MS4 Annual Report Cover Page

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

This cover page must be completed by the report prepare	۲.
Joint reports require only one cover page.	

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Choose one:

○ This report is being submitte	d on behalf of an individual MS4.
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Fill in SPDES ID in upper right hand corner.

Name of MS4

OR

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

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

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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 1

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 1

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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

- O An Annual Report for a single MS4
- O 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.

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

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Section 2 - Contact Information										

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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
- O 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 1

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- Report Preparer

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

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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."

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.

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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

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

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Name of MS4 Town of Binghamton	N	Y	R	2	0	A	0	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 acceptance of:

- O An Annual Report for a single MS4
- O 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 1

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MS4 Municipal Compliance Certification(MCC) Form MCC form for period ending March 9 2 0 2 1

MCC form for period end	ing March 9, 2 0 2 1
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If a new Duly Authorized Representative is signing provided and a signature authorization form, signed Elected Official must be attached.	
For each contact, select all that apply:	
O Principal Executive Officer/Chief Elected Official	
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MCC form for period ending March 9, 2 0 2 1

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

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Name of MS4 Town of Bignhamton	N Y R 2 0 A 0 0 9
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all pe	ermit requirements during this reporting
period?	○ Yes ○ No
If Yes, complete information below.	
Submit a separate sheet for each partner. Information provide accepted. If your MS4 cooperated with a coalition, submit on	
coalition. It is not necessary to include a separate sheet for ea	
If No, proceed to Section 4 - Certification Statement.	
Partner/CoalitionName	
Broome-TiogaStormwat	er Coalition
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
	N Y R 2 0
Address	
4 9 C o u r t S t r e e t S u i t	
	State Zip N Y 1 3 9 0 1 - 3 2 7 6
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eMail e m a s l i n @ s o u t h e r n t i e r 8	
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	lly Binding Agreement in accordance GP-0-08-002 Part IV.G.? ● Yes ○ No
What tasks/responsibilities are shared with this partner (e.g. MM	11 School Programs or Multiple Tasks)
• MM1 Multiple Tasks	
● MM2	
O MM3	
O MM4	
O IMINIT	
O MM5	
O MM6	
Additional tasks/responsibilities	
O Watershed Improvement Strategy Best Management Practice watersheds included in GP-0-08-002 Part IX.	es required for MS4s in impaired
,, acciding in order in order of the interest	

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

Nome of MS4 Town of Binghamton N V R 2 0		-				
Name of MS4	me of MS4 Town of Binghamton N Y R 2	0	A	0	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
E 1 i z a b e t h		R o u n d s
Title (Clearly print title of individual signing report)		
Supervisor		
Signature		
	,	
alinabeth a Kores	n ds	Date
July 1000 to 1100.		04///9/2021

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

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

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Name of MS4	Town of Chenango		• • • •		N	Y	R	2	0	A	1	2	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:

- O An Annual Report for a single MS4
- O 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 1

	<u>SPI</u>	<u>)ES</u>	ID						
Name of MS4 Town of Chenango	N	Y	R	2	0	A	1	2	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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MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$

		SPI	DES	ID						
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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
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

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Name of MS4 TOWN OF CHENANGO SPDES ID N Y R 2 0 A 1 2 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.
For each contact, select all that apply:
O Principal Executive Officer/Chief Elected Official
O Duly Authorized Representative
O Local Stormwater Public Contact
O Stormwater Management Program (SWMP) Coordinator
• Report Preparer
First Name MI Last Name
Alex
Fitle
Town Engineer
Address
1 0 6 Main St. Suite 4
City State Zip
W i n d s o r N Y 1 3 8 6 5 - N Y
eMail Alexeurdaengineering.com
Phone County

