universities	
O Garbage Truck Washouts	• Septic Maintenance	
O Hospitals	O Swimming Pools	
O Improper RV Waste Disposal	O Vehicle Fueling	
O Industrial Process Water	O Vehicle Maint./Repair Shops	
• Other:	○ None	
Land Clearing		
• Sewersheds:		
Roadside Drai	n a g e D i t c h e s	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Halfmoon	N Y R 2 0 A 3 7 5
Minimum Control Measure 3. 1	Illicit Discharge Detection and Elimination
The information in this section is being reported (On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the	check one):
1. Enter the number and approx. percent of	of outfalls mapped: 6 3 # 7 0 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this inventory)?
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	○ Marinas
○ Churches	Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
○ Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	None
O Sewersheds:	

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Name of MS4/Coalition Town of Malta	N Y R 2 0 A 0 8 6
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported (● On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the section of the section o	
1. Enter the number and approx. percent	of outfalls mapped: 4 3 # 1 0 0 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	screened for dry weather discharges during this te inventory)?
3.a. What types of generating sites/sewershoreporting period?	eds were targeted for inspection during this
O Auto Recyclers	○ Landscaping (Irrigation)
O Building Maintenance	○ Marinas
○ Churches	Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
○ Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
○ Food Processing Facilities	○ Schools and Universities
○ Garbage Truck Washouts	○ Septic Maintenance
○ Hospitals	○ Swimming Pools
○ Improper RV Waste Disposal	○ Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	● None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition City of Mechanicville	N Y R 2 0 A 5 5 1
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 the 	
1. Enter the number and approx. percent	of outfalls mapped: 3 9 # 1 0 0 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspection during this
O Auto Recyclers	○ Landscaping (Irrigation)
O Building Maintenance	O Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
○ Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition TOWN OF MILTON		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 reporte	ed (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to 	o this report?	L
1. Enter the number and approx. percer	nt of outfalls mapped	: 100%
2. How many of these outfalls have been reporting period (outfall reconnaissan	•	eather discharges during this
3.a. What types of generating sites/sewers reporting period?	sheds were targeted f	or inspection during this
O Auto Recyclers	O Landscaping (Irr	igation)
Building Maintenance	O Marinas	
○ Churches	O Metal Plateing C	perations
O Commercial Carwashes	Outdoor Fluid St	corage
O Commercial Laundry/Dry Cleaners	Parking Lot Mai	ntenance
 Construction Vehicle Washouts 	O Printing	
O Cross-Connections	Residential Carv	vashing
O Distribution Centers	O Restaurants	
O Food Processing Facilities	O Schools and Uni	versities
O Garbage Truck Washouts	Septic Maintenar	nce
○ Hospitals	O Swimming Pools	
O Improper RV Waste Disposal	Vehicle Fueling	
O Industrial Process Water	Vehicle Maint./R	Repair Shops
Other:	○ None	
O Sewersheds:		

Name of MS4/Coalition TOWN OF MOREAU

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SPDES ID

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

	SPDES ID
Name of MS4/Coalition Village of Round Lake	N Y R 2 0 A 0 9 9
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. Enter the number and approx. percent	of outfalls mapped: 9 # 5 0 %
2. How many of these outfalls have been s reporting period (outfall reconnaissance)	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewersh reporting period?	eds were targeted for inspection during this
O Auto Recyclers	Landscaping (Irrigation)
O Building Maintenance	O Marinas
Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
○ Cross-Connections	O Residential Carwashing
O Distribution Centers	Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
• Other:	○ None
subdivisions	
O Sewersheds:	

MS4 Annual Report Form

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

Name of MS4/Coalition Saratoga County, Department of Pu	N Y R 2 0 A 2 0 9
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported	1 (check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to 	o this report?
1. Enter the number and approx. percen	t of outfalls mapped: 185# 100%
2. How many of these outfalls have been reporting period (outfall reconnaissan	screened for dry weather discharges during this ace inventory)?
3.a. What types of generating sites/sewers reporting period?	heds were targeted for inspection during this
O Auto Recyclers	○ Landscaping (Irrigation)
O Building Maintenance	○ Marinas
○ Churches	Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	None
O Sewersheds:	

N Y R 2 0 A 2 1 6

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition City of Saratoga Springs	N Y R 2 0 A 2 1 6	
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 the 	his report?	
1. Enter the number and approx. percent	of outfalls mapped: 89 # 90%	
2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?		
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this	
O Auto Recyclers	O Landscaping (Irrigation)	
O Building Maintenance	O Marinas	
○ Churches	O Metal Plateing Operations	
O Commercial Carwashes	Outdoor Fluid Storage	
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance	
 Construction Vehicle Washouts 	○ Printing	
O Cross-Connections	O Residential Carwashing	
O Distribution Centers	Restaurants	
O Food Processing Facilities	O Schools and Universities	
O Garbage Truck Washouts	O Septic Maintenance	
○ Hospitals	○ Swimming Pools	
O Improper RV Waste Disposal	○ Vehicle Fueling	
O Industrial Process Water	O Vehicle Maint./Repair Shops	
• Other:	○ None	
Downtown Busi	n e s s D i s t r i c t	
O Sewersheds:		

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.

g		SPDES ID
Name of MS4/Coalition South Glens Falls		N Y R 2 0 A 0 9 1
Minimum Control Measure 3	. Illicit Discharge l	Detection and Elimination
The information in this section is being reporte	d (check one):	
On behalf of an individual MS4On behalf of a coalition		
How many MS4s contributed to	o this report?	
1. Enter the number and approx. percer	at of outfalls mapped:	1 4 # 1 0 0 %
2. How many of these outfalls have been reporting period (outfall reconnaissar	•	ther discharges during this
3.a. What types of generating sites/sewers reporting period?	heds were targeted for	r inspection during this
O Auto Recyclers	Landscaping (Irrig	ation)
O Building Maintenance	O Marinas	
○ Churches	O Metal Plateing Op	erations
Commercial Carwashes	Outdoor Fluid Stor	age
O Commercial Laundry/Dry Cleaners	Parking Lot Maint	enance
O Construction Vehicle Washouts	O Printing	
O Cross-Connections	Residential Carwa	shing
O Distribution Centers	O Restaurants	
O Food Processing Facilities	O Schools and Univer	rsities
O Garbage Truck Washouts	O Septic Maintenanc	е
○ Hospitals	O Swimming Pools	
O Improper RV Waste Disposal	O Vehicle Fueling	
O Industrial Process Water	O Vehicle Maint./Rep	pair Shops
Other:	○ None	
O Sewersheds:		

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

	SPDES ID
Name of MS4/Coalition Town of Stillwater	N Y R 2 0 A 5 4 9
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported	I (check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to 	this report?
1. Enter the number and approx. percent	t of outfalls mapped: 21# 100%
2. How many of these outfalls have been reporting period (outfall reconnaissan	screened for dry weather discharges during this ce inventory)?
3.a. What types of generating sites/sewersl reporting period?	neds were targeted for inspection during this
○ Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	○ Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
○ Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	None
O Sewersheds:	

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

| SPDES ID | | Name of MS4/Coalition | Village of Stillwater | N | Y | R | 2 | 0 | A | 5 | 4 | 7 |

	Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
Th	e information in this section is being reported ((check one):
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to t	his report?
1.	Enter the number and approx. percent	of outfalls mapped: 17# 100%
2.	How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.2	a. What types of generating sites/sewershe reporting period?	eds were targeted for inspection during this
	O Auto Recyclers	○ Landscaping (Irrigation)
	O Building Maintenance	○ Marinas
	○ Churches	O Metal Plateing Operations
	O Commercial Carwashes	Outdoor Fluid Storage
	O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
	O Construction Vehicle Washouts	O Printing
	○ Cross-Connections	O Residential Carwashing
	O Distribution Centers	○ Restaurants
	O Food Processing Facilities	O Schools and Universities
	O Garbage Truck Washouts	O Septic Maintenance
	○ Hospitals	O Swimming Pools
	O Improper RV Waste Disposal	O Vehicle Fueling
	O Industrial Process Water	O Vehicle Maint./Repair Shops
	Other:	• None
	O Sewersheds:	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Waterford	N Y R 2 0 A 0 3 7
Minimum Control Measure 3. 1	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 the 	
1. Enter the number and approx. percent of	of outfalls mapped: 4 6 # 1 0 0 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this
O Auto Recyclers	○ Landscaping (Irrigation)
O Building Maintenance	O Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	○ Schools and Universities
○ Garbage Truck Washouts	○ Septic Maintenance
○ Hospitals	○ Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Wilton	N Y R 2 0 A 1 1 4
Minimum Control Moosure 2	Illisit Dischause Detection and Elimination
Minimum Control Measure 5.	Illicit Discharge Detection and Elimination
The information in this section is being reported	(check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to 	this report?
1. Enter the number and approx. percent	of outfalls mapped: 59# 92%
2. How many of these outfalls have been s reporting period (outfall reconnaissance)	creened for dry weather discharges during this te inventory)?
3.a. What types of generating sites/sewersh reporting period?	eds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	○ Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	 Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
○ Garbage Truck Washouts	• Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
Other:	○ None
O Sewersheds:	

SPDES ID

MS4 Annual Report Form

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

Name o	of MS	S4/C	Coal	itio	n To	own	of B	allsto	n														N	Y	R	2	0	А	1	5	7
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O Bro	ken	Lin	es I	Fro	m S	San	itar	y S	ewe	r				Ind	ustr	ial	Со	nne	ctio	ns											
O Cro	ss (Coni	nect	ion	S									Infl	OW/	/Inf	iltra	atio	n												
O Fail	ling	Sep	otic	Sys	ster	ns								Pun	np :	Stat	ion	Fai	ilur	e											
O Flo	or D	rair	ns C	Con	nec	ted	То	Sto	orm	Se	wer	S	\circ	San	itaı	y S	ew	er C)ve	rflo	ws										
O Ille	gal l	Dun	npir	ng									0	Stra	aigh	t P	ipe	Sev	ver	Dis	cha	rge	S								
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	How many illicit discharges have been confirmed during this reporting period? How many illicit discharges/illegal connections have been eliminated during this reporting period?																														
7. H	as t No										_				-					-		,			od?	•		Ye	es 0	0	No
8. Is																												Ye			No
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$

	SPDES ID	
Name of MS4/Coalition Town of Charlton	N Y R	2 0 A 0 3 2
3.b. What types of illicit discharges ha	ve been found during this reporting perio	od?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	○ Inflow/Infiltration	
O Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewer	s O Sanitary Sewer Overflows	
O Illegal Dumping	O Straight Pipe Sewer Discharges	
Other:	None	
•	tial illegal connections have been detected	during this
reporting period?		0
5. How many illicit discharges have	peen confirmed during this reporting peri	od?
o. How many micre discharges have	seen commined during this reporting peri	·
•	connections have been eliminated during	this reporting
period?		0
	been completed in this reporting period?	• Yes O No
ii No, approximately what percent v	vas completed in this reporting period?	8
8. Is the above information available		○ Yes ● No
Is this information available on the If Yes, provide URL(s):	e web?	○ Yes • No
• ' '	ge where map(s) can be accessed - not home	page.
URL		
URL		
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID
Name of MS4/Coalition TOWN OF CLIFTON PARK	N Y R 2 0 A 0 3 5
3.b. What types of illicit discharges have	been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
O Failing Septic Systems	O Pump Station Failure
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows
	O Straight Pipe Sewer Discharges
Other: S e d i m e n t l a d e	○ None n r u n o f f
4. How many illicit discharges/potentia	al illegal connections have been detected during this
reporting period?	3
5 How many illicit discharges have bee	en confirmed during this reporting period?
5. 110% many mice discharges have bee	the confirmed during this reporting period.
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during this reporting
7. Has the storm sewershed mapping be If No, approximately what percent was	1 01
8. Is the above information available in	
Is this information available on the v If Yes, provide URL(s):	web? ○ Yes • No
	where map(s) can be accessed - not home page.
URL	

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

		SPDES ID
Name of MS4/Coalition Town of Greenfield		N Y R 2 0 A 1 2 3
3.b.What types of illicit discharges have	been found during this	reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	○ Inflow/Infiltration	
• Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflow	WS
O Illegal Dumping	O Straight Pipe Sewer Dis	charges
Other:	○ None	
4. How many illicit discharges/potentia	l illegal connections have	e been detected during this
reporting period?		6
	e 11 · .1 ·	10
5. How many illicit discharges have been	en confirmed during this	reporting period? 6
6. How many illicit discharges/illegal co	onnections have been eli	ninated during this reporting
period?		6
7. Has the storm sewershed mapping be	een completed in this rep	oorting period? • Yes • No
If No, approximately what percent was	completed in this reporting	ng period?
8. Is the above information available in	GIS?	○ Yes • No
Is this information available on the v	veb?	○ Yes • No
If Yes, provide URL(s): Please provide specific address of page	where map(s) can be acce	ssed - not home page.
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SPDES ID

MS4 Annual Report Form

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

Name of MS4/Coalition Town of Halfmoon	N Y R 2 0 A 3 7 5													
3.b.What types of illicit discharges have been	found during this reporting period?													
O Broken Lines From Sanitary Sewer O Inc	dustrial Connections													
○ Cross Connections ○ In:	flow/Infiltration													
○ Failing Septic Systems ○ Pu	ump Station Failure													
○ Floor Drains Connected To Storm Sewers ○ Sa	anitary Sewer Overflows													
○ Illegal Dumping ○ St	traight Pipe Sewer Discharges													
Other: ONG 4. How many illicit discharges/potential illeg	one gal connections have been detected during this													
reporting period?														
How many illicit discharges have been confirmed during this reporting period?														
How many illicit discharges/illegal connections have been eliminated during this reporting														
period?	0													
7. Has the storm sewershed mapping been co	ompleted in this reporting period? ○ Yes • No													
If No, approximately what percent was comp	pleted in this reporting period?													
8. Is the above information available in GIS?	? ● Yes ○ No													
Is this information available on the web?	?													
Is this information available on the web? If Yes, provide URL(s):	• Yes O No													
Is this information available on the web? If Yes, provide URL(s): Please provide specific address of page where URL	• Yes O No e map(s) can be accessed - not home page.													
Is this information available on the web? If Yes, provide URL(s): Please provide specific address of page where URL h t t p : / / w w w . m a p h	e map(s) can be accessed - not home page. 1 0 s t . c 0 m / s a r a t 0 g a /													
Is this information available on the web? If Yes, provide URL(s): Please provide specific address of page where URL h t t p : / / w w w . m a p h N O T E : u s e r / v i e w	e map(s) can be accessed - not home page. 1 0 s t . c o m / s a r a t o g a /													
Is this information available on the web? If Yes, provide URL(s): Please provide specific address of page where URL h t t p : / / w w w . m a p h	e map(s) can be accessed - not home page. 1 0 s t . c 0 m / s a r a t 0 g a /													
Is this information available on the web? If Yes, provide URL(s): Please provide specific address of page where URL h t t p : / / w w w . m a p h N O T E : u s e r / v i e w	e map(s) can be accessed - not home page. 1 0 s t . c 0 m / s a r a t 0 g a /													
Is this information available on the web? If Yes, provide URL(s): Please provide specific address of page where url h t t p : / / w w w . m a p h N O T E : u s e r / v i e w Geology; subwatershed layer	e map(s) can be accessed - not home page. 1 0 s t . c 0 m / s a r a t 0 g a /													

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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SPDES ID

MS4 Annual Report Form

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

Name o	of M	S4/C	Coal	litio	n C	ity o	f Me	chan	icvill	le													N	Y	R	2	0	A	5	5	1
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O Bro	ken	Lin	ies	Fro	m S	San	itar	y S	ewe	r				Indi	ıstr	ial	Co	nne	ctio	ns											
O Cro	ss (Con	nec	tior	ıs								0	Infl	ow/	/Inf	iltra	itio	n												
O Fai	ling	Sep	otic	Sy	ster	ns							0	Pun	np S	Stat	ion	Fai	ilur	e											
O Flo	or D	raiı	ns (Con	nec	ted	То	Sto	orm	Se	wer	S	0	San	itar	y S	ewe	er C)ve1	rflo	WS										
O Ille	gal]	Dur	npi	ng									0	Stra	iigh	t Pi	ipe	Sev	ver	Dis	cha	rge	S								
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re	epoi	rtin	g	er	iod	?																									1
5 H	How many illicit discharges have been confirmed during this reporting period?																														
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	How many illicit discharges/illegal connections have been eliminated during this reporting period?																														
p	erio	d?																													1
7. H											_				-					-		,	_		od?			Ye	s	0	No
If	`No	, ap	pro	OX1:	mat	tely	v Wł	nat	per	cen	ıt w	as	con	npl	ete	d in	i th	is r	epc	ort11	ng p	eri	od'	?				L			%
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This report is being submitted for the reporting period ending March 9, $2 \ 0 \ 2 \ 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name	of M	S4/C	oal	itio	n_T	OWI	N OF	MI	LTON	1													N	Y	R	2	0	А	1	0	8
3.b.What types of illicit discharges have been found during this reporting period? O Broken Lines From Sanitary Sewer O Industrial Connections														F																	
O Bro	oken	Lin	es]	Fro	m S	San	itar	y S	ewe	r			0	Ind	ustr	ial	Co	nne	ctio	ns											
O Cro	oss (Conr	nect	tion	ıs									Infl	OW/	/Inf	iltra	ıtioı	n												
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SPDES ID

MS4 Annual Report Form

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

Name o	of M	S4/C	Coalition TOWN OF MOREAU																		N	Y	R	2	0	A	1	5	8		
3.b.V	b.What types of illicit discharges have been found durin Broken Lines From Sanitary Sewer O Industrial Connections														rin	g tl	nis	rep	ort	ing	g pe	erio	od?								
O Bro	ken	Lin	es	Fro	m S	San	itar	y S	ewe	r			0	Ind	ustr	ial	Co	nne	ctio	ns											
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O Ille	gal :	Dun	npi	ng										Stra	aigh	t P	ipe	Sev	ver	Dis	cha	rge	S								
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	How many illicit discharges have been confirmed during this reporting period?																														
5. H	How many illicit discharges have been confirmed during this reporting period?																														
	. How many illicit discharges/illegal connections have been eliminated during this reporting period?																														
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7. H											_				-					-		•	_		od?			Ye	s	0	No
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

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This report is being submitted for the reporting period ending March 9, 2 0 2 3

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 F	SPDES ID N Y R 2 0
3.b. What types of illicit discharges have	e been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
O Failing Septic Systems	O Pump Station Failure
O Floor Drains Connected To Storm Sewers	○ Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
• Other: E r o s i o n f r o m	O None C o n s t r u c t i o n
4. How many illicit discharges/potentia reporting period?	al illegal connections have been detected during this
reporting periods	
5. How many illicit discharges have been	en confirmed during this reporting period?
period?	connections have been eliminated during this reporting
7. Has the storm sewershed mapping b If No, approximately what percent was	ocen completed in this reporting period?
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This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 \end{bmatrix}$ 3

Name o	of M	S4/C	Coali	itio	n C	ity o	f Sar	atoga	a Spr	ings													N	Y	R	2	0	А	2	1	6
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O Fai	ling	Sep	tic	Sys	ster	ns								Pur	np S	Stat	ion	Fai	ilur	e											
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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 N Y R 2 0 A 0 9 1
3.b. What types of illicit discharges have	been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
O Failing Septic Systems	O Pump Station Failure
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
Other:	None
4 How many illicit discharges/notentia	l illegal connections have been detected during this
reporting period?	n megal connections have been detected during this
5. How many illicit discharges have bee	en confirmed during this reporting period?
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during this reporting
7. Has the storm sewershed mapping be If No, approximately what percent was	
If No, approximately what percent was8. Is the above information available in Is this information available on the walf Yes, provide URL(s):	completed in this reporting period? 1 0 0 % GIS? Yes O No
If No, approximately what percent was 8. Is the above information available in Is this information available on the w If Yes, provide URL(s): Please provide specific address of page	completed in this reporting period? 1 0 0 % GIS? Yes O No web? Yes O No where map(s) can be accessed - not home page.
If No, approximately what percent was 8. Is the above information available in Is this information available on the was If Yes, provide URL(s): Please provide specific address of page of URL	completed in this reporting period? 1 0 0 % GIS? Yes O No web? Yes O No where map(s) can be accessed - not home page.
If No, approximately what percent was 8. Is the above information available in Is this information available on the was If Yes, provide URL(s): Please provide specific address of page of URL	completed in this reporting period? 1 0 0 % GIS? Yes O No web? Yes O No where map(s) can be accessed - not home page.
If No, approximately what percent was 8. Is the above information available in Is this information available on the was If Yes, provide URL(s): Please provide specific address of page of URL	completed in this reporting period? 1 0 0 % GIS? Yes O No web? Yes O No where map(s) can be accessed - not home page.
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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID		
Name of MS4/Coalition Town of Stillwater	N Y R 2	2 0 A 5	4 9
3.b. What types of illicit discharges have	been found during this reporting period	!?	
O Broken Lines From Sanitary Sewer	O Industrial Connections		
O Cross Connections	○ Inflow/Infiltration		
O Failing Septic Systems	O Pump Station Failure		
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows		
O Illegal Dumping	O Straight Pipe Sewer Discharges		
Other:	None		
reporting period?	l illegal connections have been detected of	luring this	0
5. How many illicit discharges have been	en confirmed during this reporting period	d?	0
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during t	his report	ing 0
7. Has the storm sewershed mapping be If No, approximately what percent was		• Yes	O No
8. Is the above information available in Is this information available on the w		YesYes	○ No
If Yes, provide URL(s): Please provide specific address of page URL	where map(s) can be accessed - not home p	age.	
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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$ 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
	e been found during this reporting period	?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	○ Inflow/Infiltration	
O Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows	
O Illegal Dumping	O Straight Pipe Sewer Discharges	
Other:	None	
•	al illegal connections have been detected d	uring this
reporting period?		0
5 How many illicit discharges have bee	en confirmed during this reporting period	1? 0
J. How many mich discharges have been	en confirmed during this reporting period	
	onnections have been eliminated during t	his reporting
period?		0
7. Has the storm sewershed mapping b		● Yes ○ No
If No, approximately what percent was	completed in this reporting period?	98
8. Is the above information available in	GIS?	● Yes ○ No
Is this information available on the v		○ Yes • No
If Yes, provide URL(s):		
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SPDES ID

MS4 Annual Report Form

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

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

Name of MS4/Coalition Town of Wilton N Y R 2 0 A	$\overline{}$	
Name of Mon Contition	1 1	L 4
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 rep	ortin	ıg
period?		
7. Has the storm sewershed mapping been completed in this reporting period? • Ye	es	N o
If No, approximately what percent was completed in this reporting period?	9	2 %
8. Is the above information available in GIS?	es (⊃ No
Is this information available on the web?	es (Νa
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SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? • Yes • No • No	1. W	/ha	ıt p	erc	ent	t of	sta	aff i	in r	ele	vai	nt p	oos	itio	ns	and	d d	epa	rtr	ner	ıts	has	re	cei	ved	I II	Dl	E tı	rair 1	Т.		

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MS4 Annual Report Form

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

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ne of MS4/Coalition	TOWN OF CL	IFTON PARK			N Y R	2 0 A	0 3
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MS4 Annual Report Form

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		SPDES ID
Name of MS4/Coalition Town of Ballsto	n 	N Y R 2 0 A 1 5 7
12. Evaluating Progress Towa	ard Measurable Goals MCM 3	
	•	d achieving measurable goals (IPP), including requirements in Part
A. Briefly summarize the Mea	asurable Goal identified in the	SWMPP in this reporting period.
suspected illicit discharge. Due during dry weather. Town will	e to staffing and COVID, the Tow	ing failed septic systems, odors, and vn was not able to inspect outfalls I to perform dry weather inspections confirmed violations.
B. Briefly summarize the obs Goal.	ervations that indicated the ove	erall effectiveness of this Measurable
Two suspected illicit discharge address illicit discharges if they	*	e Town has a mechanism in place to
·	observation measured or evalua	(ex.: samples/participants al during this reporting period?
		● Yes ○ No
E. Is your MS4 on schedule to	o meet the deadline set forth in	
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•	rmwater activities planned to m ncluding an implementation sch	neet the goals of this MCM during nedule).
	vn will work to perform inspectio	ing failed septic systems, odors, and ons and maintain records of all outfall

testing.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Charlton	SPDES ID N Y R 2 0 A 0 3 2
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Continue to maintain MS4 outfall map, monitor land use changes observations of storm outfalls, continue laboratory testing of surf collection sites, track changes in 9 parameter pollutant profile, confficials of the prohibition of discharges to storm system related to monitor illicit discharges via public input and reporting.	ace water at two watershed ontinue to inform public & town
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Dry weather observations did not indicate the presence of any illiwas not completed in 2022, however it will resume in 2023.	cit discharges. Stream testing
C. How many times was this observation measured or evaluate	ted in this reporting period?
D. Has your MS4 made progress toward this measurable goal	during this reporting period?
E. Is your MS4 on schedule to meet the deadline set forth in t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	e e
As per correspondence with EPA, the Town increased IDDE train (Highway Dept.). Town will continue other EDDE tasks of dry w	

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MS4 Annual Report Form

This report is being submitted for the reporting period	d ending	g Marc	h 9,	2 0	2	3	
If submitting this form as part of a joint report on behalf of a	coalition	n leave	SPD	ES ID	bla	nk.	
	٦	SPDES	SID				
ame of MS4/Coalition TOWN OF CLIFTON PARK		NY	R	2 0	А	0 3	3 5
2. Evaluating Progress Toward Measurable Goals MCM 3							
Use this page to report on your progress and project plans toward dentified in your Stormwater Management Program Plan (SWM) II.C.1. Submit additional pages as needed.		_		_			art
A. Briefly summarize the Measurable Goal identified in the S	SWMPP	in this	s rep	ortin	g p	erio	d.
Review and update SWMPP documentation. Continue to have In out be residents. Follow up with a Department Response. 3. Briefly summarize the observations that indicated the over							
Goal.							
Records are kept on the Investigation Requests Forms with the acneeded.	ctions ta	ken fro	om tl	ne tow	n i	f	
C. How many times was this observation measured or evalua	ted in th	nis rep	ortii	ng pe	riod	1?	
							1
			(ex	.: samı	les/	∟ ′parti	 cipants/
		41.		ting			

Yes \bigcirc No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes \bigcirc 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.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	_	SPL	DES	ID						
Name of MS4/Coalition Town of Greenfield		N	Y	R	2	0	A	1	2	3

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 6 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. The Town is currently working with Saratoga Coalition to add outfalls to County GIS system.

