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MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2012

Name of MS4: Town of Clifton Park

SPDES ID: NYR20A035

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name: Saratoga County Intermunicipal

Partner/Coalition Name (con't.): Stormwater Mgt. Program

SPDES Partner ID - If applicable: NYR20006

Address: 50 West high Street

City: Ballston Spa

State: NY

Zip: 12020 -

eMail: brn52cornell.edu

Phone: (518) 885-9995

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

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

- ● MM1: Multiple tasks
- ● MM2: Multiple tasks
- ○ MM3:
- ○ MM4:
- ○ MM5:
- ○ MM6:

Additional tasks/responsibilities

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