B r o o m e

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

Name of MS4 Town of Chenango	N Y R 2 0 A 1 2 7
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all permeriod?	nit requirements during this reporting Yes \(\rightarrow \) No
If Yes, complete information below.	.
Submit a separate sheet for each partner. Information provided i accepted. If your MS4 cooperated with a coalition, submit one s	
coalition. It is not necessary to include a separate sheet for each	
If No, proceed to Section 4 - Certification Statement.	
Partner/CoalitionName	
Broome Tioga Stormwate	<u> </u>
Partner/Coalition Name (con't.) G e o r g e B a s i l i a , S T E R P I	SPDES Partner ID - If applicable N Y R 2 0
Address	
Metrocenter, 49 Court	S t , S t e 2 2 2
City State B i n q h a m t o n N	te Zip Y
B i n g h a m t o n	1 1 3 9 0 1 = 3 2 7 4
g b a s i l i a @ s o u t h e r n t i e r 8	8 . o r g
Phone	Binding Agreement in accordance
/ C O 7 N O 4 O O 7 O O	-0-08-002 Part IV.G.?
What tasks/responsibilities are shared with this partner (e.g. MM1	School Programs or Multiple Tasks
• MMI Training/Educationa	alloutreach
• MM2 Event involvement	
O MM3	
O MM4	
O MM5	
O MM6	
Additional tasks/responsibilities	
O Watershed Improvement Strategy Best Management Practices	required for MS4s in impaired
watersheds included in GP-0-08-002 Part IX.	

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

	SPDES ID				
Name of MS4 Town of Chenango	N Y R 2	0 A	1	2	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."

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 Jo Anne	Ml	Last Name K lenovic
Title (Clearly print title of individual signing report)		
Town Supervisor		
Signature Dane Glenove	——	Date 0 4 / 2 6 / 2 0 2 1

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

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

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

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Name of MS4	Town of Conklin		N	Y	R	2	0	A	2	5	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:

- O An Annual Report for a single MS4
- O 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 1

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Name of MS4 Town of Conklin	N	Y	R	2	0	Α	2	5	5

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

- Principal Executive Officer/Chief Elected Official
- 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 anding March 9 2 0 2 1

MCC form for period ending March 9, 2 0 2 1
Name of MS4 TOWN OF CONKLIN SPDES ID N Y R 2 0 A 2 5 5
Section 2 - Contact Information
Important Instructions - Please Read
Contact information must be provided for <u>each</u> of the following positions as indicated below:
1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).
A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.
If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.
For each contact, select all that apply:
O Principal Executive Officer/Chief Elected Official
O Duly Authorized Representative
Local Stormwater Public Contact
O Stormwater Management Program (SWMP) Coordinator
O Report Preparer
First Name MI Last Name
Nick Pappas
Title
Code Enforcement Officer
Address
1 2 7 1 C o n k 1 i n R d State Zip
City State Zip C o n k 1 i n N Y 1 3 7 4 8 -
eMail
code@townofconklin.org

B|r|o|o|m|e

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

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Name of MS4 TOWN OF CONKLIN	N	Y	R	2	0	A	2	5	5

Section 2 - Contact Information

Important Instructions - Please Read

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

- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
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- 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
- Report Preparer

First Name	MI Last Name	
J o h n	Mastronardi	
Title		
Town Engineer		
Address		
1 3 S. Washingtor		
City	State Zip	
B i n g h a m t o n	N Y 1 3 9 0 3 -	
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MCC form for period ending March 9, 2 0 2 1