C. How many times was this observation measured or evaluated in this reporting period?	C.	How many	times was	this obser	vation meas	ured or eva	luated in this	reporting period?
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				2	
samp	les/	part	tici	pant	s/events

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

	_			
- (Vac	()	NI a

(ex.:

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

Yes	\bigcirc 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. The Town is currently working with Saratoga Coalition to add outfalls to County GIS system.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	 SPDI	ES.	ID						
Name of MS4/Coalition Town of Halfmoon	N .	Y	R	2	0	А	3	7	5

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 2023. 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 2023. 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

					1		
(ex.:	samp	les/	part	ici	pant	s/eve	nts

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

$lacktriangle$ Yes \bigcirc N	lo.
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E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes	0	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 2023. 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

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

Name of MS4/Coalition Town of Malta SPDES ID N Y R 2 0 A 0 8 6
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 at least 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 15 outfalls in this reporting period. All complaints have been investigated and responded to in a timely manner. Of these complaints, 1 was determined to be illicit discharges during frozen ground conditions.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/eve D. Has your MS4 made progress toward this measurable goal during this reporting period?
▼ Yes □ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? ■ Yes □ 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 at least 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.

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition	City of Mechanicville	N Y R 2 0 A 5 5 1
12. Evaluating Pro	gress Toward Measurable Goals MCM 3	
identified in your St	ort on your progress and project plans toward tormwater Management Program Plan (SWM) tional pages as needed.	e e
A. Briefly summar	rize the Measurable Goal identified in the S	WMPP in this reporting period.
The City set out to	review and confirm the digital outfall map pre	eviously created.
B. Briefly summan	rize the observations that indicated the over	rall effectiveness of this Measurable
Upon review, an ad	lditional outfall was found and added to the ou	ıtfall map.
C. How many time	es was this observation measured or evalua	ted in this reporting period?
D. Has your MS4	made progress toward this measurable goa	9 2
E. Is your MS4 on	schedule to meet the deadline set forth in t	● Yes ○ No She SWMPP? ● Yes ○ No
·	rize the stormwater activities planned to mo	eet the goals of this MCM during
_	nue to inspect outfalls on the prescribed sched ge reporting of potential illicit discharges as v	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition City of Mechanicville	SPDES ID N Y R 2 0 A 5 5 1
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The City continues to actively investigate, follow up on, and world	k to eliminate illicit discharges.
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
During this reporting cycle,1 illicit discharge was identified and f consisted of paint in a catch basin and the City used their IDDE p involved.	
C. How many times was this observation measured or evaluat	ted in this reporting period?
	(ex.: samples/participants/event:
D. Has your MS4 made progress toward this measurable goal	during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	he SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	eet the goals of this MCM during
The City will continue to actively fulfill the obligations of their II an informative flyer for local caterers notifying them not to use the waste.	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

_			SPDES ID	
Name of MS4/Coalition	City of Mechanicville		N Y R 2 0 A 5	5 1
12. Evaluating Prog	gress Toward Measurable Goals	MCM 3		
identified in your Sto	ort on your progress and project plormwater Management Program Ptional pages as needed.	•	_	Part
A. Briefly summar	rize the Measurable Goal identifi	ed in the SWMPP i	n this reporting peri	iod.
The City aims to en	sure its personnel are aware of the	IDDE program.		
B. Briefly summar Goal.	ize the observations that indicat	ed the overall effect	tiveness of this Meas	urable
	arly all members of the DPW at the ent Officer attended a general MS4		, ·	r, and
the code Emoreome	ont officer attended a general Mis	r training with a root	so on IDDL.	
C. How many time	es was this observation measured	or evaluated in thi	s reporting period?	
				8
D. Hag your MC4 r	made nucquess toward this measu	uwahla gaal duwing ((ex.: samples/par	
D. Has your W154 I	made progress toward this measu	urabie goai during i		○ No
E. Is your MS4 on	schedule to meet the deadline se	t forth in the SWM	PP?	
E D · d	• 41 4 4 4 4 4 4	14 44	• Yes	○ No
•	ize the stormwater activities pla ng cycle (including an implemen	U	als of this MCM dui	ring
The City will contin	nue to train DPW field personnel o	n illicit discharge de	tection and elimination	on.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

			SPDES ID
Name of MS4/Coalition	n City of Mechanicville		N Y R 2 0 A 5 5 1
12. Evaluating Pro	ogress Toward Measurable Goals M	ICM 3	
identified in your St	port on your progress and project plan tormwater Management Program Plan litional pages as needed.		-
A. Briefly summa	rize the Measurable Goal identified	in the SWMPP	in this reporting period.
	o not only educate the public on what partner in tracking suspected illicit d		cit discharge, but also
B. Briefly summar Goal.	rize the observations that indicated	the overall effec	tiveness of this Measurable
_	ater website (mechanicvillestormwate licit discharges. They have the option orting cycle.	,	
C. How many time	es was this observation measured o	r evaluated in th	is reporting period? (ex.: samples/participants/events
D. Has your MS4	made progress toward this measur	able goal during	this reporting period?
E. Is your MS4 on	n schedule to meet the deadline set f	orth in the SWM	Yes ○ NoIPP?Yes ○ No
•	rize the stormwater activities plann ting cycle (including an implementa		
The City will conti	inue to host this form.		

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID
Name of MS4/Coalition City of Mechanicville	N Y R 2 0 A 5 5 1
12 Evaluating Duaguage Toward Maggarable Cools MCM 2	
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The City continues to address illicit discharges as they are identif	ĩed.
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
A member of the DPW identified the presence of paint in the stor	
(compliance request) at the nearest home. This issue did not person	ISI.
C. How many times was this observation measured or evaluation	ted in this reporting period?
C. How many times was this observation measured or evalua-	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 t	
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	8
The City will continue to enforce their IDDE program.	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

If submitting	ng this form as part of a joint report on beh		
	TOWN OF MITTON	SPDES II	
Name of MS4/Coalition	TOWN OF MILTON	N Y R	R 2 0 A 1 0 8
Use this page to rep	gress Toward Measurable Goals MC ort on your progress and project plans t	oward achieving measur	_
III.C.1. Submit addi	cormwater Management Program Plan (tional pages as needed.		
A. Briefly summan	rize the Measurable Goal identified in	1 the SWMPP in this ro	eporting period.
Each outfall has be	A Audit / Order on Consent, the Town en mapped and was inspected during den's compliance with part VII.A.3.d of	ry weather conditions. T	` '
All staff have recei	ved appropriate IDDE training this per	od.	
B. Briefly summan	rize the observations that indicated tl	ne overall effectiveness	of this Measurable
*	A Audit / Order on Consent, the Town to the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the purposes of the Consortium for the Consortium for the purposes of the Consortium for the Consortium		I
C. How many time	es was this observation measured or	evaluated in this report	ting period?
		(ı	ex.: samples/participants/eve
D. Has your MS4	made progress toward this measurab		
			● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set for	th in the SWMPP?	● Yes ○ No
•	rize the stormwater activities planneding cycle (including an implementation	<u> </u>	
Dry weather inspect Address deficiencies Consent.	ctions. es identified in the ORI completed in 20	021 as part of EPA Audi	t / Order on

This report is being submitted for the reporting period ending March 9, 2 0 2 3

if submitting this form as part of a joint report on behalf of a	
	SPDES ID
Name of MS4/Coalition TOWN OF MOREAU	N Y R 2 0 A 1 5 8
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Continue to record outfall inspections using standard ORI forms.	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
All stormwater outfalls have been mapped but their drainage area to facilitate illicit discharge track down. The Town continues to crotational basis to ensure that all outfalls are inspected at least on are used to record findings and follow up actions.	conduct outfall inspections on a
C. How many times was this observation measured or evaluation	ted in this reporting period?
•	
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal	
2. This your Mis I made progress to ward this measurable god.	• Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in t	
2. 15 your 14154 on senedule to meet the deadline set for th in t	• Yes O No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	eet the goals of this MCM during
The ISWM Program mapping for Town outfalls has been completed for Form will be completed following the release and finalization of Full implementation will be accomplished by the end of the first	the new Draft MS4 General Permit.

9126383899

MS4 Annual Report Form

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

If submitting	ng this form as part of a joint report on behalf of a				ES I	D bla	.nk.	
		7		ES ID			1 1	
Name of MS4/Coalition	Village of Round Lake		N .	YR	2	0 A	0	9 9
Use this page to repidentified in your St III.C.1. Submit addi	gress Toward Measurable Goals MCM 3 ort on your progress and project plans toward formwater Management Program Plan (SWMI tional pages as needed.	PP), inclu	ding	requ	iren	nents	in P	
A. Briefly summar	rize the Measurable Goal identified in the S	WMPP i	n th	is re	ort	ing p	eric	od.
County. Updates to the above referenced have been dry-weath	ge collection system is complete, in partnership this mapping will continue through 2020 and will online GIS Viewer (www.spatial.vhb.com/Sarater screened in this 5-year permit cycle (ref. GP-ompliance requirement for this MCM in Permit-	ll be availatogaMap\ -0-15-003)	able View), the	to the ver/); Villa	e put	olic th	rouş out	gh
B. Briefly summar Goal.	rize the observations that indicated the over	all effect	iven	ess o	f thi	is Me	easu	rable
	Mapping, including flow-direction, is complereened in reporting year 9 (2011 - 2012). 0 ou		e sci	reene	d in	Perm	nit-Y	/ear
C How many time	s was this observation measured or evaluat	ad in this	ron	orti	ıa n	ario	19	
c. How many time	s was this observation measured of evaluat	icu ili ulis	s г ср					1
D. Has your MS4 n	nade progress toward this measurable goal	during t	his r				iod?	icipants O No
E. Is your MS4 on	schedule to meet the deadline set forth in the	he SWMI	PP?					0.1.
	ize the stormwater activities planned to me ng cycle (including an implementation sche	•	als o	f this		● Ye		○ No ng
	ing of all outfalls will resume next Reporting- on to cloud-based ESRI ArcGIS Online Mobil					ction	and	l

Yes

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

		_	211	7E2	ענו						
Name of MS4/Coalition	Saratoga County, Department of Public Works		N	Y	R	2	0	A	2	0	9

12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

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 ma	ny times	was this obse	rvation mea	asured or e	valuated in	this reporting	neriod?
v	LIUW IIIA	HA HHIES	Was this onse	a vauvu mu	asurçu or c	valuatou III	mis reporting	periou.

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?
- 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.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	SPL)ES	ID						
Name of MS4/Coalition City of Saratoga Springs	N	Y	R	2	0	А	2	1	6

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 the outfalls at least once every (5) years.
- 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 existing conditions.

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

- (3) potential illicit discharges identified, investigated, and/or 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.
- (2) stormwater sampling events with samples tested for fecal coliform.

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				3	
(ex.: samp	les/	part	ici	pant	s/events

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

Yes	\bigcirc No

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

• Yes	\cup	No
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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 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 to identify and eliminate pollution.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

it submitting this form as part of a joint report on behalf of a coantion leave of DES ID blank.
Name of MS4/Coalition South Glens Falls SPDES ID N Y R 2 0 A 0 9 1
12. Evaluating Progress Toward Measurable Goals MCM 3
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Continue to use new GIS to map and inspect our stormwater system.
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? (ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
● Yes ○ No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue to check outfalls for Illicit discharges. Train employees. Continue to use the new GIS system to inspect and improve our stormwater system.

<u>MS4</u>	Annual	Report	Form

This report is being submitted for the reporting period ending March	9,	2	0	2	3
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	SPDES ID
Name of MS4/Coalition Town of Stillwater	N Y R 2 0 A 5 4 9
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward ac identified in your Stormwater Management Program Plan (SWMPP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
The Town is working in coalition with the Saratoga County ISWM standardized resource/inventory of a county wide stormwater sewe were mapped and a full outfall reconnaissance is was performed. It this and mapped with GIS and made available to all members of the	rshed database. The watersheds nformation was obtained from
B. Briefly summarize the observations that indicated the overal Goal.	ll effectiveness of this Measurable
The Town of Stillwater adopted its Stormwater Management Plan a November of 2016. No illicit discharges were reported during this in	
C. How many times was this observation measured or evaluated	I in this reporting period?
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal d	uring this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedu	Ü
The Town participates in the Saratoga County ISWM program who standardized resource/inventory of a county wide stormwater sewer IDDE was passed in November of 2016	

MS4 Annual	Report	Form
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This report is being submitted for the reporting period ending March 9, 2	0 2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

if Submitting this form as part of a joint report on behalf of a c	SPDES ID
Name of MS4/Coalition Village of Stillwater	N Y R 2 0 A 5 4 7
2. Evaluating Progress Toward Measurable Goals MCM 3	
Jse this page to report on your progress and project plans toward a dentified in your Stormwater Management Program Plan (SWMPI II.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	VMPP in this reporting period.
The Village is working in coalition with the Saratoga County ISW standardized resource/inventory of a county wide stormwater sewe were mapped and a full outfall reconnaissance is was performed. It this and will be mapped with GIS and made available to all members.	ershed database. The watersheds Information was obtained from
3. Briefly summarize the observations that indicated the overa	ll effectiveness of this Measurable
The Village of Stillwater adopted its Stormwater Management Plan November of 2016.	n and Local IDDE Law in
C. How many times was this observation measured or evaluate	d in this reporting period?
). Has your MS4 made progress toward this measurable goal o	(ex.: samples/participants/e
7. Has your MD4 made progress toward this measurable goard	• Yes O No
2. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	

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

This report is being submitted for the reporting period ending March 9, 2 0 2 3

		SPDES ID	
Name of MS4/Coalition	Town of Waterford	N Y R 2 0 A 0 3 7	
12. Evaluating Pro	gress Toward Measurable Goals MCM 3		
identified in your St	oort on your progress and project plans towar tormwater Management Program Plan (SWN itional pages as needed.		
A. Briefly summar	rize the Measurable Goal identified in the	SWMPP in this reporting period.	
Outfall inspections	are performed at a rate of 100% of the outfa	alls every five years, as required.	
B. Briefly summar Goal.	rize the observations that indicated the ov	verall effectiveness of this Measurable	
I .	n a new 5-year inspection period, and is there needed and two locations received maintenant	*	
C. How many time	es was this observation measured or evalu	nated in this reporting period?	
D. Has your MS4	made progress toward this measurable go	(ex.: samples/participants/ev pal during this reporting period?	wents)
E Is were MC4 on	sahadula 4a maa44ha daadlina aa4 fau4h in	● Yes ○ No	
E. 18 your W154 on	schedule to meet the deadline set forth in	• Yes O No	
•	rize the stormwater activities planned to ning cycle (including an implementation scl	9	
	tinue to adhere to the required outfall inspec ipal Stormwater Management Program assis	,	

Year 20/2022-2023 Combined MS4 Annual Report

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,	2	0	2	3
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Name of MS4/Coalition Town of Wilton	SPDES ID N Y R 2 0 A 1 1 4
Name of MS4/Coantion 10 Who is wheth	
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Continue program of outfall inspections and data collection for II Continue performing dry weather inspections on outfalls.	DDE;
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
No illicit discharges found at outfall locations inspected.	
C. How many times was this observation measured or evaluate	1
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events, l during this reporting period?
	Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in t	he SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	eet the goals of this MCM during
Continue with outfall inspections Continue performing inspections with reports and photographs w	hen necessary.

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

Nan	ne of MS4/Coalition Town of Ballston		N Y	R	2 () A	1	5 7
	Minimum Control Measures Construction Site and Post-Construction		_	<u>ol</u>				
The	e information in this section is being reported (check one):							
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?							
1a	Has each MS4 contributing to this report adopted a law, of mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?				Peri		or	○ No
1b	Has each Town, City and/or Village contributing to this requivalent to a NYSDEC Sample Local Law for Stormwa Sediment Control through either an attorney cerfification Analysis Workbook?	ter Mana	gement the N	nt a	nd l DEC	Eros	ion p	
	If Yes, Towns, Cities and Villages provide date of equivalent		nple L 09/2004			w. 3/200	6	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure	e in plac	e?			• Ye	es	○ No
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	n Plans (S	SWPP	Ps)	hav	e be	en	1 2
4.	Does your MS4/Coalition have a mechanism for receipt arcomments related to construction SWPPPs?	nd consid		n o • Y	-	blic O N	0	O NT
	If Yes, how many public comments were received during this	reporting	g perio	d?				1
5.	Does your MS4/Coalition provide education and training SWPPP process?	for contr	actors	ab		the l • Ye		l O No

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Charlton		NY	R	2	0 A	0	3 2
Minimum Control Measures	4 and 5	<u>•</u>					
Construction Site and Post-Construction	uction C	Contr	<u>ol</u>				
The information in this section is being reported (check one):							
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1 							
1a. Has each MS4 contributing to this report adopted a law, of mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?						or	○ No
1b. Has each Town, City and/or Village contributing to this re equivalent to a NYSDEC Sample Local Law for Stormwa Sediment Control through either an attorney certification Analysis Workbook?	ter Mana	gement the N	nt a	nd DE	Erosi	ion p	
If Yes, Towns, Cities and Villages provide date of equivalent		mple L 09/2004			w. 3/200	6	O NT
2. Does your MS4/Coalition have a SWPPP review procedur	e in plac	e?			• Ye	es	○ No
3. How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	n Plans (S	SWPP	Ps)	hav	ve bed	en	2
4. Does your MS4/Coalition have a mechanism for receipt are comments related to construction SWPPPs?	nd consid		n o	-	ıblic O N	0	O NT
If Yes, how many public comments were received during this	reporting	g perio	d?				0
5. Does your MS4/Coalition provide education and training SWPPP process?	for contr	actors	ab	out	the l		l O No

SWPPP process?

● Yes ○ No

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 2 \begin{vmatrix} 3 & 0 \end{vmatrix}$

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

		_	SPL	DES ID)				
Naı	me of MS4/Coalition TOWN OF CLIFTON PARK		N	YR	2	0 .	A C	3	5
	Minimum Control Measures	4 and 5	<u>.</u>						
	Construction Site and Post-Construction	uction (Con	trol					
Th	e information in this section is being reported (check one):								
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	1							
1a	a. Has each MS4 contributing to this report adopted a law, of mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?					rmi	•		No
1b	o. Has each Town, City and/or Village contributing to this reequivalent to a NYSDEC Sample Local Law for Stormwa Sediment Control through either an attorney cerfification Analysis Workbook?	iter Mana	ager	nent NYS	and	EC C	osioı	ı an	
	If Yes, Towns, Cities and Villages provide date of equivalent			e Loc 004		aw. 03/2	006	0	NT
2.	Does your MS4/Coalition have a SWPPP review procedure	re in plac	æ?				Yes	0	No
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	n Plans (S	SW.	PPPs) ha	ve b	een	1	4
4.	Does your MS4/Coalition have a mechanism for receipt arcomments related to construction SWPPPs?	nd consid	lera		of p Yes		i c No	0	NT
	If Yes, how many public comments were received during this	s reporting	o ne	riod?					0
		, reporting	5 P°				L		

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

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Greenfield	ļ	NY	R	2	0 A	1	2 3
Minimum Control Measures	4 and 5	<u>•</u>					
Construction Site and Post-Constru	ction C	<u>Contr</u>	<u>ol</u>				
The information in this section is being reported (check one):							
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1 							
1a. Has each MS4 contributing to this report adopted a law, or mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?						or	○ No
1b. Has each Town, City and/or Village contributing to this reequivalent to a NYSDEC Sample Local Law for Stormwate Sediment Control through either an attorney cerfification Analysis Workbook?	er Mana	gement the N	nt a	nd i	Eros	ion p	
If Yes, Towns, Cities and Villages provide date of equivalent I		nple L 09/2004			w. 3/200	06	O NT
2. Does your MS4/Coalition have a SWPPP review procedure	e in plac	e?			• Ye	es	○ No
3. How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	Plans (S	SWPP	Ps)	hav	e be	en	3
4. Does your MS4/Coalition have a mechanism for receipt and comments related to construction SWPPPs?	d consid		n of D Ye	_	ıblic O N	[o	O NT
If Yes, how many public comments were received during this	reporting	g perio	d?				0
5. Does your MS4/Coalition provide education and training f SWPPP process?	or contr	actors	abo	out	the l		ol O No

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Nan	ne of MS4/Coalition	Town	of Hal	fmoon							NY	R	2 0	A	3	7 5	5
		Car		nimun							_	1					
		<u>Co</u>	<u>istruc</u>	tion S	one al	<u>na r</u>	<u> </u>	<u> Jonstr</u>	<u>ucu</u>	on C	JONU	01					
The	e information in thi	nis secti	on is be	eing repo	orted ((check	one):										
	On behalf of an ind On behalf of a coal How ma	lition		ntribute	ed to tl	his re	eport?										
1a	Has each MS4 of mechanism that Stormwater Dis	at prov	ides ec	quivaler	nt pro	otecti	on to	the NY					Pern		or	\circ N	lo
1b	.Has each Town equivalent to a Sediment Contr Analysis Work	NYSI trol th	DEC Sa	ample L	Local	Law	for S	tormwa	ater I	Mana	agemo	ent	and E	cros	ion p		
	If Yes, Towns, C	Cities	and Vil	lages pr	rovide	e date	of eq	uivalen	t NY		mple] 09/200		al Lav		06	\circ N	Т
2.	Does your MS4	4/Coal	ition h	ave a S'	WPPI	P rev	iew p	rocedu	re in	plac	ce?		(● Ye	es	\circ N	Ю
3.	How many Con reviewed in this				ter Po	olluti	on Pr	eventio	n Pla	ans (SWPl	PPs)	have	e be	en	1 (0
4.	Does your MS4 comments relate						for re	eceipt a	nd c	onsic	lerati	on (-	olic O N	О	O N	Т
	If Yes, how man	ny pub	lic com	ments v	were r	receiv	ed du	ring thi	s rep	orting	g perio	od?				(Э
5.	Does your MS4. SWPPP process		ition p	rovide 6	educa	ation	and t	raining	for (conti	ractor	s al		he l • Ye			lo

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Nan	ne of MS4/Coalition Town of Malta		NY	R	2 0	А	0	8 6	5
	Minimum Control Measures Construction Site and Post-Constru			<u>.ol</u>					
The	e information in this section is being reported (check one):								
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?								
1a	Has each MS4 contributing to this report adopted a law, o mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?				Perm		or	□N	0
1b	1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook? • Yes No NT								
	If Yes, Towns, Cities and Villages provide date of equivalent		mple l 09/200		l Law		6	□N	Т
2.	Does your MS4/Coalition have a SWPPP review procedure	e in pla	ce?		[Υe	es	□N	0
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	Plans (SWPI	PPs)	have	bee	en	4	F
4.	Does your MS4/Coalition have a mechanism for receipt an comments related to construction SWPPPs?	d consid		on o		lic]N	0	□N	Т
	If Yes, how many public comments were received during this	reportin	g perio	od?				0)
5.	Does your MS4/Coalition provide education and training to SWPPP process?	for cont	ractor	s ab		he le		l □n	0

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

			SPDE	SID					_
Nan	ne of MS4/Coalition City of Mechanicville		N Y	7 R	2 () A	5	5 1	L
	Minimum Control Measures 4 Construction Site and Post-Constru		_	<u>rol</u>					
The	e information in this section is being reported (check one):								
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?								
1a	Has each MS4 contributing to this report adopted a law, or mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?				Peri		r	O N	О
1b	.Has each Town, City and/or Village contributing to this re equivalent to a NYSDEC Sample Local Law for Stormwate Sediment Control through either an attorney cerfification Analysis Workbook?	er Mana	gem	ent a	nd l DEC	Erosi	on : p		
	If Yes, Towns, Cities and Villages provide date of equivalent I		nple 09/200			w. 3/2000	5	O N	T
2.	Does your MS4/Coalition have a SWPPP review procedure	e in plac	e?			• Ye	S	\circ N	o
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	Plans (S	SWP:	PPs)	hav	e bee	en	C)
4.	Does your MS4/Coalition have a mechanism for receipt and comments related to construction SWPPPs?	d consid	erati	on of	-	blic O No)	O N	T
	If Yes, how many public comments were received during this	reporting	g peri	od?					
5.	Does your MS4/Coalition provide education and training f SWPPP process?	or contr	actoi	rs abo		the lo		l O N	О

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

		SPDES 1	D		
Nan	ne of MS4/Coalition TOWN OF MILTON	N Y	R 2	0 A 1	. 0 8
	Minimum Control Measures 4 an Construction Site and Post-Construction		<u>1</u>		
The	e information in this section is being reported (check one):				
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?				
1a	. Has each MS4 contributing to this report adopted a law, ordina mechanism that provides equivalent protection to the NYS SPE Stormwater Discharges from Construction Activities?		_		-
1b	.Has each Town, City and/or Village contributing to this report equivalent to a NYSDEC Sample Local Law for Stormwater M Sediment Control through either an attorney cerfification or us Analysis Workbook?	anagemen	t and	Erosio	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS	Sample Lo • 09/2004		w. 3/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in p	place?		• Yes	○ No
3.	How many Construction Stormwater Pollution Prevention Planereviewed in this reporting period?	ıs (SWPPF	's) hav	ve been	1 3
4.	Does your MS4/Coalition have a mechanism for receipt and concomments related to construction SWPPPs?		of pu Yes	ıblic O No	O NT
	If Yes, how many public comments were received during this report	ting period	?		7
5.	Does your MS4/Coalition provide education and training for co SWPPP process?	ontractors	about	• Yes	cal O No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Nam	ne of MS4/Coalition TOWN OF MOREAU		NY	R	2 0) A	1	5 8
	Minimum Control Measures Construction Site and Post-Constru			<u>ol</u>				
The	information in this section is being reported (check one):							
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?							
1a.	Has each MS4 contributing to this report adopted a law, o mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?				Pern		or	○ No
1b.	Has each Town, City and/or Village contributing to this reequivalent to a NYSDEC Sample Local Law for Stormwat Sediment Control through either an attorney cerfification Analysis Workbook?	ter Mana	gement the N	nt a	nd E DEC	cros	ion p	
	If Yes, Towns, Cities and Villages provide date of equivalent		nple L 09/2004		1 Lav ● 03		6	○ NT
2.	Does your MS4/Coalition have a SWPPP review procedur	e in plac	e?		(• Y	es	○ No
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	Plans (S	SWPP	Ps)	have	e be	en 4	
4.	Does your MS4/Coalition have a mechanism for receipt an comments related to construction SWPPPs?	d consid		n o • Y	-	blic O N	o	O NT
	If Yes, how many public comments were received during this	reporting	g perio	d?			0	
5.	Does your MS4/Coalition provide education and training to SWPPP process?	for contr	actors	ab		the l ● Ye		l O No

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.

