1048119251

MS4 Annual Report Form

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

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

Name of MS4/Coalition ____

SPDES ID NYR20____

Minimum Control Measure 5. Post-Construction Stormwater Management

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

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

How many MS4s contributed to this report? ____

1. **How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?**

	# Inventoried	# Inspections	# Times Maintained
○ Alternative Practices			
○ Filter Systems			
○ Infiltration Basins			
○ Open Channels			
○ Ponds			
○ Wetlands			
○ Other			

2. **Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance?** ○ Yes ○ No

3. **What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?**

○ Building Codes ○ Municipal Comprehensive Plans

○ Overlay Districts ○ Open Space Preservation Program

○ Zoning ○ Local Law or Ordinance

○ None ○ Land Use Regulation/Zoning

○ Watershed Plans ○ Other Comprehensive Plan

○ Other: ____