	SPDES ID
Name of MS4 Town of Conklin	N Y R 2 0 A 2 5 5
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all permit	•
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 she	
coalition. It is not necessary to include a separate sheet for each M	
If No, proceed to Section 4 - Certification Statement.	
Partner/CoalitionName	
	r Coalition
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
	N Y R 2 0
Address	
49 Court Street Suite	2 2 2 1
City State	Zip
B i n g h a m t o n	1 3 9 0 1 _ 3 2 7 6
eMail	
e m a s 1 i n @ s o u t h e r n t i e r 8 .	o r g
Phone Legally Bir	ding Agreement in accordance
	08-002 Part IV.G.? • Yes ○ No
What tasks/responsibilities are shared with this partner (e.g. MM1 Sc	hool Programs or Multiple Tasks)
what tasks/responsibilities are shared with this partner (e.g. whith se	mooi i rogiams of wintupic rasks)
• MM1 Multiple Tasks	
• MM2 Multiple Tasks	
MM2 Multiple Tasks	
O MM3	
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O MM5	
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Additional tasks/responsibilities	
Watershed Improvement Strategy Best Management Practices rec	uired for MS4s in impaired
watersheds included in GP-0-08-002 Part IX.	quired for the 15 in impaired
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MCC form for period ending March 9, 2 0 2 1

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Name of MS4	Town of Conklin		N	Y	R	2	0	A	2	5	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 W i 1 1 i a m	MI	Last Nam D u n	
Title (Clearly print title of individual signing report) S u p e r v i s o r			
Signature		-	
auel.	<u>-</u>		Date 0 4 / 1 6 / 2 0 2 1

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

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

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

		DES	ID						
Name of MS4 TOWN OF DICKINSON	N	Y	R	2	0	A	1	4	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:

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

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If Joint Report, enter coalition name:

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

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Name of MS4 Town of DICKINSON SPDES ID N Y R 2 0 A 1 4	3
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	2.c).
 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 filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.	
If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.	
For each contact, select all that apply:	
Principal Executive Officer/Chief Elected Official	
O Duly Authorized Representative	
O Local Stormwater Public Contact	
O Stormwater Management Program (SWMP) Coordinator	
O Report Preparer	
First Name MI Last Name	
MICHAEL MARINACCIO	
Title SUPERVISSOR	
	1

5 3 1 |0|1|d| |F|r|o|n|t||S|t|r|e|e|t| Zip State City 1 3 i i n 9 0 5 $T \mid o \mid w \mid n$ f D c k s o n NY 0 eMail COM 9 1 0 A OL MMA R Ι Phone County 6 0 7 7 2 3 _ 9 4 0 1 B|r|o|o|m|e

MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$ 1

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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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- 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 1

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Name of MS4 TOWN OF DICKINSON	N Y R 2 0 A 1 4 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-0-08-002 Part VI.J.

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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

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

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Name of MS4 Town of Fenton	N	Y	R	2	0	A	0	7	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
- O 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.

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Name of MS4 Town of Penton Section 2 - Contact Information Important Instructions - Please Read Contact information must be provided for each 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). Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form) The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c). The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP). 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
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 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
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provided and a signature authorization form, signed by the Principal Executive Officer or Chief
Elected Official must be attached.
For each contact, select all that apply:
Principal Executive Officer/Chief Elected Official
O Duly Authorized Representative
O Local Stormwater Public Contact
O Stormwater Management Program (SWMP) Coordinator
O Report Preparer
First Name G a r y J H o 1 c o m b J T H o 1 c o m b
Title Town Supervisor
Address
4 4 Park Street
City Port Crane NY 13833

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isor@townoffenton

(607)648-4800

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).
- 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 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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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
- O 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 1

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Section 3 - Partner Information														
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If Yes, complete information below.	in athan	farma	ta 1111il	Lno	t ha									
Submit a separate sheet for each partner. Information provided accepted. If your MS4 cooperated with a coalition, submit one														
coalition. It is not necessary to include a separate sheet for each														
If No, proceed to Section 4 - Certification Statement.														
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MCC form for period ending March 9, 2 0 2 1

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Gary J Hole	c o	m	b								
Title (Clearly print title of individual signing report)											
Town Supervisor									[
										<u> </u>	
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MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway Albany, New York 12233-3505

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

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Name of MS4 Town of Kirkwood		N	Y	R	2	0	A	0	7	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:

- O An Annual Report for a single MS4
- O 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, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$

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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:

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- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
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Section 2 - Contact Information

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

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Name of MS4 TOWN OF KIRKWOOD	N	Y	R	2	0	A	0	7	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.