SPDES ID Village of Round Lake NYR2 0 A Name of MS4/Coalition

Minimum Control Measures 4 and 5

Construction Site and Post-Construction		
The information in this section is being reported (check one):		
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1 		
1a. Has each MS4 contributing to this report adopted a law, ore mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?		r
1b. Has each Town, City and/or Village contributing to this rep equivalent to a NYSDEC Sample Local Law for Stormwater Sediment Control through either an attorney cerfification of Applysis Workhook?	r Management and Erosio r using the NYSDEC Gap	n and
Analysis Workbook?	● Yes ○ No	ONT
If Yes, Towns, Cities and Villages provide date of equivalent N	YS Sample Local Law. ○ 09/2004 ● 03/2006	ONI
2. Does your MS4/Coalition have a SWPPP review procedure	in place? • Yes	O No
3. How many Construction Stormwater Pollution Prevention Freviewed in this reporting period?	Plans (SWPPPs) have been	0
4. Does your MS4/Coalition have a mechanism for receipt and comments related to construction SWPPPs?	consideration of public • Yes • No	O NT
If Yes, how many public comments were received during this re	porting period?	0
5. Does your MS4/Coalition provide education and training for SWPPP process?	r contractors about the loc • Yes	eal O No

SWPPP process?

● Yes ○ No

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

Nam	ne of MS4/Coalition Saratoga County, Department of Public Works N Y R	2	0 A 2	0 9
	Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control			
The	e information in this section is being reported (check one):			
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?			
	Has each MS4 contributing to this report adopted a law, ordinance or othe mechanism that provides equivalent protection to the NYS SPDES General		mit for	
	Stormwater Discharges from Construction Activities?		Yes	○ No
	.Has each Town, City and/or Village contributing to this report documente equivalent to a NYSDEC Sample Local Law for Stormwater Management Sediment Control through either an attorney cerfification or using the NY Analysis Workbook?	and	Erosion C Gap	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Loc • 09/2004		iw. 13/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?		• Yes	○ No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPP) reviewed in this reporting period?	s) ha	ve been	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration comments related to construction SWPPPs?	of po	ublic	O NT
	If Yes, how many public comments were received during this reporting period	?		0

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

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

		SPD	ES ID				
Nan	ne of MS4/Coalition City of Saratoga Springs	N	YR	2 0	А	2 1	6
	Minimum Control Measures 4 and Construction Site and Post-Construction		<u>trol</u>				
The	e information in this section is being reported (check one):						
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?						
1a	Has each MS4 contributing to this report adopted a law, ordinand mechanism that provides equivalent protection to the NYS SPDE Stormwater Discharges from Construction Activities?			Perm		r) No
1b	Has each Town, City and/or Village contributing to this report do equivalent to a NYSDEC Sample Local Law for Stormwater Man Sediment Control through either an attorney cerfification or usin Analysis Workbook?	nagen	nent a	nd Ei DEC	rosic	on ai	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sa	ample 09/2		Law 03/2		; C	NT
2.	Does your MS4/Coalition have a SWPPP review procedure in pla	ice?			Yes	s C	No No
3.	How many Construction Stormwater Pollution Prevention Plans reviewed in this reporting period?	(SW]	PPPs)	have	beer	n	5
4.	Does your MS4/Coalition have a mechanism for receipt and consicomments related to construction SWPPPs?	dera	tion of	-	lic O No		NT
	If Yes, how many public comments were received during this reporting	ng pe	riod?				0
5.	Does your MS4/Coalition provide education and training for cont SWPPP process?	tracto	ors abo		ie lo Yes		No

SWPPP process?

O No

Yes

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

	S	PDES ID		
Name of MS4/Coalition South Glens Falls	1	1 Y R 2	0 A C	9 1
Minimum Control Measures 4 Construction Site and Post-Construction		ontrol		
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, or mechanism that provides equivalent protection to the NYS				P
Stormwater Discharges from Construction Activities?	SPDES	seneral P	Yes	O No
1b. Has each Town, City and/or Village contributing to this repequivalent to a NYSDEC Sample Local Law for Stormwate Sediment Control through either an attorney cerfification of Analysis Workbook?	er Manag	ement and	d Erosioı EC Gap	
If Yes, Towns, Cities and Villages provide date of equivalent N	VYS Samp	ole Local I	∠aw.	
	O 09	/2004	03/2006	O NT
2. Does your MS4/Coalition have a SWPPP review procedure	in place?	?	Yes	O No
3. How many Construction Stormwater Pollution Prevention 1 reviewed in this reporting period?	Plans (SV	VPPPs) ha	ive been	0
4. Does your MS4/Coalition have a mechanism for receipt and comments related to construction SWPPPs?	l consider	ation of p		O NT
If Yes, how many public comments were received during this re	eporting p	eriod?		0
5. Does your MS4/Coalition provide education and training fo	r contrac	tors abou	t the loc	al

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

		_	SPDE	SID					
Naı	me of MS4/Coalition Town of Stillwater		NY	R	2	0 <i>I</i>	4 5	4	9
	Minimum Control Measures Construction Site and Post-Constr			<u>rol</u>					
Th	e information in this section is being reported (check one):								
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?								
1a	. Has each MS4 contributing to this report adopted a law, of mechanism that provides equivalent protection to the NY								
	Stormwater Discharges from Construction Activities?	3 31 10123	Gen	ci ai i	. CI	• 7		0	No
1b	.Has each Town, City and/or Village contributing to this requivalent to a NYSDEC Sample Local Law for Stormwa Sediment Control through either an attorney cerfification Analysis Workbook?	ter Mana	igeme	ent ar	ıd E	Ero	sion ap	an	
	If Yes, Towns, Cities and Villages provide date of equivalent		nple I)9/200			w. 3/20	06	0]	NT
2.	Does your MS4/Coalition have a SWPPP review procedur	e in plac	e?			Y	?es	0	No
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	n Plans (S	SWPI	PPs) l	ıav	ze be	een		1
4.	Does your MS4/Coalition have a mechanism for receipt arcomments related to construction SWPPPs?	ıd consid		on of ● Ye	•	oildı 1 O		0]	NT
	If Yes, how many public comments were received during this	reporting	g perio	od?					0
5.	Does your MS4/Coalition provide education and training SWPPP process?	for contr	actor	s abo	ut		loca	_	Nο

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$ 3

SPD	ES ID		
Name of MS4/Coalition Village of Stillwater N	YR2	0 A !	5 4 7
Minimum Control Measures 4 and 5.			
Construction Site and Post-Construction Con	<u>trol</u>		
The information in this section is being reported (check one):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 			
1a. Has each MS4 contributing to this report adopted a law, ordinance or mechanism that provides equivalent protection to the NYS SPDES General Stormwater Discharges from Construction Activities?		~	r
1b. Has each Town, City and/or Village contributing to this report docum	ented th	at the la	aw is
equivalent to a NYSDEC Sample Local Law for Stormwater Managen	nent and	Erosio	
Sediment Control through either an attorney cerfification or using the Analysis Workbook?	• Yes	C Gap O No	ONT
If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample 09/20		aw. 03/2006	O NT
2. Does your MS4/Coalition have a SWPPP review procedure in place?		• Yes	○ No
3. How many Construction Stormwater Pollution Prevention Plans (SWI reviewed in this reporting period?	PPPs) ha	ve been	
4. Does your MS4/Coalition have a mechanism for receipt and considerate comments related to construction SWPPPs?	tion of p ● Yes	ublic O No	O NT
If Yes, how many public comments were received during this reporting per			0
5. Does your MS4/Coalition provide education and training for contracto SWPPP process?	ors abou	t the loc Yes	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

		SPDES ID		
Nan	ne of MS4/Coalition Town of Waterford	N Y R	2 0 A 0	3 7
	Minimum Control Measures 4 and Construction Site and Post-Construction			
The	e information in this section is being reported (check one):			
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?			
1a	. Has each MS4 contributing to this report adopted a law, ordin mechanism that provides equivalent protection to the NYS SPI Stormwater Discharges from Construction Activities?		· ·	O No
1b	.Has each Town, City and/or Village contributing to this report equivalent to a NYSDEC Sample Local Law for Stormwater M Sediment Control through either an attorney cerfification or u Analysis Workbook?	Ianagement a	nd Erosion DEC Gap	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS	1	l Law. ● 03/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in	place?	• Yes	○ No
3.	How many Construction Stormwater Pollution Prevention Platereviewed in this reporting period?	ns (SWPPPs)	have been	0
4.	Does your MS4/Coalition have a mechanism for receipt and cocomments related to construction SWPPPs?	onsideration o • Y	•	ONT
	If Yes, how many public comments were received during this repo	orting period?		0
5	Does your MS4/Coalition provide education and training for co	ontractors ab	out the less	al

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Nan	ne of MS4/Coalition Town of Wilton		NY	R	2 0	A	1	1 4	4
	Minimum Control Measures Construction Site and Post-Constru		-	<u>ol</u>					
The	e information in this section is being reported (check one):								
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?								
1a	Has each MS4 contributing to this report adopted a law, o mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?				Perm		or	\circ N	Vо
1b	Has each Town, City and/or Village contributing to this reequivalent to a NYSDEC Sample Local Law for Stormwat Sediment Control through either an attorney cerfification Analysis Workbook?	er Mana	gement the N	nt a	nd E DEC	rosi	ion p		
	If Yes, Towns, Cities and Villages provide date of equivalent		nple L 19/2004		1 Law		6	\circ N	ΙΤ
2.	Does your MS4/Coalition have a SWPPP review procedure	e in plac	e?			Ye	es	\circ N	Лo
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	Plans (S	SWPP	Ps)	have	bee	en		4
4.	Does your MS4/Coalition have a mechanism for receipt an comments related to construction SWPPPs?	d consid		n o • Y	-	olic O N	0	\circ N	1T
	If Yes, how many public comments were received during this	reporting	perio	d?					0
5.	Does your MS4/Coalition provide education and training to SWPPP process?	for contr	actors	ab		he lo		l ON	Лo

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

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

Notices of Violation	#		1	No Authority
O Stop Work Orders	#		0	O No Authority
O Criminal Actions	#		0	O No Authority
O Termination of Contracts	#		0	O No Authority
O Administrative Fines	#		0	O No Authority
O Civil Penalties	#		0	O No Authority
O Administrative Orders	#		0	O No Authority
O Enforcement Actions or Sanctions	#		0	
Other	#		3	O No Authority

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

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

Notices of Violation	#		1	O No Authority
O Stop Work Orders	#		0	O No Authority
O Criminal Actions	#			O No Authority
O Termination of Contracts	#			O No Authority
O Administrative Fines	#			O No Authority
O Civil Penalties	#			O No Authority
O Administrative Orders	#			O No Authority
O Enforcement Actions or Sanctions	#			
Other	#			O No Authority

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

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

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

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

Notices of Violation	#		2	O No Authority
Stop Work Orders	#		1	O No Authority
O Criminal Actions	#			O No Authority
O Termination of Contracts	#			O No Authority
O Administrative Fines	#			O No Authority
O Civil Penalties	#			O No Authority
O Administrative Orders	#			O No Authority
O Enforcement Actions or Sanctions	#			
Other	#			O No Authority

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

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

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

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

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

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

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Naı	me of MS4/Coalition Town of Ballston		NY	R 2	0 A	1	5	7
	Minimum Control Measure 4. Construction Site	Stormy	vater	Run	off C	oní	trol	
	Minimum Control Nacasare ii. Construction Site		<u>vater</u>	IXuII		<u> </u>	<u> </u>	i
Th	e information in this section is being reported (check one):							
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?							
	How many MS4s contributed to this report?							
1.	How many construction projects have been authorized for during this reporting period?	disturba	ances (of one	acre (or n		e 2
	9 1 91							
2.	How many construction projects disturbing at least one a during this reporting period?	cre were	active	in yo	ur jur	isdi		2
3.	What percent of active construction sites were inspected of	luring th	is repo	orting	perio	d?	\circ	ΝΤ
					1	0	0	%
4.	What percent of active construction sites were inspected r	nore than	once	?			\circ N	VT
					1	0	0	%
5.	Do all inspectors working on behalf of the MS4s contribution Construction Stormwater Inspection Manual?	ting to th	-	ort us	e the N		S	TN
6.	Does your MS4/Coalition provide public access to Stormy (SWPPPs) of construction projects that are subject to MS					Pla	ns	
			ĺ	Yes	\circ N		\circ N	VΤ
	If your MS4 is Non-Traditional, are SWPPPs of construct public review?	tion proje	ects m	ade av	ailabl • Ye		or Ol	No
	If Yes, use the following page to identify location(s) where S	WPPPs ca	an be a	ccesse	ed.			

N Y R 2 0 A 0 3 2

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Name of MS4/Coalition Town of Charlton	N Y R 2 0 A 0 3 2
Minimum Control Measure 4. Construction Site	e Stormwater Runoff Control
The information in this section is being reported (check one):	
On behalf of an individual MS4On behalf of a coalition	
How many MS4s contributed to this report? 1	
1. How many construction projects have been authorized fo during this reporting period?	r disturbances of one acre or more
2. How many construction projects disturbing at least one a during this reporting period?	acre were active in your jurisdiction
3. What percent of active construction sites were inspected	during this reporting period? \bigcirc NT
	1 0 0 %
4. What percent of active construction sites were inspected	more than once? ONT
	100%
5. Do all inspectors working on behalf of the MS4s contribution Stormwater Inspection Manual?	Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Storms (SWPPPs) of construction projects that are subject to MS	
If your MS4 is Non-Traditional, are SWPPPs of construct public review?	- 100 - 111

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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 Run	off Con	<u>trol</u>
The information in this section is being reported (check one):		
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 		
1. How many construction projects have been authorized for disturbances of one during this reporting period?	acre or	more 6
2. How many construction projects disturbing at least one acre were active in yo during this reporting period?	ur jurisd	iction 2 4
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?	2	O NT
5. Do all inspectors working on behalf of the MS4s contributing to this report us Construction Stormwater Inspection Manual? • Yes		S O NT
6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevo (SWPPPs) of construction projects that are subject to MS4 review and approv	al?	ans
If your MS4 is Non-Traditional, are SWPPPs of construction projects made as public review?		for

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

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Nan	me of MS4/Coalition Town of Greenfield N	Y R 2	0 A 1	2 3
	Minimum Control Measure 4. Construction Site Stormwate	er Rung	off Con	<u>trol</u>
The	ne information in this section is being reported (check one):			
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?			
1.	How many construction projects have been authorized for disturbance during this reporting period?	s of one	acre or 1	more 0 3
2.	How many construction projects disturbing at least one acre were actiduring this reporting period?	ve in you	r jurisd	o 7
3.	. What percent of active construction sites were inspected during this re	porting	period?	
4.	. What percent of active construction sites were inspected more than on	ce?	1 0	
5.	Do all inspectors working on behalf of the MS4s contributing to this re Construction Stormwater Inspection Manual?	eport use • Yes	the NY	
6.	. Does your MS4/Coalition provide public access to Stormwater Pollutio (SWPPPs) of construction projects that are subject to MS4 review and	approva		ans
	If your MS4 is Non-Traditional, are SWPPPs of construction projects public review?			
	If Vestuse the following page to identify location(s) where SWPPPs can be	e accesse	d	

public review?

○ Yes

 \bigcirc No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

Name of MS4/Coalition Town of Halfmoon	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 during this reporting period?	disturbances of one acre or more
2. How many construction projects disturbing at least one aduring this reporting period?	cre were active in your jurisdiction 4 0
3. What percent of active construction sites were inspected d	luring this reporting period? \bigcirc NT
	1 0 0 %
4. What percent of active construction sites were inspected in	
5. Do all inspectors working on behalf of the MS4s contribut	ting to this report use the NVS
Construction Stormwater Inspection Manual?	● Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Stormw (SWPPPs) of construction projects that are subject to MS-	
, 1 3	• Yes O No O NT

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

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

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

		_		_										
Nar	ne of MS4/Coalition Town of Malta		N Y	R	2	0 A	0	8 6						
	Minimum Control Measure 4. Construction Site	Stormy	vater	·Rı	<u>uno</u>	ff C	<u>ont</u>	trol						
The	e information in this section is being reported (check one):													
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?													
1.	How many construction projects have been authorized for during this reporting period?	· disturba	nces	of o	ne a	acre (or n	nore 5						
2.	How many construction projects disturbing at least one adduring this reporting period?	cre were	active	e in	you	r juri	isdi	ction 2 2						
3.	What percent of active construction sites were inspected d	t percent of active construction sites were inspected during this reporting period? \square NT $1 0 0 \%$												
4.	What percent of active construction sites were inspected in	nore than	once	?			4							
5.	Do all inspectors working on behalf of the MS4s contribut Construction Stormwater Inspection Manual?	ting to th		ort • Y		the N		S NT						
6.	Does your MS4/Coalition provide public access to Stormw (SWPPPs) of construction projects that are subject to MS4		and a		rova			ns						
	If your MS4 is Non-Traditional, are SWPPPs of construct public review?	ion proje		_		_	le fo	_						
	If Yes, use the following page to identify location(s) where S'	WPPPs ca	an be	acce	essec	1.								

SPDES ID

MS4 Annual Report Form

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

Nar	me of MS4/Coalition	City of Mechanicvl	le				N Y	R 2	0 A	5	5 1
	Minimum C	ontrol Mea	sure 4. Co	<u>onstructi</u>	ion Site	Stormy	<u>watei</u>	r Rur	off C	<u>ont</u>	rol
The	e information in thi	is section is be	ing reported ((check one):							
	On behalf of an ind On behalf of a coal How ma		ntributed to the	his report?							
1.	How many cons during this repo		•	een autho	rized for	disturb	ances	of on	e acre (or n	o o
2.	How many cons during this repo	-	•	bing at lea	st one ac	cre were	activ	e in yo	our jur	isdi	ction 2
3.	What percent o	of active cons	truction site	es were ins	spected d	luring th	is rep	orting	g perio	d?	○ NT 0 %
4.	What percent of	of active cons	truction site	es were ins	spected n	nore tha	n onc	e?	1	0	○ NT 0 %
5.	Do all inspector Construction S				contribut	ting to th	nis rep	ort u			S
6.	Does your MS4 (SWPPPs) of co								val?		ns
	If your MS4 is public review?	Non-Traditio	onal, are SW	VPPPs of c	construct	ion proj	ects n			le fo	
	If Yes, use the fe	following page	e to identify l	location(s)	where S	WPPPs c	an be	access	sed.		

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

Nar	me of MS4/Coalition TOWN OF MILTON N Y R 2 0 A 1 0 8
	Minimum Control Measure 4. Construction Site Stormwater Runoff Control
The	e information in this section is being reported (check one):
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?
1.	How many construction projects have been authorized for disturbances of one acre or more during this reporting period?
2.	How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 20
3.	What percent of active construction sites were inspected during this reporting period? \bigcirc NT $1 \ 0 \ 0 \ \%$
4.	What percent of active construction sites were inspected more than once? ONT 1 0 0 %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? • Yes O No O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? ● Yes ○ No ○ NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? O Yes O No

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

		SPL)ES	ш						
Name of MS4/Coalition	TOWN OF MOREAU	N	Y	R	2	0	А	1	5	8

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one a during this reporting period?		more
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	ı –	diction
3.	What percent of active construction sites were inspected during this reporting p		
4.	What percent of active construction sites were inspected more than once?		0 0 % O NT 0 0 %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? • Yes		YS ○ NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approva	1?	
			O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?	ailable ● Yes	
	YOY	1	

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

	SPDES ID
Name of MS4/Coalition Village of Round Lake	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 during this reporting period?	disturbances of one acre or more
2. How many construction projects disturbing at least one ac during this reporting period?	re were active in your jurisdiction
3. What percent of active construction sites were inspected de	uring this reporting period? \bigcirc NT
	1 0 0 %
4. What percent of active construction sites were inspected m	ore than once?
	1 0 0 %
5. Do all inspectors working on behalf of the MS4s contribution	
Construction Stormwater Inspection Manual?	● Yes ○ No ○ NT
6. Does your MS4/Coalition provide public access to Stormws (SWPPPs) of construction projects that are subject to MS4	
If your MS4 is Non-Traditional, are SWPPPs of constructi	
public review?	○ Yes ○ No
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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 Saratoga County, Department of Public Works		N	Y	R	2	0	A	2	0	9
	_									

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The	information in this goation is being reported (absolve ano).		
	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition		
<i>-</i> (How many MS4s contributed to this report?		
1	How many construction projects have been authorized for disturbances of one a	icre or i	nore
1.	during this reporting period?		0
2	How many construction projects disturbing at least one acre were active in your	r iurisd	iction
<i>.</i>	during this reporting period?		0
3.	What percent of active construction sites were inspected during this reporting p	eriod?	• 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 NY	S
	Construction Stormwater Inspection Manual? • Yes	O No	
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6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention (SWPPPs) of construction projects that are subject to MS4 review and approva		ans
		○ No	ONT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available and a supplied to the suppl	ailable f	or
	public review?	O Yes	O No
	If Vac use the following page to identify location(s) where SWPDPs can be accessed	4	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Nar	me of MS4/Coalition City of Saratoga Springs N Y R 2	2 0	A 2	1 6
	Minimum Control Measure 4. Construction Site Stormwater Rus	<u>noff</u>	Con	<u>trol</u>
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1.	How many construction projects have been authorized for disturbances of on during this reporting period?	ie ac	re or	more 1
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3.	What percent of active construction sites were inspected during this reportin	g pe	riod?	
4.	What percent of active construction sites were inspected more than once?		2	○ NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report unconstruction Stormwater Inspection Manual? $\hfill \bigcirc \ensuremath{\mathrm{Ye}}$		ne NY No	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prev (SWPPPs) of construction projects that are subject to MS4 review and appro	val?		
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made a public review?	avail		O NT for No
	If Yes, use the following page to identify location(s) where SWPPPs can be access	sed.		

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

		SPL	ES	ID						
Name of MS4/Coalition	South Glens Falls	N	Y	R	2	0	А	0	9	1

	Minimum Control Measure 4. Construction Site Stormwater Run	off Co	<u>on</u> 1	tro	1
The	e information in this section is being reported (check one):				
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?				
1.	How many construction projects have been authorized for disturbances of one during this reporting period?	acre o	rr	nor	e
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	ır juri [sdi	ictio	0 0
3.	What percent of active construction sites were inspected during this reporting	• —			_
4.	What percent of active construction sites were inspected more than once?	1	0	0	% NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use	the N	0 Y8		%
	Construction Stormwater Inspection Manual? Yes	O No)	01	T
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approve	al?		ns	
	Yes If your MS4 is Non-Traditional one SWDDDs of construction projects made on			01	T
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made av public review?	O Ye		эг 9]	No
	If Yes, use the following page to identify location(s) where SWPPPs can be accesse	d.			