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

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	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.																													
period?																										•	Ye	es	0	No
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 Broomme-Tiogga-Stormwate-CoalitionName Broomme-Tiogga-Stormwate-CoalitionName-Coaliti																														
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MCC form for period ending March 9, 2 0 2 1

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Name of MS4 Town of Kirkwood	N	Y	R	2	0	Α	0	7	2
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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."

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.

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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

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

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Name of MS4 TOWN OF OWEGO		N	Y	R	2	0	A	0	7	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:

- O An Annual Report for a single MS4
- O 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.

*
Name of MS4 TOWN OF OWEGO SPDES ID N Y R 2 0 A 0 7 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.
For each contact, select all that apply:
Principal Executive Officer/Chief Elected Official
O Duly Authorized Representative
O Local Stormwater Public Contact
O Stormwater Management Program (SWMP) Coordinator
O Report Preparer
First Name MI Last Name CASTELLUCCI
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Address
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City State Zip A P A L A C H I N N Y 1 3 7 3 2 _
Mail castellluccid@townofowego.com
County
(607)687_0123 TIOGA

MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix} = 1$

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

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Name of MS4 TOWN OF OWEGO	N Y R 2 0 A 0 7 9
Section 3 - Partner Information	
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If Yes, complete information below.	
•	Information provided in other formats will not be
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If No, proceed to Section 4 - Certification Sta	
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Partner/CoalitionName BROOME-TIOGAST	TORMWATER COALITION
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
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BINGHAMTON	NY 13901_
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Phone	Legally Binding Agreement in accordance
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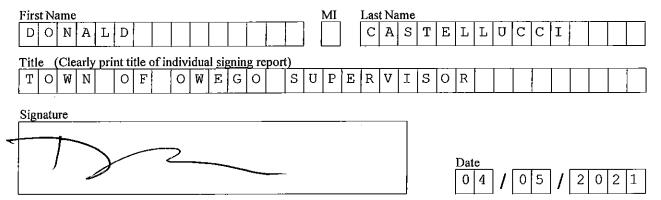
MCC form for period ending March 9, 2 0 2 1

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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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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

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

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Name of MS4 Town of Union	N	Y	R	2	0	Ά	0	5	0

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
- O 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.

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

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Name of MS4 Town of Union	N Y R 2 0 A 0 5 0
Section 2 - Contact Information	
Important Instructions - Please Read	
Contact information must be provided for each of the following posit	ions as indicated below:
 Principal Executive Officer, Chief Elected Official or other qualif GP-0-08-002 Part VI.J). 	ied individual (per
Duly Authorized Representative (Information for this contact mus Authorized Representative is signing this form)	t only be submitted if a Duly
3. The Local Stormwater Public Contact (required per GP-0-08-002)	Part VII.A.2.c & Part VIII.A.2.c).
 The Stormwater Management Program (SWMP) Coordinator (Independent and Coordination/Implementation of SWMP). 	lividual responsible for
5. Report Preparer (Consultants may provide company name in the s	pace provided).
A separate sheet must be submitted for each position listed above filled by the same individual. If one individual fills multiple roles, once and check all positions that apply to that individual.	
If a new Duly Authorized Representative is signing this report, the provided and a signature authorization form, signed by the Princip Elected Official must be attached.	
For each contact, select all that apply:	
 Principal Executive Officer/Chief Elected Official 	
O Duly Authorized Representative	
O Local Stormwater Public Contact	
O Stormwater Management Program (SWMP) Coordinator	
O Report Preparer	
First Name R I C H A R D MI Last Name M A T E Title	RESE

SUPERVISOR Address IN STREET 3 Е MA 1 1 1 Zip State City NY 3 7 6 ENDWELL 0 <u>eMail</u> SUPER OR @ TOWNOFUNION COM County Phone BROOME 2 9 9 5 6 0 8 6 –

MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

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Section 2 - Contact Information

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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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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 Nat	me								
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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

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

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Name of MS4 Town of Vestal	N	Y	R	2	0	A	0	6	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:

- O An Annual Report for a single MS4
- O 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.