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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		A 5	5 4	9
Minimum Control Measure 4. Construction Site Stormwater R	unoff	'Cor	<u>itrol</u>	00
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 during this reporting period?	one ac	re or	T	3
2. How many construction projects disturbing at least one acre were active in during this reporting period?	your j	jurisc		n
3. What percent of active construction sites were inspected during this report	ing pe	riod?	• N	JT
				%
4. What percent of active construction sites were inspected more than once?			N.	√Т %
5. Do all inspectors working on behalf of the MS4s contributing to this report Construction Stormwater Inspection Manual?			S ON	JT
6. Does your MS4/Coalition provide public access to Stormwater Pollution Pr (SWPPPs) of construction projects that are subject to MS4 review and app	roval?			ĭT
If your MS4 is Non-Traditional, are SWPPPs of construction projects made public review?	e avail	No able Yes	ON for ON	

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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N Y R 2 0 A 5 4 7

Name of MS4/Coalition Village of Stillwater	N Y R 2	0 A 5	5 4 7
Minimum Control Measure 4. Construction Sit	e Stormwater Runo	off Con	<u>trol</u>
The information in this section is being reported (check one):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 			
1. How many construction projects have been authorized for during this reporting period?	or disturbances of one	acre or	more 0
2. How many construction projects disturbing at least one during this reporting period?	acre were active in you	r jurisd	liction
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 ango?		0 % • NT
4. What percent of active construction sites were inspected	more than once.		%
5. Do all inspectors working on behalf of the MS4s contribution Stormwater Inspection Manual?	uting to this report use • Yes	the NY	S Ont
6. Does your MS4/Coalition provide public access to Storm (SWPPPs) of construction projects that are subject to M	S4 review and approva	11?	
If your MS4 is Non-Traditional, are SWPPPs of constructional public review?	• Yes ction projects made av		
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Nar	me of MS4/Coalition Town of Waterford N Y R 2	0 A 0	3 7
	Minimum Control Measure 4. Construction Site Stormwater Runo	off Cont	rol
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	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one during this reporting period?	acre or n	nore
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	ır jurisdi	o
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?	1 0	○ NT 0 %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? • Yes	e the NYS	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preve (SWPPPs) of construction projects that are subject to MS4 review and approv • Yes		ns ONT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made as public review?		
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	ed.	

SPDES ID

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	Town of Wilton			N	YR	2	0 7	. 1	1	4
<u>Minimum C</u>	Control Measure 4.	Construction Sit	e Stormy	<u>vat</u>	er R	un	<u>off (</u>	<u>Con</u>	<u>tro</u>	<u>l</u>

The	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one during this reporting period?	acre or i	more 3
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 2 6
3.	What percent of active construction sites were inspected during this reporting	period?	
4.	What percent of active construction sites were inspected more than once?	8	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? • Yes		S
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention (SWPPPs) of construction projects that are subject to MS4 review and approva	al?	
	● Yes If your MS4 is Non-Traditional, are SWPPPs of construction projects made av	○ No ailable f	
	public review?	○ Yes	

This report is being submitted for the reporting period ending March 9, 2 0 2 3 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID Town of Ballston YR 2 0 Α 1 5 Name of MS4/Coalition 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department o w f В 1 1 t 0 n В u i 1 d i n D е t а S р Address 3 2 3 C h 1 t R d а r 0 n 0 а City Zip В 1 1 S Ν Y 1 2 0 2 0 а t S 0 n р а Phone 5 2 5 8 9 0 1 O Library Address City Zip Phone Other Address City Zip Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

This report is being submitted for the reporting period ending March 9, 2 0 2 3 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID $Name\ of\ MS4/Coalition \ |\ Town\ of\ Charlton$ YR 2 0 A 0 3 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department i o w n n е е r g Address 9 0 0 R 1 4 6 0 u t е City Zip C 1 f Ν Υ 1 2 i t k 0 6 0 n а r Phone 5 2 8 1 6 O Library Address City Zip Ν Y Phone 5 Other Address City Zip Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

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MS4 Annual Report Form

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

SPDES ID

Name of MS4/Coalition Town of Halfmoon

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6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

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This report is being submitted for the reporting period ending March 9, 2 0 2 3 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID $_{Name\ of\ MS4/Coalition}|$ Town of Malta YR 2 0 A 0 8 6 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department Bu i 1 d d 1 D n n n n е Address 2 5 4 0 R t 9 0 u City Zip M Ν Υ 1 2 2 0 1 t 0 а а Phone 5 8 9 2 6 8 5 O Library Address City Zip Ν Y Phone Other Address City Zip Ν Y Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID TOWN OF MILTON Y R 2 0 Α 1 Name of MS4/Coalition 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department 0 W В u i 1 d i D t m е n n g е р а Address 5 0 3 G е R d У S е r 0 а City Zip В S Ν Υ 1 2 0 2 а S 0 n р а Phone 95 1 8 8 5 9 2 O Library Address City Zip 0 Phone 0 0 Other Address City Zip 0 Phone 0 0 O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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MS4 Annual Report Form

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This report is being submitted for the reporting period ending March 9, 2 0 2 3 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$ 3

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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This report is being submitted for the reporting period ending March 9, 2 0 2 3

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This report is being submitted for the reporting period ending March 9, 2 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID N YR 2 0 A 5 4 Village of Stillwater Name of MS4/Coalition 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department 1 Р a n n i D р t. n g е а r t. m e n Address 8 8 1 Hu d Α S o n e \mathbf{n} u City Zip i N 1 S t Υ 2 1 7 0 W а t e r Phone 5 4 1 8 6 6 6 1 O Library Address City ZipPhone Other Address 1 S h 1 S t t С 0 0 r е е City Zip S i NY 1 2 1 7 0 t W а t е r Phone 5 8 6 6 4 6 2 5 O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition Town of Ballston 7. Evaluating Progress Toward Measurable Goals MCM 4 Use this page to report on your progress and project plans toward according to the state of t	SPDES ID 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 ac	
identified in your Stormwater Management Program Plan (SWMPP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
Building department performed site visits on a minimum of a mont compliance. Reports and necessary repairs were provided to each s	
B. Briefly summarize the observations that indicated the overal Goal.	ll effectiveness of this Measurable
Inspections have been performed on 100% of all active sites on a m	inimum of a monthly basis.
C. How many times was this observation measured or evaluated	(ex.: samples/participants
D. Has your MS4 made progress toward this measurable goal d	• Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedu	t the goals of this MCM during
Continue to visit each construction site regularly. Continue to main	ntain list of active construction

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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	SPDES ID
Name of MS4/Coalition Town of Charlton	N Y R 2 0 A 0 3 2

7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

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.

Two projects were approved in Town during report period 1-acre disturbance (Basic SWPPP's). 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 as required. As required private inspectors retained by developers conduct weekly reports and copy Town Engineer.

construction projects as required. As required private inspectors retained by developers conduct weekly reports and copy Town Engineer.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal during this reporting period?
● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
● Yes ○ 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, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition TOWN OF CLIFTON PARK	N Y R 2 0 A 0 3 5
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward achievidentified in your Stormwater Management Program Plan (SWMPP), in III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMI	PP in this reporting period.
Review and comment on 100% of all SWPPPs.	
B. Briefly summarize the observations that indicated the overall effoal.	fectiveness of this Measurable
100% of all submitted plans were reviewed. 100% of all submitted plans and Town requirements prior to approval.	ns were compliant NYSDEC
C. How many times was this observation measured or evaluated in	this reporting period?
	(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal during	ng this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SV	
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule)	_
Continue review of all SWPPPs by the Planning Department Stormwat an outside engineering firm to ensure compliance.	ter Management Officer, and

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

		SPDE	ES ID				
Name of MS4/Coalition Town of Greenfield		N S	Z R	2	0 A	1	2 3
7. Evaluating Progress Toward Measurable Goals MCM 4	ı						
Use this page to report on your progress and project plans towar identified in your Stormwater Management Program Plan (SWN III.C.1. Submit additional pages as needed.		_			_		art
A. Briefly summarize the Measurable Goal identified in the	e SWMP	PP in th	is re	port	ing p	erio	d.
The Town continues to review all development projects and en Stormwater Design Manual for water quality compliance. The building permits and addresses the need for temporary and perr During the reporting period the Town issued 158 building perm more).	Town remanent e	eviews a erosion or ith 1 act	ll ap	plica ol m sturt	ations neasu pance	for res. or	
		C 4	ess o	of th	is M	easu	
B. Briefly summarize the observations that indicated the ov Goal.	verall ef	iectiven					rabi
	ion Site F on to revie	Runoff a ew and	nd P track	ost (Cons	ruct	ion
Town personnel understand the requirements of the Construction Runoff Control and follow a standard program within the Town construction projects for the initial planning and application to regularly inspects active sites and maintains records of inspections.	ion Site F on to revi- o the final cions and	Runoff a ew and l constru violatio	nd P track action ns.	ost (all n. T	Consinew The To	own	ion
Goal. Town personnel understand the requirements of the Construction Runoff Control and follow a standard program within the Town construction projects for the initial planning and application to	ion Site F on to revi- o the final cions and	Runoff a ew and l constru violatio	nd P track action ns.	ost (all n. T	Consinew The To	own	ion

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

● Yes ○ No

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

● Yes ○ 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.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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Name of MS4/Coalition Town of Halfmoon		N	Y	R	2	0	А	3	7	5

7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

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

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 r	eporting i	period?
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samp	les/	'part	tici	pant	s/events

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

Vec	\bigcirc No

(ex.:

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

Yes	\circ No)
1 62	\circ INC	J

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 SWPPs 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.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

SPDES ID N Y R 2 0 A 0 8 6
achieving measurable goals PP), including requirements in Part
WMPP in this reporting period.
er report year, will maintain an e of all inspection records and ng.
rall effectiveness of this Measurable
nem were inspected multiple times. Yorking towards this goal.
ted in this reporting period?
during this reporting period?
● Yes □ No he SWMPP? • Yes □ No
eet the goals of this MCM during edule).

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	City of Mechanicvlle		SPDES ID N Y R 2 0 A	5 5 1
Name of MS4/Coalition	Chy of Medianiovine			
7. Evaluating Pro	gress Toward Measurable Goals N	ACM 4		
identified in your St	port on your progress and project plan tormwater Management Program Plan itional pages as needed.		-	
A. Briefly summar	rize the Measurable Goal identifie	d in the SWMPP	in this reporting	period.
The measurable go	al tracked was the number of active	construction sites	disturbing over one	acre
B. Briefly summar Goal.	rize the observations that indicated	l the overall effec	ctiveness of this M	easurable
Two sites were acti	ive and inspected by a local engineer	ring firm.		
C. How many time	es was this observation measured o	or evaluated in th	his reporting perio	d?
			(222 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	2
D. Has your MS4	made progress toward this measur	rable goal during		s/participants/events) riod?
7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7			• Y	es ○ No
E. Is your MS4 on	schedule to meet the deadline set	forth in the SWN	MPP? ● Y	es O No
•	rize the stormwater activities planting cycle (including an implementa	O		
SWPPPs will conti	nue to be reviewed, and projects insp	pected and tracked	d.	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

Name of MS4/Coalition	TOWN OF MILTON		N Y R 2 0 A 1 0 8	
7. Evaluating Pro	ogress Toward Measurable Goa	ls MCM 4		
identified in your St	port on your progress and project tormwater Management Program itional pages as needed.	•		
A. Briefly summar	rize the Measurable Goal ident	ified in the SWMPP	in this reporting period.	
Review and commo	ent on all plans subject to the Ge	neral Permit that requ	uire a SWPPP.	
B. Briefly summan	rize the observations that indic	ated the overall effe	ctiveness of this Measurable	
1 3	o the General Permit and requirin Manual, General Permit and Tow	C	equirements of the	
C. How many time	es was this observation measur	ed or evaluated in tl	nis reporting period?	
D. Has your MS4	made progress toward this mea	asurable goal during	(ex.: samples/participants/eg this reporting period?	events,
v	1 8		• Yes O No	
E. Is your MS4 on	schedule to meet the deadline	set forth in the SWN		
·	rize the stormwater activities p ing cycle (including an implem			
Continued review of	of all project SWPPP by Town st	aff and consultants hi	ired by the Town	

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

If submitting this form as part of a joint report on behalf of a c	
	SPDES ID
Name of MS4/Coalition TOWN OF MOREAU	N Y R 2 0 A 1 5 8
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
Continue coordinated review of construction plans and modify proconformance with the local law and any/all applicable NYS Technology.	•
B. Briefly summarize the observations that indicated the overa	all effectiveness of this Measurable
Construction Plan reviews were performed by a Third-Party Contr SWPPP Review Form is being used to document these reviews. La SWPPPs for applicant projects; completed SWPPP Review Forms at the Building Department Offices. This Measurable Goal has been	aBerge Group reviewed two (2) s are included in each project's file
C. How many times was this observation measured or evaluate	ed in this reporting period?
	(ex.: samples/participants/ev
D. Has your MS4 made progress toward this measurable goal	2 2
E. La constant MCA and a balled a constant of the deadless and fought to the	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	• Yes O No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheen	et the goals of this MCM during
The Town of Moreau SWPPP Review SOP will continue to be im	plemented as described above.
	•

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,	2	0	2	3

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			SPDES ID
Name of MS4/Coalition	Village of Round Lake	4	N Y R 2 0 A 0 9 9
7. Evaluating Pro	gress Toward Measurable Go	als MCM 4	
identified in your St	oort on your progress and project tormwater Management Program itional pages as needed.		
A. Briefly summar	rize the Measurable Goal iden	tified in the SWMPP	in this reporting period.
project/s that will d submitted; conduct	bmittal as part of overall project isturb one acre or more; conduct (minimum) 3 inspections of any and-breaking; 2) interim; 3) final ed.	et technical & substant y/all active sites within	tive review of all SWPPPs n Village jurisdiction
B. Briefly summar Goal.	rize the observations that indic	cated the overall effec	ctiveness of this Measurable
period. Victorian Landings project is complete.	within Village jurisdiction was i was granted Notice of Termina l an active/on-going project.		
C. How many time	s was this observation measur	ed or evaluated in th	nis reporting period?
	•		2 6
D. Has your MS4 n	made progress toward this mea	asurable goal during	(ex.: samples/participants/eve this reporting period? • Yes • No
E. Is your MS4 on	schedule to meet the deadline	set forth in the SWM	√PP? • Yes ○ No
F. Briefly summari the next reportin	ize the stormwater activities p	lanned to meet the go	
Continue to impleme GP-0-15-003; Part V	ent above cited protocols, meeti/II.A.4).	ng requirements as ou	itline in SPDES

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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lame of MS4/Coalition	Saratoga County, Department of Public Works		NY	R	2 0	A 2	0	9
Evaluating Pro	ogress Toward Measurable Goals MCM 4							
. Evaluating 110	GIOSE IOWALA MAGAZIANIE GOMES MAGAZIA							
	port on your progress and project plans toward							
dentified in your S	tormwater Management Program Plan (SWM	IPP), includ	ling r	equi	reme	nts in	Par	t
II.C.1. Submit add	litional pages as needed.							
A. Briefly summa	rize the Measurable Goal identified in the	SWMPP ir	1 this	rep	ortin	ig per	iod.	•
To ensure that all (County of Saratoga County capital construction	on projects	whic	h rec	nuire	it, cor	nply	,
	C SPDES GP-0-10-001 (or as amended or rev				L	,	1 2	
,		,						
3. Briefly summa	rize the observations that indicated the over	erall effecti	ivene	ss of	f this	Meas	sure	ıble
Goal.								
No active projects	/qualifying construction projects this reporting	g-year.						İ
Thow many time	nes was this observation measured or evalu	ated in this	s rene	ortir	ig ne	riod?	,	
of 110 w many this					-9 F -		\neg	1
								ipants/e
). Has your MS4	made progress toward this measurable go	al during t	his r	epor	_	_		
					(Yes		No No
E. Is your MS4 o	n schedule to meet the deadline set forth in	the SWM	PP?					
v					(Yes	0	No
F. Briefly summa	arize the stormwater activities planned to n	neet the go	als of	f this	s MC	M dı	ırin	g
·	ting cycle (including an implementation sc	_						0
							—	
Continue self-insp	pection and compliance commitments for all S	Saratoga Co	unty	capi	tal pı	ojects	3	
	0-001 coverage and/or Local MS4 construction							ļ
. – –								

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	_	SPL)ES	ID						
Name of MS4/Coalition City of Saratoga Springs		N	Y	R	2	0	А	2	1	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.

- Ensure construction sites are regularly inspected by owner as well as periodically by the MS4.
- Require SWPPP's for construction activity and review them for compliance with state & local regs.
- Enforce local law for land disturbance requiring erosion/sediment control & pollution prevention.
- Verify contractors have received NYSDEC endorsed Erosion & Sediment Control Training.
- Require project owner, site contractor, & design engineer to attend City Preconstruction meeting.

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

- (23) site inspections by City staff in addition to review of project owner's inspection reports.
- (5) SWPPP's for land disturbance were received by the City Engineer for review and approval.
- Unified Dev. Ordinance codifies requirements for erosion/sediment control & pollution prevention.
- E&SC training certificate required part of SWPPP document. Email training notices to contractors.
- (1) Preconstruction meeting held for projects disturbing 1-acre or more and requiring a SWPPP.

	TT	4	41	- 1 42		1141 :.	- 41-1-	
C.	How many	times was	tnis	observation	measured or	evaluated ii	n tnis	reporting period?

			2	3	
samp	les/	part	ici	pant	s/events

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

(ex.:

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

T 7	\sim 1 T	
Yes		
1 03	\bigcirc 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 monitor and inspect construction sites for SWPPP compliance.
- City Engineer will continue to review SWPPP's for construction & other land disturbance activities.
- 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 Preconstruction 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, 2	0	2	3
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Name of MS4/Coalition South Glens Falls SPDES ID N Y R 2 0 A 0 9 1
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?
(ex.: samples/participants/event.
D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue ongoing implementation of measures detailed in the SGF SWMP Plan for SWPPP requirements, site inspections, and enforcement of the local SW Construction law.

This report is being submit	d for the reporting period	ending March 9,	2	0	2	3
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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 N Y R 2 0 A 5 4 9
7. Evaluating Pro	gress Toward Measurable Goals MCM 4	
identified in your St	ort on your progress and project plans toward formwater Management Program Plan (SWM tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the	SWMPP in this reporting period.
	rater approved 4 sites of one or more acres. Talace. Construction inspections were perform	
B. Briefly summar Goal.	rize the observations that indicated the ove	erall effectiveness of this Measurable
more acres. Where	the outlined review process for the review of an issue was discovered upon inspection, Stongation measures were identified and implem	op Work Orders were issued until
C. H.		4.1.4.1.10
C. How many time	es was this observation measured or evalua	1 1
D. Has your MS4 i	nade progress toward this measurable goa	(ex.: samples/participants/event. Al during this reporting period?
v		● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in	the SWMPP? ● Yes ○ No
•	ize the stormwater activities planned to m ng cycle (including an implementation sch	e e

The Town of Stillwater will continue the review of SWPPPs involved in new development proposals where appropriate.

The Town will continue the to inspect all construction sites with approved SWPPPs.

The Town will continue participation in the Saratoga County ISWM program and the collection of digital GIS data.

MS4	Annual	Report	Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3	This report is being submitted for the reporting period ending March 9, 2 0 2 3							
		This report is being submi	tted for the reporting	period ending March 9	, 2	0	2	3

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

	-G	SPDES ID
Name of MS4/Coalition	Village of Stillwater	N Y R 2 0 A 5 4 7
7. Evaluating Pro	gress Toward Measurable Goals MCM 4	
identified in your St	ort on your progress and project plans toward a tormwater Management Program Plan (SWMP itional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the S	WMPP in this reporting period.
Village maintains a	water did not review any SWPPPs during this procedure for review of all SWPPPs and Eros w as part of a development proposal.	1 01
B. Briefly summar Goal.	rize the observations that indicated the over	all effectiveness of this Measurable
	ved as part of a Site Plan on track for approval. adertaken by the Town of Stillwater through an	
C. How many time	es was this observation measured or evaluat	red in this reporting period?
		(ex.: samples/participants/even
D. Has your MS4 i	made progress toward this measurable goal	during this reporting period? ● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in th	
v		● Yes ○ No
F. Briefly summar	rize the stormwater activities planned to me	et the goals of this MCM during

The Village of Stillwater will continue the review of SWPPPs involved in new development proposals.

The Village will inspect all construction sites with approved SWPPPs.

the next reporting cycle (including an implementation schedule).

The Village will continue participation in the Saratoga County ISWM program and the collection of digital GIS data.

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition	Town of Waterford	N Y R 2 0 A 0 3 7	
7. Evaluating Prog	gress Toward Measurable Goals MCM	4	
identified in your St	ort on your progress and project plans towatormwater Management Program Plan (SW itional pages as needed.		
A. Briefly summar	rize the Measurable Goal identified in th	ne SWMPP in this reporting period.	_
to ensure compliance	es to review SWPPPS for 100% of all projece with the Town of Waterford local storm ords any notices of violation and/or stop wees.	nwater law and NYSDEC regulations.	
B. Briefly summar Goal.	rize the observations that indicated the o	overall effectiveness of this Measurable	e
No projects requirir	ng a permit were reported active.		
C. How many time	es was this observation measured or eval	1	
D. Has vour MS4 i	made progress toward this measurable g	(ex.: samples/participan goal during this reporting period?	nts/events
J = 1.000 J = 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1.000 1		• Yes O No	o
E. Is your MS4 on	schedule to meet the deadline set forth	in the SWMPP? ● Yes ○ No	2
•	rize the stormwater activities planned to ing cycle (including an implementation s	meet the goals of this MCM during	J
	tinue to review all SWPPPS, inspect active sion and sediment control practices on con		

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

SPDES ID N Y R 2 0 A 1 1 4 Chieving measurable goals										
chieving measurable goals										
Evaluating Progress Toward Measurable Goals MCM 4 se this page to report on your progress and project plans toward achieving measurable goals										
), including requirements in Part										
MPP in this reporting period.										
s. Hold pre-construction meetings										
I effectiveness of this Measurable and revisions, the plans were ves to advise of protocols.										
d in this reporting period?										
(ex.: samples/participants/uring this reporting period?										
● Yes ○ No										
e SWMPP? ● Yes ○ No										
the goals of this MCM during ule).										
d to the Town, with continued										

N Y R 2 0 A 1 5 7

MS4 Annual Report Form

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

Name of MS4/Coalition	Town of Ballston	N Y R	2 0 A 1 5 7		
Minimum	Control Mea	sure 5. Post	-Constructio	n Stormwater N	<u> Ianagement</u>
The information in the	nis section is beir	ng reported (che	ck one):		
On behalf of an incOn behalf of a coaHow m		ributed to this	report?		
1. How many and MS4/Coalition i	• • •			nagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
○ Alternative Practic	ees				
○ Filter Systems					
○ Infiltration Basins					
Open Channels					
Ponds		4 0	1 6 0	1 6 0	
○ Wetlands					
Other					
 Do you use an BMPs, inspection What types of Development/E 	ions and maint non-structural	canance? practices have	e been used to	implement Low In	• Yes O No
Building Codes	Municipal C	Comprehensive F	Plans	•	
Overlay Districts	Open Space	Preservation Pr	ogram		
Zoning	• Local Law o	or Ordinance			
○ None	● Land Use R	egulation/Zoning	g		
O Watershed Plans	Other Comp	rehensive Plan			
Other:					

Other:

MS4 Annual Report Form

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

II Submitti	ng unis form as p	oart of a joint rep	ort on benail of	a coantion leav	e SPL	E3	ם עו	nank.					
					DES ID								
Name of MS4/Coalition	Town of Chai	rlton		N	YR	2	0 .	A 0	3	2			
Minimum	Control Mea	asure 5. Post	-Constructio	on Stormwa	iter I	<u>Ma</u>	nag	<u>em</u>	<u>ent</u>				
The information in the	nis section is bei	ng reported (che	ck one):										
On behalf of an inOn behalf of a coaHow n		tributed to this	report? 1										
1. How many and MS4/Coalition i						ha	s you	ur					
		# Inventoried	# Inspections	# Times Maintained									
 Alternative Practice 	ces		0	0									
• Filter Systems		1	1	0									
• Infiltration Basins		2	0	0									
Open Channels		6 5	6 5	0									
Ponds		2	2	0									
O Wetlands													
Other													
2. Do you use an BMPs, inspect		, •	abase, spreads	heet) to track	x post	-co		uctio Yes		No			
3. What types of Development/I		-		-	ow I1	npa	act						
O Building Codes	Municipal (Comprehensive P	Plans										
Overlay Districts	Open Space	Preservation Pr	ogram										
Zoning	O Local Law	or Ordinance											
○ None	• Land Use R	Regulation/Zoning	g										
O Watershed Plans	Other Com	orehensive Plan											

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 & 3 \end{bmatrix}$

If submitti	ng this form as p	part of a joint rep	ort on behalf of	a coalition leave SPD	ES ID blank.
	TOWN OF CLUETC	MI DA DIZ		SPDES ID	2 0 A 0 3 5
Name of MS4/Coalition	1 TOWN OF CLIFTC	ON PARK		N Y R	2 0 A 0 3 5
Minimum	Control Mea	asure 5. Post	-Constructio	on Stormwater M	<u> Ianagement</u>
The information in the	nis section is bei	ng reported (chec	ck one):		
On behalf of an income On behalf of a coal How m	lition	tributed to this	report?	1	
	• • •			inagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
Alternative Practice	ces	9	0		
• Filter Systems		6	5		
• Infiltration Basins		5 2	2		
Open Channels		6	2	1	
Ponds		8 7	3	2	
O Wetlands					
Other					
2. Do you use an BMPs, inspect		` •	abase, spreads	heet) to track post-	construction ● Yes ○ No
3. What types of Development/H				implement Low In nciples?	ıpact
Building Codes	Municipal (Comprehensive P	lans		
Overlay Districts	Open Space	Preservation Pro	ogram		
Zoning	O Local Law	or Ordinance			
○ None	• Land Use R	Regulation/Zoning			
O Watershed Plans	Other Comp	prehensive Plan			
Other:					

This report is being submitted for the reporting period ending March 9, 2 0 2 3

II Suomitti	ing unis form as par	toru	Joi	1110 11	орог ч	011 (<i>-</i>	iuii v	or a c	Juli	1011	iou		1 1		D 01	allic.		
22.52.4/2	Name of MS4/Coalition Town of Greenfield									SPI	DES Y	ID R	2	0 A	1	2	3		
Name of MS4/Coalition	1 Town of Green													10		0 1			
Minimum	Control Meas	ure	5.	Pos	st-C	ons	str	uc	<u>tion</u>	Sta	rn	1W	atei	r N	<u> Iar</u>	age	eme	<u>nt</u>	
The information in the	nis section is being	repo	rte	d (cł	neck o	ne)	:												
On behalf of an incOn behalf of a coaHow m		bute	d to	o thi	s reno	ort?	, [1											
	•				•		-	_					,•						
1. How many and MS4/Coalition i	what type of post nventoried, inspe									_		•		ces	has	you	r		
		Inven	# itor	ied	Iı	# Inspections			-		Tim ntai	es ned							
O Alternative Practic	ces																		
O Filter Systems																			
O Infiltration Basins																			
Open Channels			1	3			1	3			1	3							
Ponds				2				2				2							
O Wetlands																			
Other				7				7				7							
2. Do you use an BMPs, inspecti	electronic tool (dions and mainta	_		5, da	ıtaba	se,	sp	rea	dshee	et) t	to t	racl	k po	ost-	con	stru O Y			No
3. What types of Development/E	non-structural p Better Site Desig									-		nt I	Low	In	npa	ct			
Building Codes	Municipal Co	mprel	hen	sive	Plans	S													
Overlay Districts	Open Space P	reser	vati	on F	Progra	ım													
Zoning	O Local Law or	Ordi	nan	ce															
○ None	• Land Use Reg	gulati	on/	Zoni	ing														
O Watershed Plans	Other Compre	hensi	ive	Plar	1														
○ Other:																			

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Name of MS4/Coalition	N	Y R	2 0	A 3	7 5			
Minimum	Control Mea	sure 5. Post	-Constructio	on Stormwa	ater I	Mana	agem	<u>ent</u>
The information in the	nis section is bein	g reported (che	ck one):					
On behalf of an incOn behalf of a coaHow m		ributed to this	report?					
1. How many and	•	st-construction	stormwater ma	_		has y	our	
W154/Coantion 1	nventorieu, msp	#	#	# Times	Jui			
		Inventoried	Inspections	Maintained				
O Alternative Practic	ces							
O Filter Systems								
O Infiltration Basins								
Open Channels								
○ Ponds								
○ Wetlands								
Other								
2. Do you use an BMPs, inspecti	electronic tool (` ' '	abase, spreads	heet) to tracl	k post		tructio	on ● No
3. What types of a Development/E	non-structural Better Site Desig	•		-	Low I	npac	t	
Building Codes	• Municipal C	omprehensive F	Plans					
Overlay Districts	Open Space	Preservation Pr	ogram					
Zoning	• Local Law or	r Ordinance						
○ None	Land Use Re	egulation/Zoning	g					
O Watershed Plans	Other Comp	rehensive Plan						
Other:]

N Y R 2 0 A 0 8 6

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition	ame of MS4/Coalition Town of Malta							2 () A	0	8 6
Minimum	Control Mea	sure 5. Po	st-Const	<u>ructio</u>	n Stori	nwat	er N	<u> Ian</u>	agei	nei	<u>1t</u>
The information in the	nis section is bein	g reported (c	heck one):								
On behalf of an inc On behalf of a coa	dividual MS4										
	nany MS4s contr	ributed to th	is report?								
1. How many and	what type of pos	st-constructio	on stormwa	iter ma	nagemen	t pract	tices	has v	vour		
MS4/Coalition in	• • •				_	•		•	,		
		# Inventoried	# Inspec	tions	# Tin Mainta						
O Alternative Practic	rec		Пізрес								
• Filter Systems	<i>,</i> es			4		1					
Infiltration Basins				0		2					
Open Channels											
•				\perp							
• Ponds						1					
○ Wetlands											
• Other				7							
2. Do you use an BMPs, inspecti			atabase, s _l	oreads	heet) to t	rack p	ost-	_	struc ●Ye		No
3. What types of a Development/E		-			-	ent Lo	w In	прас	et		
Building Codes	• Municipal C	omprehensive	e Plans								
Overlay Districts	Open Space	Preservation	Program								
Zoning	• Local Law o	r Ordinance									
○ None	• Land Use Re	egulation/Zon	ning								
O Watershed Plans	Other Comp	rehensive Pla	n								
Other:											

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition	City of Mecha	nicville									N Y	R	2	0 A	5	5 1
ivalle of 1915+/ Coalition	1									L						
Minimum	Control 1	Meas	ure 5.	. Post	t-Coı	ıstr	uct	ion	Sto	rm	wat	er N	A an	age	me	nt
																_
The information in the	nis section is	s being	reporte	ed (che	eck one	e):										
On behalf of an incOn behalf of a coa		4														
How m	nany MS4s	contri	buted t	to this	repor	t?										
1. How many and MS4/Coalition i	• •	-							_		_		has	your		
			#	لمائد	T	#				Гіте						
○ Alternative Practic			Invento	riea	Ins	pecti	ons		Mai	ntain	iea 					
	es															
O Filter Systems										_						
O Infiltration Basins																
Open Channels																
Ponds				3			0				0					
○ Wetlands																
Other																
2. Do you use an	electronic	tool (e	e.g. GI	S, dat	abase	, spi	read	lshe	et) t	o tra	ack p	ost-	-cons	struc	ctio	n
BMPs, inspecti	ions and m	ainta	nance	?										\circ Y	es	No
3. What types of Development/E		-							-		t Lo	w Ir	npac	et		
O Building Codes	O Municip	pal Co	mprehe	nsive I	Plans											
Overlay Districts	Open S	pace P	reserva	tion Pr	ogram	l										
○ Zoning	O Local L	aw or	Ordina	nce												
None	O Land U	se Reg	gulation	/Zonin	g											
O Watershed Plans	Other C	Compre	hensive	Plan												
Other:																

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

				SPDES ID	
Name of MS4/Coalition	TOWN OF MILTON	ſ			0 A 1 0 8
<u>Minimum</u>	Control Mea	sure 5. Post	-Constructio	on Stormwater Mai	<u> 1agement</u>
The information in the	nis section is beir	ng reported (chec	ek one):		
On behalf of an ineOn behalf of a coaHow m		ributed to this 1	report?	1	
•	• • •			nnagement practices has eporting period?	your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces				
O Filter Systems					
O Infiltration Basins		1 6	1 6		
Open Channels					
○ Ponds		7	7		
O Wetlands					
Other		2	2		
2. Do you use an BMPs, inspecti		` U	ıbase, spreads	heet) to track post-con	estruction ● Yes ○ No
3. What types of Development/E		-		implement Low Impa nciples?	ct
Building Codes	O Municipal C	omprehensive P	lans		
Overlay Districts	Open Space	Preservation Pro	ogram		
Zoning	O Local Law o	r Ordinance			
○ None	■ Land Use R	egulation/Zoning	5		
Watershed Plans	Other Comp	rehensive Plan			
○ Other:					

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition	TOWN OF MO	OREAU			N Y	R 2	0 A	1	5 8
Minimum (Control Meas	sure 5. Post	-Constructio	n Storm	<u>wate</u>	r Ma	<u>ınage</u>	<u>me</u> i	<u>nt</u>
	lividual MS4 lition any MS4s contr	ibuted to this 1	report?		,•				
1. How many and w MS4/Coalition in	• • •			0	-	ces ha	s your		
		# Inventoried	# Inspections	# Time Maintair					
O Alternative Practice O Filter Systems	es								
• Infiltration Basins		0	4	4					
Open ChannelsPonds									
 Fonds Wetlands									
Other									
2. Do you use an o BMPs, inspecti	,		abase, spreadsl	neet) to tr	ack po	ost-co	nstruc O Ye		n ● No
3. What types of a Development/B		-		-	ıt Low	Imp	act		
O Building Codes	O Municipal Co	omprehensive P	lans						
Overlay Districts	Open Space I	Preservation Pro	ogram						
○ Zoning	• Local Law or	Ordinance							
○ None	O Land Use Re	gulation/Zoning	5						
O Watershed Plans	Other Compr	ehensive Plan							
Other:									

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MS4 Annual Report Form

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

Name of MS4/Coalition Village of Round		ke		N Y R	2 0 A 0 9 9
Minimum	Control Mea	sure 5. Post	-Construction	on Stormwater	Management
The information in t	his section is bein	ng reported (che	ck one):		
On behalf of an inOn behalf of a coaHow n		ributed to this	report?	1	
1. How many and MS4/Coalition				nagement practice eporting period?	s has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces				
O Filter Systems					
 Infiltration Basins 		3	1 5	6	
Open Channels					
Ponds		2	2 6	1	
○ Wetlands					
Other					
2. Do you use an BMPs, inspect	electronic tool ions and maint	10 NACO 2011	abase, spreadsl	heet) to track post	t-construction • Yes O No
3. What types of Development/I					mpact
Building Codes	Municipal C	omprehensive P	lans		
Overlay Districts	Open Space	Preservation Pro	ogram		
○ Zoning	• Local Law o	r Ordinance			
○ None	Land Use R	egulation/Zoning	<u> </u>		
O Watershed Plans	Other Comp	rehensive Plan			
Other:					

E|d|u|c|a

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

Name of MS4/Coalition	Saratoga County, Dep	partment of Public Wo	orks	N Y R	2 0 A 2 0 9	}
Minimum (Control Mea	sure 5. Post	-Constructio	on Stormwater	<u>Management</u>	
The information in th	is section is bein	g reported (che	ck one):			
On behalf of an incOn behalf of a coalHow m		ributed to this	report?			
1. How many and w MS4/Coalition in				nagement practice eporting period?	s has your	
		# Inventoried	# Inspections	# Times Maintained		
O Alternative Practic	es					
O Filter Systems						
• Infiltration Basins		0	0	0		
Open Channels						
Ponds		0	0	0		
O Wetlands						
Other						
2. Do you use an BMPs, inspecti		` •	abase, spreads	heet) to track pos	t-construction • Yes • N	lo
3. What types of Development/H				-	I mpact	
O Building Codes	O Municipal C	Comprehensive I	Plans			
Overlay Districts	Open Space	Preservation Pr	ogram			
O Zoning	O Local Law o	or Ordinance				
○ None	○ Land Use R	Legulation/Zonin	g			
O Watershed Plans	Other Comp	orehensive Plan				
• Other						

Pro

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r a

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

						$\overline{}$
Name of MS4/Coalition	City of Saratoga Spri	ngs		N Y	R 2 0 A 2 1	6
3.6	C 1 IM	5 D		C.	3.6	
<u>Minimum</u>	Control Mea	isure 5. Po	ost-Construction	<u>on Stormwate</u>	r Management	
The information in th	is section is bein	a a mamantad (a	shools and).			
The information in the		ig reported (c	eneck one):			
On behalf of an incOn behalf of a coal						
How m	nany MS4s cont	ributed to th	nis report?			
1. How many and w MS4/Coalition in	* * *		on stormwater maintained in this i		•	
		# Inventoried	# Inspections	# Times Maintained		
○ Alternative Practic	noc.	5	Inspections	Maintained		
 Filter Systems	CS					
·						
O Infiltration Basins		6				
Open Channels		2				
○ Ponds		3				
○ Wetlands						
Other						
2. Do you use an o	electronic tool	(e.g. GIS, d	atabase, spreads	sheet) to track p	ost-construction	
BMPs, inspecti	ons and maint	anance?		, <u>-</u>	○ Yes •	No
3. What types of a Development/B		-	ave been used to nfrastructure pr	•	v Impact	
O Building Codes	Municipal C	Comprehensiv	e Plans			
Overlay Districts	Open Space	Preservation	Program			
○ Zoning	O Local Law o	or Ordinance				
○ None	• Land Use R	egulation/Zoi	ning			
O Watershed Plans	Other Comp	rehensive Pla	ın			
Other:						

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MS4 Annual Report Form

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

	p			SPI	DES ID		
Name of MS4/Coalition	South Glens Falls			N	Y R 2	0 A 0 9	1
Minimum	Control Mea	sure 5. Post	-Construction	on Stormwa	ater Ma	<u>nagement</u>	
The information in th	nis section is being	g reported (che	ck one):				
On behalf of an incOn behalf of a coaHow m		ibuted to this:	report?				
1. How many and MS4/Coalition in	what type of pos nventoried, inspe					your	
		# Inventoried	# Inspections	# Times Maintained			
O Alternative Practic	es			0			
O Filter Systems							
Infiltration Basins		5	2	4			
Open Channels							
○ Ponds							
O Wetlands							
Other							
2. Do you use an o	electronic tool (ons and mainta		ıbase, spreadsl	neet) to track	k post-con	struction Yes O	No
3. What types of r Development/B	non-structural p setter Site Desig				ow Impa	ct	
Building Codes	Municipal Co	mprehensive P	lans				
Overlay Districts	Open Space P	reservation Pro	ogram .				
Zoning	Local Law or	Ordinance	*				
O None	Land Use Reg	gulation/Zoning	5				
O Watershed Plans	Other Compre	chensive Plan					
Other:							

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalitio	n Town	f Still	wate	r										N	Y	R	2	0	A	5 4	1 9
Minimum	Cont	trol	IV.	<u> [eas</u>	ur	e 5. I	os	t-C	ons	truc	etio	ı St	orı	nw	ate	er I	<u>Ma</u>	nag	gen	ıen	<u>t</u>
The information in the	his sect	tion	is 1	being	rep	orted	(che	eck (one):												
On behalf of an inOn behalf of a coaHow n	alition			ontri	but	ed to	this	rep	ort?		×										
1. How many and MS4/Coalition i																	has	s yo	ur		
]	lnve	# entorie	d	I	# nspec		S		Tin inta		i						
O Alternative Practic	ces																				
O Filter Systems							Ī										2				
O Infiltration Basins					Γ		1					Ī									
Open Channels													İ								
Ponds						5				5				1							
Wetlands						1		ĺ		1	ĺ			1							
Other																					
2. Do you use an BMPs, inspects				22	-		dat	aba	se, s	prea	dsh	eet)	to t	rac	k p	ost	- c 01		ucti Yes) No
3. What types of Development/I				-								-		ent l	Lov	v Iı	npa	et			
O Building Codes	\circ M	unic	ipa	l Cor	npr	ehensi	ve I	Plans	5												
Overlay Districts	\circ Or	pen S	Spa	ce Pı	ese	rvatio	n Pr	ogra	ım												
Zoning	• Lo	ocal [Lav	v or	Ord	inance	;														
O None	O La	and I	Use	Reg	ulai	tion/Zo	onin	ıg													
O Watershed Plans	O Ot	her	Co	mpre	hens	sive P	lan														
Other:			,																	-	

SPDES ID

MS4 Annual Report Form

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

Name of MS4/Coalition	Village of Stillwater			N Y	R 2 0 A 5	4 7
Minimum	Control Mea	sure 5. Post	-Construction	n Stormwate	r Manageme	<u>nt</u>
The information in the	nis section is beir	ng reported (che	ck one):			
On behalf of an inc		·8 1 · P · · · · · · · · · · · · · · · · ·				
On behalf of a coa	lition					
How m	nany MS4s cont	ributed to this	report?			
1. How many and MS4/Coalition i				-	ces has your	
		#	#	# Times		
		Inventoried	Inspections	Maintained		
O Alternative Practic	ees					
○ Filter Systems						
O Infiltration Basins						
Open Channels						
○ Ponds						
○ Wetlands						
Other						
2. Do you use an observation BMPs, inspection			abase, spreadsl	neet) to track po		ı O No
3. What types of Development/E		-		-	Impact	
O Building Codes	O Municipal C	omprehensive P	lans			
Overlay Districts	Open Space	Preservation Pre	ogram			
Zoning	• Local Law o	r Ordinance				
○ None	O Land Use Re	egulation/Zonin	<u>s</u>			
O Watershed Plans	Other Compa	rehensive Plan				
Other:						

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

				SPDES 1	ID	
Name of MS4/Coalition	Town of Waterford			N Y	R 2 0 A 0	3 7
<u>Minimum</u>	Control Mea	sure 5. Post	-Constructio	on Stormwater	· Managem	<u>ent</u>
The information in th		g reported (che	ck one):			
On behalf of an ind On behalf of a coa How m		ributed to this:	report?			
1. How many and was MS4/Coalition in				nagement practic eporting period?	es has your	
		# Inventoried	# Inspections	# Times Maintained		
Alternative Practic	ees					
○ Filter Systems						
O Infiltration Basins						
Open Channels						
Ponds		2	2	2		
○ Wetlands						
Other						
2. Do you use an o BMPs, inspecti		` U	abase, spreads	heet) to track po	st-constructi ● Yes	
3. What types of a Development/B					Impact	
O Building Codes	• Municipal C	omprehensive P	Plans			
Overlay Districts	Open Space	Preservation Pre	ogram			
○ Zoning	O Local Law or	r Ordinance				
○ None	O Land Use Re	egulation/Zoning	g			
O Watershed Plans	Other Compi	rehensive Plan				
Other:						

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

				SPDES	SID
Name of MS4/Coalition	Town of Wilt	on		N Y	R 2 0 A 1 1 4
Minimum	Control Mea	asure 5. Post	t-Construction	on Stormwate	er Management
The information in the	nis section is bei	ng reported (che	eck one):		
On behalf of an inOn behalf of a coaHow n		tributed to this	report?		
	•				. ,
1. How many and MS4/Coalition i	* * *			inagement pract eporting period	•
		#	#	# Times	
		Inventoried	Inspections	Maintained	
O Alternative Practic	ces				
O Filter Systems					
O Infiltration Basins			9	2	
Open Channels			2		
○ Ponds					
○ Wetlands					
Other					
2. Do you use an BMPs, inspect		` ` `	abase, spreads	heet) to track p	• Yes O No
3. What types of			e heen used to	implement I or	
Development/I					v Impact
O Building Codes	Municipal (Comprehensive I	Plans		
Overlay Districts	Open Space	Preservation Pr	ogram		
○ Zoning	O Local Law	or Ordinance			
○ None	• Land Use R	Regulation/Zonin	g		
O Watershed Plans	Other Comp	orehensive Plan			
Other:					

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

					_	SPDI	ES ID					
Naı	me of MS4/Coalition	Town of Ballston				N	YR	2	0 A	1	5	7
	. Are the MS4s co	S	•	S			•		• Y	ffort Yes		No
4b	. Does the MS4 ha	ve a banking an	d credit system	for stormwate	r manage	men	t pra	ctice	s? ○ Y	⁷ es		No
	D CHIATE D											
4c	. Do the SWMP P and approval of		S4 contributing edit of alternativ						prac		?	No
		banking and cro nwater manager	edit of alternativ	ve siting of a sto	ormwater	mar	ıagen	nent	prac O Y	ctice es	?	

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

		SPDES ID		
Naı	me of MS4/Coalition Town of Charlton	N Y R 2	2 0 A 0	3 2
4a	a. Are the MS4s contributing to this report involved in a regional/waters	shed wide plan	oning effor	t? ● No
4b	o. Does the MS4 have a banking and credit system for stormwater mana	igement practi		
			\bigcirc Yes	No
4c	c. Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormwal			
4c	e i			?
	and approval of banking and credit of alternative siting of a stormward. How many stormwater management practices have been implemented.	ter manageme	nt practice ○ Yes	? • No
	and approval of banking and credit of alternative siting of a stormwar	ter manageme	nt practice ○ Yes	? • No
	and approval of banking and credit of alternative siting of a stormward. How many stormwater management practices have been implemented reporting period? What percent of municipal officials/MS4 staff responsible for program	ter manageme d as part of thi n implementat	nt practice O Yes s system in	? ● No a this
4d	and approval of banking and credit of alternative siting of a stormward. How many stormwater management practices have been implemented reporting period?	ter manageme d as part of thi n implementat	nt practice O Yes s system in	? ● No a this

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

		SPI	DES IL)					
Nar	me of MS4/Coalition TOWN OF CLIFTON PARK	N	YR	. 2	0	А	0	3	5
4a	. Are the MS4s contributing to this report involved in a regional/wate	ershed w	vide p	lanı		effo Yes		•	No
4b	. Does the MS4 have a banking and credit system for stormwater ma	nageme	nt pra	ctic	es?				
					\circ	Yes	S	•]	No
4c.	. Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormw				t pr		ce?	•]	No
4d	. How many stormwater management practices have been implement reporting period?	ted as pa	art of	this	sys	tem	in 1	this	S
5.	What percent of municipal officials/MS4 staff responsible for progr training on Low Impace Development (LID), Better Site Design (BS Infrastructure principles in this reporting period?	-				atter	ıde		0.7
	init asti ucture principles in this reporting period:							$0 \mid$	%

This report is being submitted for the reporting period ending March 9, 2 0 2 3

		SPDE	S ID					
Naı	me of MS4/Coalition Town of Greenfield	N Y	R	2	0 2	A 1	2 3	
4a	a. Are the MS4s contributing to this report involved in a regional/watershe	ed wid	e pl	anni	_	e ffor Yes	t? ● No)
4b	o. Does the MS4 have a banking and credit system for stormwater manage	ment	pra	ctice	es?			
					0	Yes	No)
4	DALCHMAND DI COLLANDA AND AND AND AND AND AND AND AND AND							
4C	2. Do the SWMP Plans for each MS4 contributing to this report include a production of a strength of the streng	L.						
40	and approval of banking and credit of alternative siting of a stormwater	L.			pra	ectice)
	and approval of banking and credit of alternative siting of a stormwater l. How many stormwater management practices have been implemented a	mana	ıgen	nent	pra	rctice Yes	? ● No)
	and approval of banking and credit of alternative siting of a stormwater	mana	ıgen	nent	pra	rctice Yes	? ● No)
	and approval of banking and credit of alternative siting of a stormwater I. How many stormwater management practices have been implemented a reporting period?	mana s part mpler	of t	nent this	pra	Yes em in	•? • No • this)

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

	SPDES ID			
Nar	me of MS4/Coalition Town of Halfmoon N Y R 2	0 A	3 '	7 5
4a	. Are the MS4s contributing to this report involved in a regional/watershed wide planning	ng eff		• No
4b	. Does the MS4 have a banking and credit system for stormwater management practices	?		
	•	\circ Ye	es (• No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a protocol for evand approval of banking and credit of alternative siting of a stormwater management	pract	tice?	• No
	and approval of banking and credit of alternative siting of a stormwater management	pract O Ye	tice? es	
	and approval of banking and credit of alternative siting of a stormwater management	pract O Ye	tice? es	
4d	and approval of banking and credit of alternative siting of a stormwater management j	pract O Ye ysten	tice? es on in t	his

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

			SPDES ID		
Name of MS4/	Coalition Town of Malta		N Y R 2	0 A 0	8 6
4a. Are the	MS4s contributing to this report involved	l in a regional/waters	hed wide plan	ning effor ∐Yes	t? ● No
4b. Does the	MS4 have a banking and credit system to	for stormwater mana	gement practio	ces?	●No
	WMP Plans for each MS4 contributing to roval of banking and credit of alternative	_	•		
	ny stormwater management practices hag period?	ve been implemented	l as part of this	s system in	1 this
training	rcent of municipal officials/MS4 staff reson Low Impace Development (LID), Betucture principles in this reporting period	ter Site Design (BSD)			led %