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MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix} 1$

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Section 2 - Contact Information

Important Instructions - Please Read

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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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- Local Stormwater Public Contact
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- Report Preparer

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

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This form must be signed by either a principal executive officer or authorized representative of that person as described in GP-0-08-0	_			offic	cial	, or	du	ly	
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Title (Clearly print title of individual signing report)									
Town Supervisor									
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Date 0 4 1 0 5 1 2 0 2 1

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

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

MCC form for period ending March 9, 2 0 2

Name of MS4 Village of Endicott	SPDES ID N Y R 2 0 A 1 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 a	cceptance of:

- O An Annual Report for a single MS4
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Joint reports may be submitted by permittees with legally binding agreements.

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Section 2 - Contact Information	
Important Instructions - Please Read	
Contact information must be provided for <u>each</u> of the follow	wing positions as indicated below:
 Principal Executive Officer, Chief Elected Official or of GP-0-08-002 Part VI.J). 	her qualified individual (per
2. Duly Authorized Representative (Information for this co Authorized Representative is signing this form)	
3. The Local Stormwater Public Contact (required per GP-	
 The Stormwater Management Program (SWMP) Coordination/implementation of SWMP). 	
5. Report Preparer (Consultants may provide company nan	
A separate sheet must be submitted for each position list filled by the same individual. If one individual fills mult once and check all positions that apply to that individual	tiple roles, provide the contact information
If a new Duly Authorized Representative is signing this provided and a signature authorization form, signed by t Elected Official must be attached.	report, their contact information must be
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O Local Stormwater Public Contact	
O Stormwater Management Program (SWMP) Coordinator	
O Report Preparer	
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Name of MS4 Village of Endicott	PDES ID Y R 2 0 A 1 4 9
Section 3 - Partner Information Did your MS4 work with partners/coalition to complete some or all permit require	ments during this reporting
period?	● Yes ○ No
If Yes, complete information below.	
Submit a separate sheet for each partner. Information provided in other f	ormats will not be
accepted. If your MS4 cooperated with a coalition, submit one sheet with coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.	the coalition.
If No, proceed to Section 4 - Certification Statement.	
Partner/CoalitionName	
	Coalition
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Address	
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Phone Legally Binding Ag with GP-0-08-002	greement in accordance Part IV.G.? • Yes • No
What tasks/responsibilities are shared with this partner (e.g. MM1 School Partner)	rograms or Multiple Tasks)?
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MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 & 2 & 1 \end{vmatrix}$

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Section 4 - Certification Statement								
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MCC form for period ending March 9, 2 0 2 1

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Name of MS4 Village of Johnson City		7 7	7 F	<u>د ا ۽</u>	2	0 7	A .	l.	0	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:

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Name of MS4 Village of Johnson City SPDES ID N Y R 2 0 A 1 0 1
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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, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$

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	SPDES ID
Name of MS4 Village of Johnson City	N Y R 2 0 A 1 0 1
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all perm	uit requirements during this reporting
period?	● Yes O No
If Yes, complete information below.	
Submit a separate sheet for each partner. Information provided i	
accepted. If your MS4 cooperated with a coalition, submit one s	
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	
Broome-Tioga Stormwate	
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
	N Y R 2 0 C 0 0 2
Address	
4 9 Court St, Suite 2 2 2	<u> </u>
City	
B i n g h a m t o n N	Y 1 3 9 0 1 -
eMail	
Phone Legally 1	Binding Agreement in accordance
(6 0 7) 7 2 7 - 5 0 0 0 with GP-	-0-08-002 Part IV.G.?
What tasks/responsibilities are shared with this partner (e.g. MM1	School Programs or Multiple Tasks)
● MM1 Public Education an	ıd Outreach
• MM2 PublicInvolvementPa	rticipation
O MM3	
O MM4	
O MM5	
O MM6	
O MINIO	
Additional tasks/responsibilities	
O Watershed Improvement Strategy Best Management Practices	required for MS4s in impaired
watersheds included in GP-0-08-002 Part IX.	