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

			SPL	ES	ID					
Nan	ne of MS4/Coalition City of Mechanicville		N	Y	R	2	0 A	5	5	1
4a.	Are the MS4s contributing to this report involved in a regional/	watershe	d w	ide	pla	nni	0			NT.
4h	Does the MS4 have a banking and credit system for stormwater	managa	mar	ıt n	raci	tico		es		No
4 ₽.	Does the M54 have a banking and credit system for stormwater	manage	ilici	ու թ	aci	псс	э. О У	es		No
	Do the SWMP Plans for each MS4 contributing to this report in and approval of banking and credit of alternative siting of a store									
	and approvar or banking and credit of afternative siting of a sto-	i iiiw atei	ша	шағ	CIII	CIIt	-	es es		No
4d.	How many stormwater management practices have been impler	nented a	s pa	rt (f tł	nis s	syste	m ir	n thi	is
	reporting period?								0	
5.	What percent of municipal officials/MS4 staff responsible for pr	U	•					tend	ed	
	training on Low Impace Development (LID), Better Site Design Infrastructure principles in this reporting period?	(BSD) ai	1d (othe	r G	ree	en 		0	%

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

				SPDE	ES ID				
Nar	me of MS4/Coalition TOWN OF MILTON			N Z	7 R 2	0 7	1	0	8
4a.	a. Are the MS4s contributing to this	report involved in a regio	nal/watersh	ied wie	de plan	_	effor Yes		No
4b	o. Does the MS4 have a banking and	l credit system for stormw	ater manag	ement	practi	ces?			
						\circ	Yes		No
4c.	. Do the SWMP Plans for each MS and approval of banking and cred	9		-		nt pra		?	No
4d.	l. How many stormwater managem	ent practices have been in	plemented	as par	t of thi	s syste	em in	thi	S
	reporting period?							0	
5.	What percent of municipal official training on Low Impace Develop	-					tend	ed	
	Infrastructure principles in this r		sigii (D SD) i	anu ot	ner Gr		. 0	0	%

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

	SPDE	S ID			
Naı	me of MS4/Coalition TOWN OF MOREAU N Y	R 2 0	A 1	5	8
4a	a. Are the MS4s contributing to this report involved in a regional/watershed wid		effor Yes	t? ● N	No
4b	Does the MS4 have a banking and credit system for stormwater management	•			_
		O	Yes		VO.
4c.	e. Do the SWMP Plans for each MS4 contributing to this report include a protoc				
4c.	e. Do the SWMP Plans for each MS4 contributing to this report include a protoc and approval of banking and credit of alternative siting of a stormwater management.	agement pr		?	
	and approval of banking and credit of alternative siting of a stormwater mana	agement pr	actice Yes	? • N	No
	and approval of banking and credit of alternative siting of a stormwater mana	agement pr	actice Yes	? • N	No
	and approval of banking and credit of alternative siting of a stormwater mana d. How many stormwater management practices have been implemented as part reporting period?	agement praction agentation a	Yes tem in	? • N • this	No

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

		SPI	DES	ID						
Nar	ne of MS4/Coalition Village of Round Lake	N	Y	R	2	0	A	0	9	9
4a.	Are the MS4s contributing to this report involved in a regional/watershe	ed w	ide	pla	ann	_	effo Yes		?	No
4b.	Does the MS4 have a banking and credit system for stormwater manage	mei	nt p	rac	tice		Yes	2	•	ΝIο
4c.	Do the SWMP Plans for each MS4 contributing to this report include a pand approval of banking and credit of alternative siting of a stormwater					valı t pr	uati	on ce?		
4d.	How many stormwater management practices have been implemented a reporting period?	s pa	rt o	of t	his	syst	tem		this	\$
5.	What percent of municipal officials/MS4 staff responsible for program in training on Low Impace Development (LID), Better Site Design (BSD) and Infrastructure principles in this reporting period?						tten			%

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPI	DES ID)				
Name of MS4/Coalition Saratoga County, Department of Public Works	N	YR	2	0 A	2	0	9
4a. Are the MS4s contributing to this report involved in a regional/wa	itershed v	vide p	lann	ing ef			No
4b. Does the MS4 have a banking and credit system for stormwater m	anageme	nt pra	etie			_	
				O Y	es		No
4c. Do the SWMP Plans for each MS4 contributing to this report incl							
and approval of banking and credit of alternative siting of a storm	iwater ina	anagei	пеп	O Y			No
4d. How many stormwater management practices have been impleme reporting period?	nted as p	art of	this	syster	n in	thi	is
5. What percent of municipal officials/MS4 staff responsible for propertial training on Low Impace Development (LID), Better Site Design (Handrastructure principles in this reporting period?					endo	ed 0	%
				_	10	١٧١	70

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

		SPD	ES ID					
Nar	ne of MS4/Coalition City of Saratoga Springs	N	YR	2	0 A	2	1	6
4a.	Are the MS4s contributing to this report involved in a regional/watershe	ed wi	ide pl	anni	ng ef			No
4b.	. Does the MS4 have a banking and credit system for stormwater manage	men	t pra	ctice	s?			
- 70			P		\circ Y	es		No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a pand approval of banking and credit of alternative siting of a stormwater					tice	?	No
4d	. How many stormwater management practices have been implemented a	s pa	rt of	this s	syster	n in	thi	S
	reporting period?							
5.	What percent of municipal officials/MS4 staff responsible for program i training on Low Impace Development (LID), Better Site Design (BSD) a					ende	ed	
	Infrastructure principles in this reporting period?	iiu U	their '	GILL			0	%

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

SPDES ID Town of Stillwater N Y R Name of MS4/Coalition 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort? O Yes No 4b. Does the MS4 have a banking and credit system for stormwater management practices? O 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? 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? % 0 0

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

		SPI	DES	ID	St.					
Nan	ne of MS4/Coalition Village of Stillwater	N	Y	R	2	0	A	5	4	7
4a.	Are the MS4s contributing to this report involved in a regional/watershe	ed w	⁄ide	e pla	ınn	_	effo Yes		?	No
4b.	Does the MS4 have a banking and credit system for stormwater manage	mei	nt p	rac	tice	es?				
						0	Yes	S		No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a pand approval of banking and credit of alternative siting of a stormwater					pr		ice?	•]	No
4d.	How many stormwater management practices have been implemented a reporting period?	s pa	ırt (of t	his	syst	tem	in	this	8
	Topolting position.								0	
5.	What percent of municipal officials/MS4 staff responsible for program is training on Low Impace Development (LID), Better Site Design (BSD) as	-					tter	ıde	d	
	Infrastructure principles in this reporting period?							5	0	%

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

			SPL	DES ID					
Nan	ne of MS4/Coalition Town of Waterford		N	YR	2	0 A	0	3	7
4a.	Are the MS4s contributing to this report involved in a regional/	watershe	d w	ide p	ann	ing ef ○ Y			Νο
4b.	Does the MS4 have a banking and credit system for stormwater	· manage	mer	ıt pra	ctic				No
4c.	Do the SWMP Plans for each MS4 contributing to this report in and approval of banking and credit of alternative siting of a sto					valua	tion tice	?	
4d.	How many stormwater management practices have been imple reporting period?	mented a	s pa	rt of	this				
5.	What percent of municipal officials/MS4 staff responsible for p training on Low Impace Development (LID), Better Site Design Infrastructure principles in this reporting period?	_	_				end	ed	%

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID				
Nar	me of MS4/Coalition Town of Wilton N Y R 2 0	А	1	1	4
4a.	. Are the MS4s contributing to this report involved in a regional/watershed wide planning	g eff Ye			No
4h	. Does the MS4 have a banking and credit system for stormwater management practices?				
	·		es	•]	No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a protocol for eval and approval of banking and credit of alternative siting of a stormwater management process.	ract			No
4d	. How many stormwater management practices have been implemented as part of this system reporting period?	sten	in t	this	š
5.	What percent of municipal officials/MS4 staff responsible for program implementation training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?	atte	nded	_	%

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

		SPL	JES	ID						
Name of MS4/Coalition	Town of Ballston	N	Y	R	2	0	A	1	5	7

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 utilizes 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?

				1	
samp	les/	part	ici	pant	s/events

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

• Yes O No

(ex.:

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

● Yes ○ 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.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	SPDES ID									
Name of MS4/Coalition Town of Charlton		N	Y	R	2	0	А	0	3	2

6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

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 wa	s this obs	ervation	measured	or eva	luated in	this	reporting	period?
									P	P

				2	
samp	les/	part	ici	pant	s/events

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

Vec	\bigcirc No

(ex.:

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

T 7	\bigcirc \mathbf{N} T	
Yes	\bigcirc No	
100	\sim 110	

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

Per correspondence with EPA, Charlton began inspections of privately owned post-construction practices (where permission is granted). This began in May 2021. One major subdivision project continues to be under construction and has been inspected numerous times to ensure SWPPP compliance. The Town also receives reports from private inspector.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition	TOWN OF CLIFTON PARK	SPDES ID N Y R 2 0 A 0 3 5
6. Evaluating Pro	gress Toward Measurable Goals MCM 5	
identified in your St	ort on your progress and project plans toward cormwater Management Program Plan (SWMF tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the S	WMPP in this reporting period.
Practices. In 2019 t	struction Inspection and Maintenance Program he Saratoga County Intermunicipal Stormwate Inspections and Observation Forms have been	er Management Program input the
B. Briefly summar Goal.	rize the observations that indicated the over	all effectiveness of this Measurable
The observations go	enerate a list of action items that will require for	follow up.
C. How many time	es was this observation measured or evaluat	
D. Has your MS4	made progress toward this measurable goal	during this reporting period? ● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in the	he SWMPP? ● Yes ○ No
•	rize the stormwater activities planned to me ing cycle (including an implementation sche	et the goals of this MCM during
Continue to inspect up actions.	stormwater management areas, record observ	ations, prioritize, and create follow

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

If submitting	this form as part of a joint report on behalf of a	
		SPDES ID
Name of MS4/Coalition T	own of Greenfield	N Y R 2 0 A 1 2 3
6. Evaluating Progr	ress Toward Measurable Goals MCM 5	
1 0 1	et on your progress and project plans toward rmwater Management Program Plan (SWMF onal pages as needed.	
A. Briefly summariz	ze the Measurable Goal identified in the S	WMPP in this reporting period.
established a mainten post-Construction Ru maintenance schedule	oried all existing Post-Construction Runoff chance plan for each location. As new projects moff Control data base will be updated to ade. The Town is currently working with Sara cilities to the County GIS system.	s are dedicated within the Town the ld any new facilities to the
B. Briefly summariz	ze the observations that indicated the over	rall effectiveness of this Measurable
	Department has been keeping logs of mainte program to monitor and repair locations as	
C. How many times	was this observation measured or evaluat	ted in this reporting period?
D. Has your MS4 ma	ade progress toward this measurable goal	
		● Yes ○ No
E. Is your MS4 on so	chedule to meet the deadline set forth in t	
		● Yes ○ No
·	ze the stormwater activities planned to me g cycle (including an implementation sche	8
1	te program established within the Town. Wo	ork with Saratoga County Coalition

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	SPL)ES	ID						
Name of MS4/Coalition Town of Halfmoon	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?

				1	
samp	les/	part	tici	pant	s/events

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

9 I			
	Yes	\bigcirc	No

(ex.:

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

Yes	\bigcirc 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.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

if submitting this form as part of a joint report on behalf of a	
Name of MS4/Coalition Town of Malta	SPDES ID N Y R 2 0 A 0 8 6
value of M34/Coantion	
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
The Town has developed a complete inventory of municipally over practices. The Town is currently evaluating privately owned SM Town inspects on an annual basis all municipal owned SMPs and inspections.	IPs that discharge to the MS4. The
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
The Town has inventoried and mapped post construction SMP in as SMPs are added to the inventory (139 post construction storm municipal owned and 123 privately owned SMPs).	
C. How many times was this observation measured or evaluation	(ex.: samples/participants/
D. Has your MS4 made progress toward this measurable goal	l during this reporting period? ● Yes □ No
E. Is your MS4 on schedule to meet the deadline set forth in t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation scho	9
The Town will continue mapping its facilities and continues reset the town is responsible to maintain. The Town plans to develop owners to inspect their SMPs and provide reports to the Town SMPs.	a SOP for requesting private SMP

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition	City of Mechanicville	SPDES ID N Y R 2 0 A 5 5 1
6. Evaluating Pro	gress Toward Measurable Goals MCM 5	
identified in your St	oort on your progress and project plans towar tormwater Management Program Plan (SWN itional pages as needed.	e e
A. Briefly summar	rize the Measurable Goal identified in the	e SWMPP in this reporting period.
The measurable gos inspections.	al tracked was the number of permanent stor	rmwater management practice
B. Briefly summar Goal.	rize the observations that indicated the ov	verall effectiveness of this Measurable
The City's ponds w	ill be inspected early in the next reporting cy	ycle.
C. How many time	es was this observation measured or evalu	1
D. Has your MS4	made progress toward this measurable go	(ex.: samples/participants/eve.
·	. 3	○ Yes ● No
E. Is your MS4 on	schedule to meet the deadline set forth in	
•	rize the stormwater activities planned to ning cycle (including an implementation scl	e
The City will continue are installed	nue to inspect the ponds and inventory storm	nwater management practices as they

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

	SPDES ID
Name of MS4/Coalition TOWN OF MILTON	N Y R 2 0 A 1 0 8
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Per the EPA Audit and Order on Consent, the number of regulate confirmed, inspected and mapped. Deficiencies have been identified during 2022.	
All staff have received appropriate training this period.	
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Continued coordinating with County with inventorying, mapping database of town infrastructure. Significant progress made in 202 on Consent which includes mapping outfalls and stormwater practions.	1 as a result of EPA Audit / Order
C. How many times was this observation measured or evaluat	red in this reporting period?
	2 6
D. Has your MS4 made progress toward this measurable goal	during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	he SWMPP?
	• Yes O No

Town will continue to address maintenance activities on stormwater management practices under their ownership as identified in inspections conducted in 2021.

the next reporting cycle (including an implementation schedule).

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

		SPL)ES	ID						
Name of MS4/Coalition TC	OWN OF MOREAU	N	Y	R	2	0	А	1	5	8

6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

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?

1			
 7 /	 	 	_

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

	Vec	\bigcirc No	

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

Yes	\bigcirc 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, 2 0 2 3

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

| SPDES ID | | Name of MS4/Coalition | Village of Round Lake | N | Y | R | 2 | 0 | A | 0 | 9 | 9 |

6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

The Village of Round Lake has entered into a hybrid arrangement with the Home Owners Association/HOA formed for the Victorian Landings project. The Victorian Landings HOA will be the owner/operator of five (5) SMPs constructed for the project and will conduct all seasonal maintenance of the SMPs. The Village of Round Lake will be responsible for conducting annual Level 2 Inspections of each SMP per the NYSDEC Maintenance Guidance for Stormwater Management Practices (2017); maintaining all records as required.

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

N/A. The project (Victorian Landings) was just completed in December of 2022 and NOT filed in January of 2023. Also, the Village of Round Lake has never entered into such an agreement. The effectiveness of this measure is TBD.

C.	How many times	was this	observation	measured	or evaluated	in this repo	orting pe	riod?	•	
							(ex · samr	oles/na	rtici	nants

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

• Yes O No

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

● Yes ○ No

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

The Village of Round Lake will continue to work with the Victorian Landings HOA to support the goal of ensuring the long-term operation of the SMPs constructed for the project. Next year's goals include: 1) developing landscaping and turf grass management protocols with the VL-HOA for erosion control; 2) conducting annual inspections of the SMPs (November/December), per the NYSDEC SMP Guidance and the Operations & Maintenance section of the accepted SWPPP.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID
Name of MS4/Coalition Saratoga County, Department of Public Works	N Y R 2 0 A 2 0 9
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Inspection and maintenance of applicable SMPs on County properties.	erty or within the County
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
8 of 8 SMPs currently on-line/in use were inspected this reportin needed. NOTE: 6 of 8 SMPs were installed/constructed, permand in reporting Year-9, (2011-12); the SMP Operations & Maintena annual inspection in/following year-2 of continuous operation.	ently stabilized and put into service
C. How many times was this observation measured or evalua	ted in this reporting period?
	1
D. Has your MS4 made progress toward this measurable goa	(ex.: samples/participants/events Il during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in	the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sch	eet the goals of this MCM during
Continued implementation of SMP inspection program.	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

		_	SPI	DES	ID						
Name of MS4/Coalition	City of Saratoga Springs		N	Y	R	2	0	А	2	1	6

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.

- (16) new Stormwater Management Practices were inventoried and added to database.
- (5) SWPPP's for land disturbance were received by the City Engineer for review and approval.
- Unified Dev. Ordinance 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 DPW as needed.

	TT	4 •	41 •	1 4 •	1	1	4 1 •	41 .	4 •	• 10
	How many	I fimes v	vac thic n	hcervation	measured	or evali	iated in	thic	renorting	nerind?
\mathbf{v}	IIUW IIIaii	uiiics v	vas uns o	DSCI Valion	micasui cu '	oi cvait	iaicu iii	UIII	I CDOLUIE	pci iou.

			1	6	
samp	les/	part	ici	pant	s/events

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

$lacktriangle$ Yes \bigcirc N	lo.
---------------------------------	-----

(ex.:

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

Yes	\bigcirc 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 to be administered.
- Require private stormwater management practices to have owner maintenance agreements.
- City will continue to inspect and maintain City owned stormwater management practices.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Name of MS4/Coalition South Glens Falls	SPDES ID N Y R 2 0 A 0 9 1
Ivalie of 1915-47 Coantion	
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward actidentified in your Stormwater Management Program Plan (SWMPP) III.C.1. Submit additional pages as needed.	•
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
Inventory, inspect and /or maintain post-construction SMPs as requi	ired by the O&M Plan for each.
B. Briefly summarize the observations that indicated the overall Goal.	effectiveness of this Measurable
5MPs were inventoried, 5 were inspected and 5 maintenance actions	s were taken.
C. How many times was this observation measured or evaluated	in this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal du	
E. Is your MS4 on schedule to meet the deadline set forth in the	
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedu	
Continue implementation of MM5 measures as detailed in SGF SW	MP plan.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Name of MS4/Coalition Town f Stillwater SPDES ID N Y R 2 0 A 5 4 9
6. Evaluating Progress Toward Measurable Goals MCM 5
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
The Town of Stillwater has developed their Stormwater Management Plan (SWMP) and continues with implementation. SWPPPs are reviewed as part of the Site Plan review procedure. Maintenance agreements are required for all private post-construction practices to ensure future operation.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
All proposed post-construction practices proposed for new development were reviewed according to the the SWMP. The Town requires a Stormwater Maintenance Agreement for privately owned practices.
C. How many times was this observation measured or evaluated in this reporting period?
D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes • No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
● Yes ○ 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 Town is a member, the Saratoga County ISWM Program. The information obtained from this was mapped with GIS and made available to all members of the coalition.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

SPDE:	S ID
Name of MS4/Coalition Village of Stillwater N Y	
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achieving mea identified in your Stormwater Management Program Plan (SWMPP), including III.C.1. Submit additional pages as needed.	-
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	s reporting period.
The Village of Stillwater has developed their Stormwater Management Plan (SV with implementation. SWPPPs are reviewed as part of the Site Plan review procedure. Maintenance agreements are required for all private post-construction practices operation.	
B. Briefly summarize the observations that indicated the overall effectivene Goal.	ess of this Measurable
All proposed post-construction practices proposed for new development were re Village requires a Stormwater Maintenance Agreement for privately owned practices.	
C. How many times was this observation measured or evaluated in this repo	orting period?
D. Her vany MS4 made progress toward this messurable goal during this w	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this re	eporting period: ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).	f this MCM during

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.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

Γ			SPDES ID	\neg
Name of MS4/Coalition	Town of Waterford		N Y R 2 0 A 0 3	7
5	gress Toward Measurable Goals		11 1	
identified in your Sto	ort on your progress and project plator or your program Plational pages as needed.			
A. Briefly summar	ize the Measurable Goal identific	ed in the SWMPP i	in this reporting period.	
The Town has a rob stormwater manager	oust inspection and maintenance proment practices.	ogram for all ditche	s, catch basins, and	
B. Briefly summar Goal.	ize the observations that indicate	d the overall effect	tiveness of this Measurab	le
	stormwater management ponds, and teneral maintenance on the Gadwel			
C. How many time	s was this observation measured	or evaluated in thi		2 ants/events
D. Has your MS4 n	nade progress toward this measu	rable goal during	this reporting period? • Yes • N	No.
E. Is your MS4 on	schedule to meet the deadline set	forth in the SWM	IPP? ● Yes ○ N	Jo.
•	ize the stormwater activities plan	0		
The Town will cont	inue to implement and track operat	ions related to its m	naintenance program.	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

SPDES ID
Name of MS4/Coalition Town of Wilton N Y R 2 0 A 1 1 4
6. Evaluating Progress Toward Measurable Goals MCM 5
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
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?
(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal during this reporting period?
● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Post construction practices deeded to the Town will continue to be inspected and maintained when feasible as required.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

		SPD	DES	ID						
Name of MS4/Coalition	Town of Ballston	N	Y	R	2	0	А	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 MS4On 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.

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

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

	SPD	DES	ID						
Name of MS4/Coalition Town of Charlton	N	Y	R	2	0	А	0	3	2

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section	ion is being report	ed (check one):
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- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? | 1 |

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1 T	

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

			performed within	the past 3
Operation/Activity/Facility	Addressed in	n SWMP?	years?	
Street Maintenance	• Yes	○ No	• Yes	○ No
Bridge Maintenance	O Yes	• No	O Yes	No
Winter Road Maintenance	• Yes	○ No	• Yes	\bigcirc No
Salt Storage	• Yes	○ No	• Yes	\bigcirc No
Solid Waste Management	O Yes	• No	○ Yes	No
New Municipal Construction and Land Disturbat	nce • Yes	○ No	• Yes	\bigcirc No
Right of Way Maintenance	• Yes	○ No	• Yes	\bigcirc No
Marine Operations	○ Yes	• No	○ Yes	No
Hydrologic Habitat Modification	○ Yes	• No	○ Yes	No
Parks and Open Space	• Yes	○ No	• Yes	\bigcirc No
Municipal Building	• Yes	○ No	• Yes	\bigcirc No
Stormwater System Maintenance	• Yes	○ No	● Yes	\bigcirc No
Vehicle and Fleet Maintenance	Yes	○ No	• Yes	\bigcirc No
Other	O Yes	○ No	○ Yes	\bigcirc No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

		SPE	DES	ID						
Name of MS4/Coalition	TOWN OF CLIFTON PARK	N	Y	R	2	0	А	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.

		periori	iica mitiiii	r the past c
Operation/Activity/Facility	Addressed in	n SWMP?	years?	• -
Street Maintenance	• Yes	○ No	• Yes	\bigcirc No
Bridge Maintenance	○ Yes	• No	O Yes	No
Winter Road Maintenance	• Yes	○ No	• Yes	\bigcirc No
Salt Storage	• Yes	○ No	• Yes	\bigcirc No
Solid Waste Management	• Yes	○ No	• Yes	\bigcirc No
New Municipal Construction and Land Disturba	nce • Yes	○ No	• Yes	\bigcirc No
Right of Way Maintenance	• Yes	○ No	• Yes	\bigcirc No
Marine Operations	○ Yes	• No	O Yes	No
Hydrologic Habitat Modification		○ No	• Yes	\bigcirc No
Parks and Open Space	• Yes	○ No	• Yes	\bigcirc No
Municipal Building	● Yes	○ No	• Yes	\bigcirc No
Stormwater System Maintenance	• Yes	○ No	• Yes	\bigcirc No
Vehicle and Fleet Maintenance	● Yes	○ No	• Yes	\bigcirc No
Other	∴ ○ Yes	• No	O Yes	No

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

	SPI	DES	ID.						
Name of MS4/Coalition Town of Greenfield	N	Y	R	2	0	A	1	2	3

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section	ion is being report	ed (check one):
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- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? | 1 |

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

	performed within the pa					
Operation/Activity/Facility	Addressed in	n SWMP?	<u>vears?</u>) -		
Street Maintenance	• Yes	○ No	Yes	\bigcirc No		
Bridge Maintenance	• Yes	○ No	Yes	\bigcirc No		
Winter Road Maintenance	• Yes	○ No	Yes	\bigcirc No		
Salt Storage	• Yes	○ No	Yes	\bigcirc No		
Solid Waste Management	• Yes	○ No	Yes	\bigcirc No		
New Municipal Construction and Land Disturba	ince • Yes	○ No	Yes	\bigcirc No		
Right of Way Maintenance	• Yes	○ No	Yes	\bigcirc No		
Marine Operations	○ Yes	• No	○ Yes	No		
Hydrologic Habitat Modification	O Yes	• No	○ Yes	No		
Parks and Open Space	• Yes	○ No	Yes	○ No		
Municipal Building	• Yes	○ No	Yes	\bigcirc No		
Stormwater System Maintenance	• Yes	○ No	Yes	\bigcirc No		
Vehicle and Fleet Maintenance	• Yes	○ No	Yes	\bigcirc No		
Other	○ Yes	○ No	O Yes	○ No		

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

	SPD	ES	ID						
Name of MS4/Coalition Town of Halfmoon	N	Y	R	2	0	А	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 MS4On 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.