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

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Name of MS4 Village of Johnson City		N	Y	R	2	0	A	1	0	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 Joshua	MI Last Name L H o 1 1 a n d
Title (Clearly print title of individual signing report)	
Director of Publ	lic Services
Signature	
- Pala 1	Date
Sa Margand	0 4 / 0 6 / 2 0 2 1

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

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

Signature Authorization Form

Date: 04/12/2021

Permittee Name: Village of Johnson City

SPDES NO. NYR20A101

Name of person described in paragraph (1):

Gregory W Deemie

Mayor

Signature of person described in paragraph (1):

Date:

4/12/2021

THE PERMITTEE MUST NOTIFY THE DEPARTMENT OF ANY CHANGE IN THIS INFORMATION. THIS FORM SHOULD ONLY BE SENT IN WITH THE ANNUAL REPORT.

Name and/or title of person responsible for signing and submitting official documents including reports, certifications or information required by the NYS Small MS4 General Permit:	Phone:									
Joshua L Holland Director of Public Services	607.797.3031									
Signature (if individual named above):		_								
SI Holland										
Mailing Address:	City:	State:	Zip:							
243 Main St.	Johnson City NY 13									
	·									

Return to:

MS4 Coordinator

Bureau of Water Permits

New York State Department of Environmental Conservation 625

Broadway

Albany, NY 12233-3505

^{*} Note: Notices of Intent (NOI) associated with permit coverage under the NYS Small MS4 General Permit must be signed by a principal executive officer or ranking elected official. See paragraph (1) for definition of a principal executive officer.

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

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Name of MS4 VILLAGE OF PORT DICKINSON		N	Y	R	2	0	A	0	8	0

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
- O 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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Section 2 - Contact Information														
Important Instructions - Please Read														
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 Principal Executive Officer, Chief Elected Official or other qualit GP-0-08-002 Part VI.J). 	fied individual (per													
 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 filled by the same individual. If one individual fills multiple roles once and check all positions that apply to that individual.														
If a new Duly Authorized Representative is signing this report, the provided and a signature authorization form, signed by the Princi Elected Official must be attached.														
For each contact, select all that apply:														
 Principal Executive Officer/Chief Elected Official 														
O Duly Authorized Representative														
O Local Stormwater Public Contact														
O Stormwater Management Program (SWMP) Coordinator														
O Report Preparer														
First Name MI Last Name KEVIN	F.													

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

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Name of MS	VILLAGE OF PORT DICKINSON		N	Y	R	2	0	A	0	8	0

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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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 1

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

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Name of MS4	VILLAGE OF PORT DICKINSON		И	Y	R	2	0	A	0	8	0

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 B U R K E
Title (Clearly print title of individual signing report) M A Y O R		
Signature Keun M. Banke		Date 0 4 / 2 0 / 2 0 2 1

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

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

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

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Name of MS4 BROOME COUNTY	N	Y	R	2	0	Α	3	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:

- O An Annual Report for a single MS4
- O 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, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$

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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).
- 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 1

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Name of MS4 BROOME COUNTY	N Y R 2 0 A 3 3 2
Section 2 - Contact Information	
Important Instructions - Please Read	
Contact information must be provided for <u>each</u> of the following po	ositions as indicated below:
1. Principal Executive Officer, Chief Elected Official or other qua GP-0-08-002 Part VI.J).	alified individual (per
2. Duly Authorized Representative (Information for this contact n Authorized Representative is signing this form)	nust only be submitted if a Duly
3. The Local Stormwater Public Contact (required per GP-0-08-0	02 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (coordination/implementation of SWMP).	Individual responsible for
5. Report Preparer (Consultants may provide company name in th	e space provided).
A separate sheet must be submitted for each position listed about filled by the same individual. If one individual fills multiple roonce and check all positions that apply to that individual.	
If a new Duly Authorized Representative is signing this report, provided and a signature authorization form, signed by the Prin Elected Official must be attached.	
For each contact, select all that apply:	
O Principal Executive Officer/Chief Elected Official	
O Duly Authorized Representative	
Local Stormwater Public Contact	
O Stormwater Management Program (SWMP) Coordinator	
O Report Preparer	
First Name MI Last Name	
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MCC form for period ending March 9, 2 0 2 1

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Name of MS4 BROOME COUNTY	N	Y	R	2	0	Α	3	3	2

Section 2 - Contact Information

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- O Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- O 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 1

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Name of MS4 BROOME COUNTY	 }	N	Y	R	2	0	A	3	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-0-08-002 Part VI.J.

First Name	МП	Last Name
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Title (Clearly print title of individual signing report)		
C O U N T Y E X E C U T I V	E	
Signature		Date () 3 / 1 7 / 20 D ()

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

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

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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

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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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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
- O Report Preparer

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

Name of MS4 Tioga County	SPDES ID N Y R 2 0 A 0 4 7
Section 4 - Certification Statement	
"I certify under penalty of law that this document and all attachment direction or supervision in accordance with a system designed to assuproperly gathered and evaluated the information submitted. Based of persons who manage the system, or those persons directly responsible the information submitted is, the best of my knowledge and belief, to aware that there are significant penalties for submitting false information and imprisonment for knowing violations." This form must be signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive officer or the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive of the signed by either a principal executive executive executive executive ex	sure that qualified personnel on my inquiry of the person or ble for gathering the information, true, accurate, and complete. I am nation, including the possibility of
authorized representative of that person as described in GP-0-08-00	
First Name MI Last Name M a r t h a C S a u e	r b r e y
Title (Clearly print title of individual signing report)	
Tioga County Legislatu	r e C h a i r
Signature Comarthu Saucilrei	Date 0 4 1 2 0 2 1

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

APPROVED
AS TO FORM BY
TIOGA COUNTY LAW DEPT

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

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

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

Name of MS4/Coalition BROOME-TIOGA STORMWATER COALITION	Name of MS4/Coalition	BROOME-TIOGA STORMWATER COALITION	
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No

Water Quality Trends

- 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.

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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Minimum Control Measure 1. Public Education and Outreach

The information in this	section is	being reported	(check one):
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- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

0 1 5

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 Pet Waste Management General Stormwater Management Information Recycling Household Hazardous Waste Disposal O Riparian Corridor Protection/Restoration Illicit Discharge Detection and Elimination ● Infrastructure Maintenance Trash Management O Smart Growth Vehicle Washing Water Conservation Storm Drain Marking Wetland Protection Green Infrastructure/Better Site Design/Low Impact Development Other: O None R O G R A M Ε Ρ I С K U l P 0 L ID W Α S T Other
- 2. Specific audiences targeted during this reporting period:
- Public Employees
- Contractors
- Residential
- Developers
- Businesses
- General Public
- Restaurants
- Industries
- Other:
- Agricultural

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

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Water From Rain public engagement efforts were conducted via radio ads, print material, Facebook, and the website. 629, 30 second, radio spots were run across three different channels. 168, 30 second, TV spots occurred across two stations.

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

The Water From Rain website (waterfromrain.org) received 1,257 pageviews, with 87.4% new users and 12.6% returning users. 106.7 FM and 100.5 FM have a combined 45,000 weekly listeners. 101.7 FM and 100.5 FM have a combined 35,000 weekly listeners. TV ads were projected to be seen 285,300 times, reaching 65,500 households.

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

1	2	5	7	

(ex.: samples/participants/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	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).