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

SPDES ID

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

Name of MS4/Coalition Town of Malta		NY	R	2 0	А	0	8 6	5
Minimum Control Measure 6. Stormwater Manage	ment fo	r Mu	nici	<u>ipal</u>	<u>Ор</u>	era	<u>itio</u>	<u>ns</u>
The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?								
1. Choose/list each municipal operation/facility that contribut Pollutants of Concern to the MS4 system. For each operation/facility has been addressed in the MS4's/Coalitic Program(SWMP) Plan and whether a self-assessment has reporting period. A self-assessment is performed to: 1) depotentially generated by the permittee's operations and face effectiveness of existing programs and 3) identify the municipal that will be addressed by the pollution prevention and good not done already.	ion/facili on's Stori been per termine t cilities; 2) nicipal op	ty ind mwate forme he sou evalu	icater Med du arcer arce arce	e who lanaguring s of pthe the	ethegem g the pollu	er thent e utan	he nts	
	_	<u>S</u> Operat erforn	ion/		ity/l	Faci		
Operation/Activity/Facility Addressed in S		C1 101 II		ears'		e pa	131 3	
	No No					l No l No		

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

		SPI	DES	ID						
Name of MS4/Coalition	City of Mechanicville	N	Y	R	2	0	А	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 MS4On 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.

		periorii	<u>lea withii</u>	i the past 5
Operation/Activity/Facility	Addressed in	n SWMP?	<u>vears?</u>	<u>.</u>
Street Maintenance	• Yes	○ No	. • Yes	\bigcirc No
Bridge Maintenance	○ Yes	• No	. O Yes	No
Winter Road Maintenance		○ No		\bigcirc No
Salt Storage	• Yes	○ No	. • Yes	\bigcirc No
Solid Waste Management	• Yes	○ No	• Yes	\bigcirc No
New Municipal Construction and Land Disturba	nce O Yes	• No	. O Yes	No
Right of Way Maintenance	• Yes	○ No	• Yes	\bigcirc No
Marine Operations	∴ ○ Yes	• No	. O Yes	No
Hydrologic Habitat Modification	○ Yes	• No	O Yes	No
Parks and Open Space	_	○ No	• Yes	\bigcirc No
Municipal Building		○ No	• Yes	\bigcirc No
Stormwater System Maintenance		○ No	• Yes	\bigcirc No
Vehicle and Fleet Maintenance		○ No	• Yes	\bigcirc No
Other	\sim T7	• No	○ Yes	No

Self-Assessment

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

		SPI	DES	ID						
Name of MS4/Coalition	TOWN OF MILTON	N	Y	R	2	0	А	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.

Operation/Activity/Facility performed within the past 3 **Operation/Activity/Facility** Addressed in SWMP? vears? Street Maintenance..... • Yes ○ No • Yes \bigcirc No ○ No ○ Yes Bridge Maintenance.... • Yes No Winter Road Maintenance.... • Yes ○ No • Yes \bigcirc No Salt Storage..... • Yes ○ No • Yes \bigcirc No Solid Waste Management..... • Yes ○ No • Yes \bigcirc No New Municipal Construction and Land Disturbance.. • Yes ○ No • Yes \bigcirc No Right of Way Maintenance..... • Yes No Marine Operations.... O Yes ● No ○ Yes \bigcirc No Hydrologic Habitat Modification..... ○ Yes ● No ○ Yes \bigcirc No ○ No Yes \bigcirc No Parks and Open Space..... Yes \bigcirc No Municipal Building.... • Yes ○ No • Yes Stormwater System Maintenance..... • Yes ○ No • Yes \bigcirc No \bigcirc No Vehicle and Fleet Maintenance..... • Yes ○ No Yes \bigcirc No Other..... O Yes

This report is being submitted for the reporting period ending March 9, |2| |0| |2| |3|

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

		SPD	DES	ID						
Name of MS4/Coalition TOWN OF MO	REAU	N	Y	R	2	0	А	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 MS4On 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											
Operation/Activity/Facility	Addressed i	n SWMP?	<u>years?</u>) -							
Street Maintenance	• Yes	○ No	• Yes	\bigcirc No							
Bridge Maintenance	O Yes	• No	O Yes	No							
Winter Road Maintenance	• Yes	○ No	• Yes	○ No							
Salt Storage	• Yes	○ No	• Yes	○ No							
Solid Waste Management	• Yes	○ No	O Yes	No							
New Municipal Construction and Land Disturba	nce • Yes	○ No	O Yes	No							
Right of Way Maintenance	• Yes	○ No	• Yes	\bigcirc No							
Marine Operations	O Yes	• No	O Yes	No							
Hydrologic Habitat Modification	O Yes	• No	O Yes	No							
Parks and Open Space	• Yes	○ No	• Yes	\bigcirc No							
Municipal Building	• Yes	○ No	• Yes	\bigcirc No							
Stormwater System Maintenance	• Yes	○ No	• Yes	\bigcirc No							
Vehicle and Fleet Maintenance	• Yes	○ No	• Yes	\bigcirc No							
Other	○ Yes	• No	O Yes	No							

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

SPDES ID

		6			1			1			1
Name of MS4/Coalition	Village of Round Lake		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.

		periori	ica miliin	i the past b
Operation/Activity/Facility	Addressed i	n SWMP?	years?	2
Street Maintenance	• Yes	○ No	. • Yes	O No
Bridge Maintenance	O Yes	• No	. O Yes	No
Winter Road Maintenance	• Yes	○ No	. • Yes	○ No
Salt Storage	• Yes	○ No	. • Yes	O No
Solid Waste Management		○ No	. O Yes	No
New Municipal Construction and Land Disturbat	nce O Yes	• No	. O Yes	No
Right of Way Maintenance	Yes	○ No	. O Yes	No
Marine Operations		○ No	. • Yes	\bigcirc No
Hydrologic Habitat Modification		• No	. O Yes	No
Parks and Open Space		○ No	. • Yes	O No
Municipal Building		○ No	. • Yes	O No
Stormwater System Maintenance		○ No	. • Yes	○ No
Vehicle and Fleet Maintenance		○ No	• Yes	\bigcirc No
Other	O Vac	○ No	. O Yes	No

Self-Assessment

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

			SPE	ES	ID						
Name of MS4/Coalition	Saratoga County, Department of Public Works		N	Y	R	2	0	А	2	0	9

Minimum Control Measure 6. Stormwater Management for Municipal Operations

	if 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? 	a coalition

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

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.

Operation/Activity/Facility performed within the past 3 Addressed in SWMP? Operation/Activity/Facility years? Street Maintenance..... 9 Yes ○ No • Yes O No Bridge Maintenance.... • Yes ○ No • Yes \bigcirc No Winter Road Maintenance..... • Yes ○ No • Yes O No O No Salt Storage..... • Yes ○ No • Yes ○ No • Yes Solid Waste Management.....

Yes O No ○ No • Yes O No New Municipal Construction and Land Disturbance.. • Yes ○ No • Yes O No Right of Way Maintenance.....

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

This report is being submitted for the reporting period ending March 9, |2| |0| |2| |3|

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

		SPD	ES	ID						
Name of MS4/Coalition	City of Saratoga Springs	N	Y	R	2	0	А	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 MS4On 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>perform</u>	<u>ied withir</u>	i the past 3
Operation/Activity/Facility	Addressed i	n SWMP?	<u>years?</u>) -
Street Maintenance	• Yes	○ No	. • Yes	\bigcirc No
Bridge Maintenance	○ Yes	• No	. O Yes	No
Winter Road Maintenance	• Yes	○ No	. • Yes	\bigcirc No
Salt Storage	• Yes	○ No	. • Yes	\bigcirc No
Solid Waste Management	• Yes	○ No	. • Yes	\bigcirc No
New Municipal Construction and Land Disturba	nce • Yes	○ No	. • Yes	\bigcirc No
Right of Way Maintenance	○ Yes	• No	. O Yes	No
Marine Operations	○ Yes	• No	. O Yes	No
Hydrologic Habitat Modification	O Yes	• No	. O Yes	No
Parks and Open Space	• Yes	○ No	. • Yes	○ No
Municipal Building	• Yes	○ No	. • Yes	○ No
Stormwater System Maintenance	• Yes	○ No	. • Yes	\bigcirc No
Vehicle and Fleet Maintenance	• Yes	○ No	. • Yes	\bigcirc No
Other	• Yes	○ No	. • Yes	○ No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

		 SPI	DES	ID						
Name of MS4/Coalition	South Glens Falls	N	Y	R	2	0	A	0	9	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 MS4On 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.

		De	eriorinea within	the past 5
Operation/Activity/Facility	Addressed in	n SWMP?	<u>years?</u>	
Street Maintenance	9 Yes	O No	O Yes	No
Bridge Maintenance	O Yes	No	O Yes	No
Winter Road Maintenance	® Yes	O No	O Yes	No
Salt Storage	9 Yes	○ No	O Yes	No
Solid Waste Management	O Yes	• No	O Yes	No
New Municipal Construction and Land Disturba				No
Right of Way Maintenance	9 Yes	O No	O Yes	No
Marine Operations	O Yes	• No	O Yes	No
Hydrologic Habitat Modification	O Yes	No	O Yes	No
Parks and Open Space			O Yes	No
Municipal Building	Yes	○ No	○ Yes	No
Stormwater System Maintenance	Yes	O No	○ Yes	No
Vehicle and Fleet Maintenance		○ No	O Yes	No
Other		O No		No

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

_		_	SPE	ES	D						
Name of MS4/Coalition	Town of Stillwater		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 MS4On 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

On anotion / A atimity/Figuility	Addmonard in	. CXX/MD9		1
Operation/Activity/Facility	Addressed in	II S W IVIP?	<u>years?</u>	•
Street Maintenance	• Yes	○ No	. • Yes	○ No
Bridge Maintenance	• Yes	○ No	. O Yes	No
Winter Road Maintenance	• Yes	○ No	. • Yes	\bigcirc No
Salt Storage	○ Yes	○ No	. O Yes	No
Solid Waste Management	• Yes	○ No	. O Yes	No
New Municipal Construction and Land Disturbar	nce • Yes	○ No	• Yes	\bigcirc No
Right of Way Maintenance	• Yes	○ No	• Yes	\bigcirc No
Marine Operations	○ Yes	• No	○ Yes	No
Hydrologic Habitat Modification	○ Yes	• No	○ Yes	No
Parks and Open Space	○ Yes	• No	○ Yes	No
Municipal Building		○ No	• Yes	\bigcirc No
Stormwater System Maintenance		○ No	Yes	○ No
Vehicle and Fleet Maintenance	• Yes	○ No	Yes	○ No
Other	○ Yes	• No	O Yes	No

6894134836

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

		SPD	ES J	ID,					_	,
Name of MS4/Coalition	Village of Stillwater	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.

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

		perior	med within	the past
Operation/Activity/Facility	Addressed i	n SWMP?	years?	
Street Maintenance	• Yes	○ No	• Yes	○ No
Bridge Maintenance	• Yes	○ No	O Yes	No
Winter Road Maintenance		○ No	O Yes	No
Salt Storage	O Yes	○ No	O Yes	No
Solid Waste Management	• Yes	○ No	O Yes	No
New Municipal Construction and Land Disturbat	nce • Yes	○ No	O Yes	No
Right of Way Maintenance	• Yes	O No	O Yes	No
Marine Operations		• No	O Yes	No
Hydrologic Habitat Modification	O Yes	• No	O Yes	No
Parks and Open Space		• No	O Yes	No
Municipal Building		○ No	O Yes	No
Stormwater System Maintenance		O No	• Yes	O No
Vehicle and Fleet Maintenance	• Yes	○ No	O Yes	No
Other	○ Yes	• No	O Yes	No

Self-Assessment

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

		SPD	ES	ID						
Name of MS4/Coalition	Town of Waterford	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 MS4On 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.

Operation/Activity/Facility performed within the past 3 **Operation/Activity/Facility** Addressed in SWMP? vears? Street Maintenance..... • Yes ○ No • Yes \bigcirc No ○ No • Yes Bridge Maintenance.... • Yes \bigcirc No Winter Road Maintenance.... • Yes ○ No • Yes \bigcirc No Salt Storage..... 9 Yes ○ No • Yes \bigcirc No Solid Waste Management..... • Yes ○ No • Yes \bigcirc No New Municipal Construction and Land Disturbance.. O Yes ● No ○ Yes No ○ No • Yes Right of Way Maintenance.... • Yes \bigcirc No ● No ○ Yes Marine Operations.... O Yes No Hydrologic Habitat Modification..... O Yes ● No ○ Yes No ○ No Yes \bigcirc No Parks and Open Space.... Yes Municipal Building....

Yes \bigcirc No ○ No • Yes \bigcirc No Stormwater System Maintenance..... • Yes ○ No • Yes ○ No Yes \bigcirc No Vehicle and Fleet Maintenance..... • Yes Other..... O Yes \bigcirc No

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

	S	PDE	S ID						
Name of MS4/Coalition Town of Wilton		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 MS4On 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

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

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

SPDES ID									
Name of MS4/Coalition Town of Ballston	N	Y	R	2	0	А	1	5	7
2. Provide the following information about municipal operations go	ood h	ous	eke	eep	ing	; pr	• og i	ran	ns:
Parking Lots Swept (Number of acres X Number of times swept)		# A	Acre	es					2
• Streets Swept (Number of miles X Number of times swept)		# N	Mile	es			1	2	4
 Catch Basins Inspected and Cleaned Where Necessary 				#			1	7	3
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 				# [1	7	3
O Phosphorus Applied In Chemical Fertilizer		#	Lb	s.					0
O Nitrogen Applied In Chemical Fertilizer		#	Lb	s.					0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	of #	‡ Ac	res			C	0 0) .	0
3. How many stormwater management trainings have been provide	ed to	mu	nic	ipa	l er	mp	lov	ees	
during this reporting period?									2
4. What was the date of the last training?	1 0	/[2	7	/	2	0	2	2
5. How many municipal employees have been trained in this report	ing p	erio	od?	•					3
6. What percent of municipal employees in relevant positions and d stormwater management training?	lepar	tme	ents	s re	cei [ve 1	0	0	%

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES I	D				
Name of MS4/Coalition Town of Charlton	N Y	R 2	0 A	0	3	2
2. Provide the following information about municipal operations g	good house	keep	oing p	rogi	am	ıs:
O Parking Lots Swept (Number of acres X Number of times swept)	# A	cres				
• Streets Swept (Number of miles X Number of times swept)	# N	liles			1	5
 Catch Basins Inspected and Cleaned Where Necessary 		#			1	0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 		#				4
O Phosphorus Applied In Chemical Fertilizer	#]	Lbs.				
O Nitrogen Applied In Chemical Fertilizer	#]	Lbs.				
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acr	res].[
3. How many stormwater management trainings have been provid	lad to mun	ioina	al amn	lov	006	
during this reporting period?	ied to mun	пстра		loy	ees	1
4. What was the date of the last training?	0 5 /	1 3] / [2	0	2	1
5. How many municipal employees have been trained in this report	ting perio	d?				1
6. What percent of municipal employees in relevant positions and stormwater management training?	departme	ıts re	eceive 1	0	0	%

6445134838

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

SPDE	ES ID					
Name of MS4/Coalition TOWN OF CLIFTON PARK	YR2	0	А	0	3	5
2. Provide the following information about municipal operations good ho	usekeej	oing	g pr	ogı	ran	18:
• 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	#			3	0	0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#					5
O 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	3.	8
3. How many stormwater management trainings have been provided to m	nunicipa	al e	mp	loy	ees	
during this reporting period?						0
4. What was the date of the last training?	/	/				
5. How many municipal employees have been trained in this reporting pe	riod?					0
6. What percent of municipal employees in relevant positions and departr stormwater management training?	ments r	ecei	ve		0	%

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID			
Name of MS4/Coalition Town of Greenfield	N Y R	2 0 A	1 2	2 3
2. Provide the following information about municipal operations go	od houseke	eping p	rogra	ms:
Parking Lots Swept (Number of acres X Number of times swept)	# Acre	S		4
• Streets Swept (Number of miles X Number of times swept)	# Mile	S	2	2 4
 Catch Basins Inspected and Cleaned Where Necessary 	7	#	1	. 5
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	7	#	1	. 5
O Phosphorus Applied In Chemical Fertilizer	# Lbs			
O Nitrogen Applied In Chemical Fertilizer	# Lbs			
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres			-
3. How many stormwater management trainings have been provide	d to munici	nal amr	Jovac	NC.
during this reporting period?	a to manici	par emp	noyee	1
4. What was the date of the last training?	1 0 / 0	4 / 2	0 2	2 2
5. How many municipal employees have been trained in this reporti	ing period?		1	. 5
6. What percent of municipal employees in relevant positions and destormwater management training?	epartments	receive	0 0	%

This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPDES ID					
Name of MS4/Coalition Town of Halfmoon	N Y R 2	2 0	А	3	7	5
2. Provide the following information about municipal operations go	od housekee	ping	g pr	ogr	am	ıs:
• Parking Lots Swept (Number of acres X Number of times swept)	# Acres			4		8
• Streets Swept (Number of miles X Number of times swept)	# Miles	4	0	2		5
 Catch Basins Inspected and Cleaned Where Necessary 	#				2	2
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#					
O Phosphorus Applied In Chemical Fertilizer	# Lbs.					
O Nitrogen Applied In Chemical Fertilizer	# Lbs.					
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres					
3. How many stormwater management trainings have been provide	d to municir	nal ei	mn	love	296	
during this reporting period?	u vo mumor		T-P			1
4. What was the date of the last training?	0 6 / 0 8	3 /	2	0	2	2
5. How many municipal employees have been trained in this reporti	ing period?					1
6. What percent of municipal employees in relevant positions and d stormwater management training?	epartments :	recei [ve 1	0	0 9	%

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID			
Name of MS4/Coalition Town of Malta	N Y R 2	2 0 A	0 8	6
2. Provide the following information about municipal operati	ons good housekee	ping pr	ograi	ms:
• Parking Lots Swept (Number of acres X Number of times swept	# Acres		7 .	5
• Streets Swept (Number of miles X Number of times swept)	# Miles		4 4	5
 Catch Basins Inspected and Cleaned Where Necessary 	#		6 5	3
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		2	8
O Phosphorus Applied In Chemical Fertilizer	# Lbs.			
Nitrogen Applied In Chemical Fertilizer	# Lbs.	2	5 5	6
• Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Nutimes applied to the nearest tenth.)	# Acres umber of	1	1.	2
3. How many stormwater management trainings have been pluguing this reporting period?	rovided to municip	oal empl	oyees	6
4. What was the date of the last training?	1 0 / 2 -	7 / 2	0 2	2
5. How many municipal employees have been trained in this i	reporting period?			4
6. What percent of municipal employees in relevant positions stormwater management training?	and departments	receive	0 0]%

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

	SPD	ES ID					
Name of MS4/Coalition City of Mechanicville	N	YR	2 () A	5	5	1
2. Provide the following information about municipal operation	ions good ho	ouseke	epin	ıg pr	ogr	am	s:
• Parking Lots Swept (Number of acres X Number of times swept	t)	# Acre	es			4	8
• Streets Swept (Number of miles X Number of times swept)		# Mile	es	1	1	8	8
• Catch Basins Inspected and Cleaned Where Necessary			#			7	7
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 			#				3
Phosphorus Applied In Chemical Fertilizer		# Lbs	s.				0
Nitrogen Applied In Chemical Fertilizer		# Lbs	s. [0
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.) 		Acres			0		
3. How many stormwater management trainings have been p	rovided to 1	nunici	ipa <u>l</u>	emp	loye	ees	
during this reporting period?							1
4. What was the date of the last training?	0 2	/[1	6 /	2	0	2	3
5. How many municipal employees have been trained in this	reporting po	eriod?					8
6. What percent of municipal employees in relevant positions stormwater management training?	and depart	tments	rec	eive	9	0	%

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

	SPI	DES ID					
Name of MS4/Coalition TOWN OF MILTON	N	Y R	2	0 A	1	0	8
2. Provide the following information about municipal operations	good h	ousek	eep	ing p	rog	ran	1 s :
Parking Lots Swept (Number of acres X Number of times swept)		# Acr	es [6
• Streets Swept (Number of miles X Number of times swept)		# Mil	es [3	2
 Catch Basins Inspected and Cleaned Where Necessary 			# [7	9
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 			# [2	6
O Phosphorus Applied In Chemical Fertilizer		# Lt	s.				0
O Nitrogen Applied In Chemical Fertilizer		# Lt	s.				0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)		# Acres	; C	0 0		•	
3. How many stormwater management trainings have been provide	ded to	munic	ipa	l emp	oloy	ees	
during this reporting period?			•				4
4. What was the date of the last training?	0 2] [2	0	/ 2	0	2	3
5. How many municipal employees have been trained in this report	rting p	eriod	?				2
6. What percent of municipal employees in relevant positions and stormwater management training?	depar	tment	s re	ceive	0	0	%

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID	
Name of MS4/Coalition TOWN OF MOREAU	N Y R 2	0 A 1 5 8
2. Provide the following information about municipal operat	tions good housekeep	oing programs:
O Parking Lots Swept (Number of acres X Number of times swep	t) # Acres	
• Streets Swept (Number of miles X Number of times swept)	# Miles	1 1 3
O Catch Basins Inspected and Cleaned Where Necessary	#	7
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	# Acres Umber of	
3. How many stormwater management trainings have been partial during this reporting period?	provided to municipa	al employees
4. What was the date of the last training?	1 2 / 1 9	/ 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 stormwater management training?	s and departments r	eceive 8 5 %

SPDES ID

6445134838

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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 Round Lake		N	YR	2	0	A	0	9	9
2. Provide the following information about municipal operation	ions good	d ho	ousek	eep	ing	pro	ogr	am	s:
O Parking Lots Swept (Number of acres X Number of times swep	t)		# Acr	es					0
• Streets Swept (Number of miles X Number of times swept)			# Mil	es				1	2
Catch Basins Inspected and Cleaned Where Necessary				#				1	1
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 				#					2
O Phosphorus Applied In Chemical Fertilizer			# Lb	s.					0
O Nitrogen Applied In Chemical Fertilizer			# Lb	s.					0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Natimes applied to the nearest tenth.)	umber of		Acres			0	0].[
3. How many stormwater management trainings have been p during this reporting period?	rovided	to n	nunic	ipa	l en	ıplo	oye		0
4. What was the date of the last training?	0		/ 0		/	0			
5. How many municipal employees have been trained in this	reporting	g pe	eriod?	•				10	1
6. What percent of municipal employees in relevant positions stormwater management training?	and dep	art	ments	s re	ceiv		2 ()	6

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

	SPDES ID		
Name of MS4/Coalition Saratoga County, Department of Public Works	N Y R 2	0 A 2	0 9
2. Provide the following information about municipal operations a	good housekeep	ing prog	rams:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres	N	1 A
• Streets Swept (Number of miles X Number of times swept)	# Miles	N	/ A
Catch Basins Inspected and Cleaned Where Necessary	#		4 0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		
O Nitrogen Applied In Chemical Fertilizer	#Lbs.		
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres er of		
3. How many stormwater management trainings have been provided during this reporting period?	ded to municipa	al employ	/ ees
4. What was the date of the last training?	10/20	120	aa
5. How many municipal employees have been trained in this repo	rting period?		4
6. What percent of municipal employees in relevant positions and stormwater management training?	departments r	eceive	0 %

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

	SP	PDES ID					
Name of MS4/Coalition City of Saratoga Springs	N	Y R	2	0 A	2	1	6
2. Provide the following information about municipal operat	tions good l	housek	eepi	ng pr	ogr	ams	5:
Parking Lots Swept (Number of acres X Number of times swep	ot)	# Acr	es			1	0
• Streets Swept (Number of miles X Number of times swept)		# Mil	es		2	9 :	2
 Catch Basins Inspected and Cleaned Where Necessary 			#			7	6
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 			#				
 Phosphorus Applied In Chemical Fertilizer 		# Lb	s.				8
● Nitrogen Applied In Chemical Fertilizer		# Lb	s.			3 !	5
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.) 	Number of	# Acres			1 8].	8
3. How many stormwater management trainings have been partial during this reporting period?	provided to	munic	ipal	emp	loye		0
4. What was the date of the last training?	0 2	2 / [1	1	/ 2	0	1	6
5. How many municipal employees have been trained in this	reporting	period'	•			-	0
6. What percent of municipal employees in relevant position stormwater management training?	s and depa	rtment	s rec	eive	5	0 %	6

6445134838

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

t e e e e e e e e e e e e e e e e e e e	SPDES ID
Name of MS4/Coalition South Glens Falls	N Y R 2 0 A 0 9 1
2. Provide the following information about municipal operations	s good housekeeping programs:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres 1 2
Streets Swept (Number of miles X Number of times swept)	# Miles 3 2 0
Catch Basins Inspected and Cleaned Where Necessary	# 3 0 0
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	# 0
O Phosphorus Applied In Chemical Fertilizer	# Lbs. 0
O Nitrogen Applied In Chemical Fertilizer	# Lbs. 0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number applied to the nearest tenth.)	# Acres 0 0 .
3. How many stormwater management trainings have been prov	ided to municipal employees
during this reporting period?	0
4. What was the date of the last training?	04/26/2018
5. How many municipal employees have been trained in this repo	orting period?
6. What percent of municipal employees in relevant positions and stormwater management training?	d departments receive

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

	SPDES ID							
Name of MS4/Coalition Town of Stillwater	NYR2	0 A 5	4	9				
2. Provide the following information about municipal operations go	ood housekeep	oing pro	gran	ns:				
Parking Lots Swept (Number of acres X Number of times swept)	# Acres			5				
• Streets Swept (Number of miles X Number of times swept)	# Miles		3	3				
Catch Basins Inspected and Cleaned Where Necessary	#	1	. 9	0				
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#			6				
O Phosphorus Applied In Chemical Fertilizer	#Lbs.							
O Nitrogen Applied In Chemical Fertilizer	#Lbs.							
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres of		•					
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?	1 0 / 2 0	/ 2 0	2	2				
5. How many municipal employees have been trained in this report	ing period?			5				
6. What percent of municipal employees in relevant positions and d stormwater management training?	epartments re	eceive	0	%				

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

	SPDES ID				
Name of MS4/Coalition Village of Stillwater	N Y R 2	0 A	5	4	7
2. Provide the following information about municipal operations	s good housekee	ping p	rogr	am	s:
O Parking Lots Swept (Number of acres X Number of times swept)	# Acres				
• Streets Swept (Number of miles X Number of times swept)	# Miles				8
• Catch Basins Inspected and Cleaned Where Necessary	#				2
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#				
O Phosphorus Applied In Chemical Fertilizer	#Lbs.				
O Nitrogen Applied In Chemical Fertilizer	#Lbs.				
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres [per of].[
3. How many stormwater management trainings have been prov	ided to municip	al emn	love	es	
during this reporting period?	r				3
4. What was the date of the last training?	10/20	/ 2	0	2	2
5. How many municipal employees have been trained in this repo	orting period?				1
6. What percent of municipal employees in relevant positions and stormwater management training?	d departments r	eceive	5 (0 9	%

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

	S	PDES ID					
Name of MS4/Coalition Town of Waterford		N Y R	2 0	A	0	3	7
2. Provide the following information about municipal operat	tions good	housek	eepin	g pr	ogr	am	s:
• Parking Lots Swept (Number of acres X Number of times swep	ot)	# Acr	es				3
• Streets Swept (Number of miles X Number of times swept)		# Mil	es			4	8
 Catch Basins Inspected and Cleaned Where Necessary 			#			1	8
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 			#				2
Phosphorus Applied In Chemical Fertilizer		# Lb	s.				0
Nitrogen Applied In Chemical Fertilizer		# Lb	s.		8	0	0
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.) 	Number of	# Acres			3 0]•[
3. How many stormwater management trainings have been p	provided t	o munic	ipal (emp]	loye	es	
during this reporting period?	•						1
4. What was the date of the last training?	0	2 / 1	7 /	2	0	2	3
5. How many municipal employees have been trained in this	reporting	period	•				6
6. What percent of municipal employees in relevant position stormwater management training?	s and depa	artment	s reco	eive	0	0 9	½

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID						
Name of MS4/Coalition Town of Wilton	N Y R	2 0	А	1	1	4	
2. Provide the following information about municipal operations go	od houseko	epinş	g pro	ogr	am	s:	
Parking Lots Swept (Number of acres X Number of times swept)	# Acr	es				4	
• Streets Swept (Number of miles X Number of times swept)	# Mile	es		3	8	4	
 Catch Basins Inspected and Cleaned Where Necessary 		#			4	6	
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 		#					
O Phosphorus Applied In Chemical Fertilizer	# Lb	s.					
O Nitrogen Applied In Chemical Fertilizer	# Lb	s					
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres].[
3. How many stormwater management trainings have been provided	d to munic	ipal e	mpl	oye	ees		
during this reporting period?						8	
4. What was the date of the last training?	1 0 / 2	0 /	2	0	2 2	2	
5. How many municipal employees have been trained in this reporting period?							
6. What percent of municipal employees in relevant positions and do stormwater management training?	epartment	s rece		0	0 9	%	

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

It submitting this form as part of a joint re	eport on behalf of a coalition leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition Town of Ballston	N Y R 2 0 A 1 5 7
7. Evaluating Progress Toward Measurable	
Use this page to report on your progress and projidentified in your Stormwater Management ProgIII.C.1. Submit additional pages as needed.	gram Plan (SWMPP), including requirements in Part
A. Briefly summarize the Measurable Goal id	dentified in the SWMPP in this reporting period.
The town will continue to track the metrics regardepartment is diligent in performing street/parking maintenance of Town-owned stormwater managements.	ing lot sweeping, catch basin cleaning and
B. Briefly summarize the observations that in Goal.	ndicated the overall effectiveness of this Measurable
The town has continued to track the metrics region yearly in October.	arding housekeeping practices. Training completed
C. How many times was this observation mea	
D. Has your MS4 made progress toward this	(ex.: samples/participants/ev. measurable goal during this reporting period?
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadl	
F. Briefly summarize the stormwater activities the next reporting cycle (including an implementation)	● Yes ○ No es planned to meet the goals of this MCM during lementation schedule).
The town has continued to track the metrics regidepartment will continue its program of street/p maintenance of Town-owned stormwater management.	parking lot sweeping, catch basin cleaning and

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

Name of MS4/Coalition Town of Charlton SPDES ID

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.

7123078468

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $ 2 $	0	2	3
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			SPDES ID
Name of MS4/Coalition	TOWN OF CLIFTON PARK		N Y R 2 0 A 0 3 5
7. Evaluating Pro	gress Toward Measurable Goals MC	M 6	
identified in your St	ort on your progress and project plans tormwater Management Program Plan (tional pages as needed.	_	_
A. Briefly summar	rize the Measurable Goal identified in	a the SWMPP in	n this reporting period.
Maintain all selecte	ed BMPs detailed in the Town of Clifton	n Park MS4 SWI	MP Plan.
B. Briefly summar Goal.	rize the observations that indicated th	ne overall effecti	iveness of this Measurable
A significant amount	nt of debris removed from the stormwa	ter system as a re	esult of maintenance.
C. How many time	es was this observation measured or o	evaluated in this	s reporting period?
C. How many time	ys was this observation measured or v		
D. Hag wayn MC4	mada muaguaga tawand this maasuuah	lo gool duwing 6	(ex.: samples/participants/ev
D. Has your MS4 I	made progress toward this measurab	ie goai during u	• Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set for	th in the SWM	
· ·	rize the stormwater activities planneding cycle (including an implementation		● Yes ○ No als of this MCM during
maintenance of the	ed BMPs detailed in the Town of Clifton town's streets and stormwater system. In ponds as time and manpower permits	Expansion of the	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

		SPL	DES	ID						
Name of MS4/Coalition	Town of Greenfield	N	Y	R	2	0	A	1	2	3

7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

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 24 miles of local roads, cleaned and improved roadside ditches on 7 roads and replaced 14 culvert structures in 2022.

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	
samp	les/	'part	ici	pant	s/events

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

Vec O	Nο

(ex.:

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

• Yes O No

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

The Town will continue to 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.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

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

		SPI	DES	ID						
Name of MS4/Coalition	Town of Halfmoon	N	Y	R	2	0	А	3	7	5

7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

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 402.51 miles of road swept with 71 cubic yards of debris collected. 22 catch basins were also cleaned out removing 14 cubic yards of debris.

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

The Town Highway Department reported on 402.51 miles of road swept with 71 cubic yards of debris collected; 22 catch basins were also cleaned removing 14 cubic yards of debris.

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

				1	
samp	les/	part	tici	pant	s/events

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

_		
	V_{ec}	\bigcirc No

(ex.:

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

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

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 12/31/2023.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

if sublifitting this form as part of a joint report on behalf of a	
Town of Malta	SPDES ID N Y R 2 0 A 0 8 6
Name of MS4/Coalition Town of Malta	N I K Z O A O O
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The Town will continue to work on training relevant staff, will he and will maintain inspection, cleaning and repair records. Stormwhighway staff is planned to be held every three years. Training for conducted on 3/31/2021.	water training for parks and
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
The Town conducted a self-assessment last reporting in 2021 and self-assessment no later than 2024. The Town revised its SWMP guidance to town staff on BMP's to use and to align the plan with undertaking. Training for parks and highway staff was held in 2021.	Plan in 2016 year to provide better initiatives the Town has been
C. How many times was this observation measured or evaluat	red in this reporting period?
,	(ex.: samples/participants/eve
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in the	he SWMPP?
	■ Yes □ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	9
The town will continue to work on training relevant staff, will conwill maintain inspection, cleaning and repair records. Stormwater spring of 2021 to parks and highway staff.	

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Name of MS4/Coalition	City of Mechanicville		NY	R 2 0 A 5	5 1
7. Evaluating Pro	gress Toward Measurable (Goals MCM 6			
identified in your St	ort on your progress and projormwater Management Progressional pages as needed.	-	_	_	Part
A. Briefly summar	rize the Measurable Goal id	lentified in the S	SWMPP in this	s reporting per	iod.
The measurable go	al tracked was the number of	municipal trainin	ng programs pr	ovided.	
B. Briefly summan Goal.	rize the observations that in	dicated the over	rall effectivene	ess of this Meas	urable
	es received training on Febru with a focus on illicit dischar			ll MS4 Minimur	m
C. How many time	es was this observation mea	sured or evalua	ted in this rep	orting period?	
					1
D. Has your MS4	made progress toward this	measurable goa	l during this r	(ex.: samples/par enorting period	_
20 21 10 3 0 0 1 10 2 0 1 1 1 2 0 1 1 1 1 2 0 1 1 1 1	progress to war a time		- v.vg v	• Yes	
E. Is your MS4 on	schedule to meet the deadl	ine set forth in t	the SWMPP?	• **	
-	rize the stormwater activition of the stormwater activition of the stormwater activities are storing and storing and storing are storing and storing are storing and storing are storing and storing are storing a	-	_	● Yes f this MCM du	○ No ring
The City plans to co	ontinue to provide training to	relevant employ	rees.		

This report is being submitted for the reporting period ending March 9, 2 0 2 3

		SPDES ID	
Name of MS4/Coalition City of Mecha	inicville	N Y R	2 0 A 5 5 1
7. Evaluating Progress Tow	vard Measurable Goals MCM 6		
1 0 1	r progress and project plans towar Management Program Plan (SWI es as needed.	•	· ·
A. Briefly summarize the M	easurable Goal identified in the	SWMPP in this rep	orting period.
The measurable goal tracked	is the # of yards of debris remove	d during street sweepi	ing activities.
D. Driefly summarize the ob	accompations that indicated the ex-	vanall affactivanass of	Ethis Massuvahla
Goal.	servations that indicated the ov	veran enectiveness of	tills ivieasurable
During this reporting cycle, s	treet sweeping removed a total of	147 yards of litter/del	oris
C H		41 : 41-:	
C. How many times was this	s observation measured or evalu	iated in this reportin	g period?
		(ex.	: samples/participants/events
D. Has your MS4 made pro	gress toward this measurable go	oal during this report	- ·
			● Yes ○ No
E. Is your MS4 on schedule	to meet the deadline set forth in	the SWMPP?	● Yes ○ No
· ·	ormwater activities planned to i	O	
The City will continue their s	treet sweeping program.		

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

		SPDES ID	٦
Name of MS4/Coalition	TOWN OF MILTON	N Y R 2 0 A 1 0 8	
7. Evaluating Prog	ress Toward Measurable Goals MCM 6		
identified in your Sto	ort on your progress and project plans toward ormwater Management Program Plan (SWM) ional pages as needed.		
A. Briefly summari	ze the Measurable Goal identified in the S	SWMPP in this reporting period.	_
1	curate records of municipal pollution prevent completion of annual MS4 report. Have imp		
B. Briefly summari Goal.	ze the observations that indicated the over	rall effectiveness of this Measurable	e
Record of PP/GH ac	tivities were available at the time of report c	ompletion.	
C. How many times	s was this observation measured or evalua	ted in this reporting period?	
Co 110 W many comics	o was this object which measured or evalua-		
		(ex.: samples/participan	l ts/events)
D. Has your MS4 m	nade progress toward this measurable goa	I during this reporting period? ● Yes ○ No	0
E. Is your MS4 on s	schedule to meet the deadline set forth in t		
		• Yes O No)
•	ze the stormwater activities planned to mong ng cycle (including an implementation scho	9	
_	ms found in SWMPP or in manner acceptabling procedures with responsible parties. To b		

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

If submitting the	s form as part of a joint report on behal	t of a coalition leave SPDE	S ID blank.
		SPDES ID	
Name of MS4/Coalition TOV	VN OF MOREAU	N Y R	2 0 A 1 5 8
7. Evaluating Progres	s Toward Measurable Goals MCM	16	
1 0 1	on your progress and project plans to water Management Program Plan (S al pages as needed.	<u> </u>	_
A. Briefly summarize	the Measurable Goal identified in	the SWMPP in this repo	orting period.
1	ds on forms found in SWMPP or in a nt Officer (SMO); implement all SO		e Town's
B. Briefly summarize Goal.	the observations that indicated the	overall effectiveness of	this Measurable
The receipt/keeping of a department.	records has kept pace with related ac	tivities with exception of	the Recreation
C. How many times wa	as this observation measured or ev	aluated in this reporting	g period?
			1
D. Has your MS4 mad	e progress toward this measurable		ing period? • Yes O No
E. Is your MS4 on sch	edule to meet the deadline set fortl	h in the SWMPP?	
	the stormwater activities planned to eycle (including an implementation		● Yes ○ No MCM during
	be conducted next reporting period, training on Good Housekeeping/Pol continue as planned.		

(i.e. Year-18, 2020 - 2021).

7123078468

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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	SPDES ID
Name of MS4/Coalition Village of Round Lake	N Y R 2 0 A 0 9 9
7. Evaluating Progress Toward Measurable Goals N	MCM 6
Use this page to report on your progress and project plantidentified in your Stormwater Management Program Plantic. 1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identifie	ed in the SWMPP in this reporting period.
The Village, as an automatically designated MS4 since of training, operations, and system inspection & mainte	
B. Briefly summarize the observations that indicated Goal.	d the overall effectiveness of this Measurable
The Village continues all applicable SOPs and BMPs reoperations, and maintenance. Each year all catch basin outlet points are inspected; general GH/P2 measures are such measures have been fully implemented.	is, system connectors (i.e. culverts), inlet and
C. How many times was this observation measured of	or evaluated in this reporting period?
	(ex.: samples/participants/e
D. Has your MS4 made progress toward this measur	SHANAGAN AND AND AND AND AND AND AND AND AND A
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set	forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planthe next reporting cycle (including an implementation)	ned to meet the goals of this MCM during
Village Public Works will conduct a Self-Assessment of from the Saratoga County/CCE Saratoga ISWM Progra	of all applicable operations with assistance am 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

This report is being submitted for the reporting period ending March 9, 2 0 2 3

		SPDES ID
Name of MS4/Coalition	Saratoga County, Department of Public Works	N Y R 2 0 A 2 0 9
7. Evaluating Pro	gress Toward Measurable Goals MCM 6	
identified in your S	oort on your progress and project plans towar tormwater Management Program Plan (SWN itional pages as needed.	rd achieving measurable goals MPP), including requirements in Part
A. Briefly summa	rize the Measurable Goal identified in the	SWMPP in this reporting period.
of potential SW Po	PP BMP implementation at DPW/County Fallutants; no fertilizer application and organical ainings; MS4 system inspections; etc.)	acilities (i.e. zero or limited exposure debris management of turf grass
B. Briefly summa Goal.	rize the observations that indicated the ov	verall effectiveness of this Measurable
Continuing: street/basin inspection/cl	road sweeping; BMPs at DPW Facilities were eaning program.	re maintained/implemented; catch
C. How many tim	nes was this observation measured or evalu	
		(ex.: samples/participants/eve
D. Has your MS4	made progress toward this measurable go	
E. Is your MS4 o	n schedule to meet the deadline set forth in	n the SWMPP? ● Yes ○ No
	arize the stormwater activities planned to the ting cycle (including an implementation so	
Continue MM6 Pr training 100% of I	rogram implementation. Resume employee to DPW employees on pollution prevention BM	raining program with the goal of IPs and policies.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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

	_	SPL)ES	ID						
Name of MS4/Coalition City of Saratoga Springs		N	Y	R	2	0	А	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 during 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/Audit of municipal facilities/operations was performed in March 2023.
- Pollution prevention training for DPW employees not provided due to covid gathering restrictions.

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

		3	6	5	
samp	les/	part	ici	pant	s/events

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

	V_{ac}	\bigcirc	No

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

Yes	\bigcirc 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.
- Next Self Assessment/Audit of municipal facilities/operations scheduled for March 2026.
- Training of DPW employees postponed due to Covid restrictions. Rescheduled to Spring 2023.
- 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,	2	0	2	3	

Name of MS4/Coalition South Glens Falls	SPDES ID N Y R 2 0 A 0 9 1				
7. Evaluating Progress Toward Measurable Goals MCM 6					
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.					
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.				
Work with town of Moreau and SCI Stormwater Program to offer Maintain MSD Sheets. Update materials inventory updated.	refresher courses for employees.				
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable				
Work with town of Moreau setting up training. Maintain all MSDS. Materials inventory updated.					
C. How many times was this observation measured or evaluate	ed in this reporting period? [ex.: samples/participants/events)				
D. Has your MS4 made progress toward this measurable goal	during this reporting period?				
E. Is your MS4 on schedule to meet the deadline set forth in th	● Yes ○ No ne SWMPP? ● Yes ○ No				
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	et the goals of this MCM during				
Using new GIS to map and inspect our catchbasins and storm water Use street sweeping forms. Continue to update MSD Sheets as needed. Materials inventory update as needed.	er system.				

N	1S4	Annual	Report	t Form

This report is being submitted for the reporting period ending March 9,	2	0	2	3
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Name of MS4/Coalition Town of Stillwater	N Y R 2 0 A 5 4 9
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The Town maintained records of the practices that were inspected amount of material that was removed. The Town maintained recoduring the reporting year.	_
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
The Town of Stillwater swept 33 miles of roadway and 72 yards construction practices were inspected and cleaned with the remov	
C. How many times was this observation measured or evaluat	ted in this reporting period?
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events, during this reporting period?
v k 0	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	<u> </u>
The Town of Stillwater will continue to maintain records in according form provided to the Highway Department will be updated compliance.	

This report is being submitted for the reporting period ending March 9,	2	0	2	3
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If submitti	ng this form as part of a Join	it report on behalf of a coal	ition leave SPDES ID blank.
Name of MS4/Coalition	Village of Stillwater		SPDES ID N Y R 2 0 A 5 4 7
	ogress Toward Measurab	ole Goals MCM 6	
identified in your St	oort on your progress and performwater Management Pitional pages as needed.		eving measurable goals including requirements in Part
A. Briefly summar	rize the Measurable Goa	I identified in the SWM	IPP in this reporting period.
	lwater has developed their ntenance of the Village ov		nt Plan (SWMP). Goals for ed in the plan.
A detailed reporting on activities outline	g form was established by ed in this report. The activ	the Village that the High	reffectiveness of this Measurable way Department uses to report managed and maintained by ds of debris was collected.
C. How many time	es was this observation n	neasured or evaluated in	n this reporting period?
			(ex.: samples/participants/eve
D. Has your MS4	made progress toward th	nis measurable goal dur	ing this reporting period?
			● Yes ○ No
E. Is your MS4 on	schedule to meet the de	adline set forth in the S	
<u> </u>	rize the stormwater activ	-	● Yes ○ No ne 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.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID
Name of MS4/Coalition Town of Waterford	N Y R 2 0 A 0 3 7
Traine of 1/12 is consistent.	
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The Town practices good housekeeping measures such as those lidentified in their Good Housekeeping/Pollution Prevention Plan.	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
The Town removed 4.5 cy of sediment from 14 catch basins, rebuculvert pipes, and flushed 8 culverts.	uilt 4 catch basins, replaced 11
C. How many times was this observation measured or evaluate	ted in this reporting period? (ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal	
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
The Town will continue to implement good housekeeping measur collection and conveyance system.	res and maintain their stormwater

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

		SPDES ID
Name of MS4/Coalition	Town of Waterford	N Y R 2 0 A 0 3 7
7. Evaluating Pro	gress Toward Measurable Goals MCM 6	
identified in your St	port on your progress and project plans toward tormwater Management Program Plan (SWM itional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the	SWMPP in this reporting period.
The Town trained I	DPW staff	
B. Briefly summar Goal.	rize the observations that indicated the ove	erall effectiveness of this Measurable
I .	training day for DPW staff, which was a ger nphasis on illicit discharge detection and elin	
C. How many time	es was this observation measured or evalua	ated in this reporting period?
D. Has your MS4	made progress toward this measurable goe	(ex.: samples/participants/events
D. Has your MS4	made progress toward this measurable goa	■ Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in	the SWMPP?
•		● Yes ○ No
•	rize the stormwater activities planned to ming cycle (including an implementation sch	8
The Town will con	tinue to maintain these stations, adding and re	eplacing them when necessary.

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Name of MS4/Coalition	Town of Waterford	N Y R 2 0 A 0 3 7
7. Evaluating Pro	gress Toward Measurable Goals MCM 6	
identified in your St	ort on your progress and project plans toward formwater Management Program Plan (SWMI tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the S	WMPP in this reporting period.
The Town maintain	as pet waste stations.	
B. Briefly summar Goal.	rize the observations that indicated the over	call effectiveness of this Measurable
The town replaced	5 pet waste stations and added 1, for a new tot	tal of 14.
C. How many time	es was this observation measured or evaluat	ted in this reporting period?
·		1 1 4
D. Has your MS4	mada nragrass taward this massurable goal	(ex.: samples/participants/events
D. Has your WIS4	made progress toward this measurable goal	• Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in t	he SWMPP?
		• Yes O No
·	rize the stormwater activities planned to me ing cycle (including an implementation sche	0
The Town will con	tinue to maintain these stations, adding and rej	placing them when necessary.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$

	SPDES ID
Name of MS4/Coalition Town of Wilton	N Y R 2 0 A 1 1 4
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Regularly inspect, clean, maintain and repair catch basins. Maintain perform good housekeeping practices. Determine sources of poll	
B. Briefly summarize the observations that indicated the over Goal.	call effectiveness of this Measurable
Catch basins cleaned, maintained or repaired. Facilities maintained	ed in good order.
C. How many times was this observation measured or evaluation	
	(ex.: samples/participants/events.
D. Has your MS4 made progress toward this measurable goal	9 2
E. Is your MS4 on schedule to meet the deadline set forth in t	● Yes ○ No
E. 18 your W154 on schedule to meet the deadline set forth in t	• Yes O No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	0
Town crews will continue to inspect catch basins on a regular on in a timely manner. Continue with educational training when available to the second	

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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 Ba	allston							N			2 0	А	1 5	5 7
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The information in the	his section	n is being	reporte	ed (ch	eck o	ne):									
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If Yes, choose one o															
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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 Charlton	N	Y	R	2	0	А	0	3	2
Name of MS4/Coalition Town of Charlton		ĭ	K		U	А	U	3	

Water Quality Trends

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

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

How many MS4s are contributed to this report?

1	

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

If Yes, choose one of the following

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

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

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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 Greenfield		N	Y	R	2	0	A	1	2	3

Water Quality Trends

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

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

How many MS4s are contributed to this report?

1

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

If Yes, choose one of the following

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

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

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This report is being submitted for the reporting period ending March 9, |2|0|2If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Y R 2 0 A Name of MS4/Coalition Town of Halfmoon **Water Quality Trends** The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. \bigcirc Yes No If Yes, choose one of the following O Report(s) attached to the annual report O Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page. URL URL URL URL

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Name of MS4/Coalition Town of Malta Y R 2 0 A **Water Quality Trends** The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. Yes No If Yes, choose one of the following Report(s) attached to the annual report Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page. URL URL URL URL

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

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MS4 Annual Report Form This report is being submitted for the reporting period ending March 9, 2If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID TOWN OF MILTON R Name of MS4/Coalition **Water Quality Trends** The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition 1 How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. O Yes No If Yes, choose one of the following O Report(s) attached to the annual report O Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page. URL URL URL

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

SPDES ID

Name of MS4/Coalition TOWN OF MOREAU

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	related to stormwater? If not, answer No and proceed to Minimum Control Measure One. Yes, choose one of the following Report(s) attached to the annual report Web Page(s) where report(s) is/are provided below																									
	Yes, choose one of the following Report(s) attached to the annual report Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home														-											
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Name of MS4/Coalition Village of Round Lake NYR2 0 A **Water Quality Trends** The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition 1 How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure O Yes No If Yes, choose one of the following O Report(s) attached to the annual report O Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page. URL URL URL URL

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \ 0 \ 2 \ 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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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, If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Town of Stillwater Ν YR 2 5 0 Α

9 Name of MS4/Coalition **Water Quality Trends** The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. O Yes No If Yes, choose one of the following O Report(s) attached to the annual report O Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page.

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This report is being submitted for the reporting period ending March 9, If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. YR 2 0 A 5 7 Village of Stillwater N Name of MS4/Coalition **Water Quality Trends** The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure O Yes No If Yes, choose one of the following O Report(s) attached to the annual report O Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page. URL

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

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This report is being submitted for the reporting period ending March 9, |2|0|2If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Y R 2 0 A Name of MS4/Coalition Town of Wilton **Water Quality Trends** The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. \bigcirc Yes No If Yes, choose one of the following O Report(s) attached to the annual report O Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page. URL URL URL URL