Will continue to undertake digital engagement efforts as in-person community events become available. Increasing social media presence and frequency of informational posts should assist in increasing site traffic and public knowledge.

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

Name of MS4/Coalition BROOME-TIOGA STORMWATER COALITION SPDES II N Y F	
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieving measure identified in your Stormwater Management Program Plan (SWMPP), including req III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this re	eporting period.
Tioga County met or exceeded all MCM I goals: Due to COVID, we could not he of our events in 2020. Tioga County Soil & Water Conservation District (TCSWC videos with 74,000 participants that focused on on Dairy Operations, regulations, I Practices that addressed stormwater principles/events. Contractor training sessions to a total of 48 attendees. Due to COVID. TCSWCD directed all of their 2020 independent.	CD) completed 5 Best Management s were conducted
B. Briefly summarize the observations that indicated the overall effectiveness Goal.	of this Measurable
No illicit discharges detected.	
	_
C. How many times was this observation measured or evaluated in this report	~
(6	ex.: samples/participants/event:
D. Has your MS4 made progress toward this Measurable Goal during this rep	oorting 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 the next reporting cycle (including an implementation schedule).	iis MCM during

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

Name of MS4/Coalition BROOME-TIOGA STORMWATER COALITION	N Y R 2 0 C 0 0 2
4. Evaluating Progress Toward Measurable Goals MCM	l
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SW III.C.1. Submit additional pages as needed.	2
A. Briefly summarize the Measurable Goal identified in the	e SWMPP in this reporting period.
Stormwater Management Program Plan was updated this past Town's recently established next generation website.	year and update is available on the
B. Briefly summarize the observations that indicated the o'Goal.	verall effectiveness of this Measurable
More convenient access to material	
C. How many times was this observation measured or eval	uated in this reporting period?
D. Has your MS4 made progress toward this Measurable C	ex.: samples/participants/events) Goal during this reporting period?
De Mar Jour Mar Minute progress to ward this Members and	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in	n the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to the next reporting cycle (including an implementation so	
Refer to Coalition Report	

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 BROOME-TIOGA SOTRMWATER COALITION N Y R	2	0	С	0	0	2
Minimum Control Measure 2. Public Involvement/Partici	<u>p</u> a	<u>ıtic</u>	<u>on</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 5 						
1. What opportunities were provided for public participation in implementation development, evaluation and improvement of the Stormwater Management (SWMP) Plan during this reporting period? Check all that apply:		-	rar	n		
● Cleanup Events #Event	s [3
O Comments on SWMP Received #Comment	s					
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O Storm Drain Markings #Drain	s	Ī				
O Stakeholder Meetings # Attendee	s [
O Volunteer Monitoring # Event	s					
Other: 1 4 , 5 6 7 trees sold	Ť	Ī		$\overline{\Box}$	ī	

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

● Yes ○ No

○ List-Serve	# In List			
O Newspaper Advertising	# Days Run			
O TV/Radio Notices	# Days Run		П	

Other: M u n i c i p a 1 m e e t i n g s
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 1 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 BROOME-TIOGA STORMWATER COALITION N Y R 2 0 C 0 0 2 2. URL(s) con't.: Please provide specific address(es) where notice(s) can be accessed - not home page. co W W W 0 B R 0 0 M E и и и TY C E M C s C $O \mid M$ В \mathbf{T} TS С В URL UN W W W С 0 G Α 0 \mathbf{T} Ÿ Ñ Y $C \mid O \mid M$ P R 0 G RAM S G E N С IE S M S 4 S Т ORMW A T E R M E M E Α Α N A G \mathbf{T} N URL URL URL URL

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

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

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Name of MS4/Coalition Broom-Tioga Stormwater Coalition

MS4 Annual Report Form

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

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

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 Fenton Y R 2 0 A N 0 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 \mathbf{T} f 0 w|n o F е n t 0 n Е 0 f f i n g C e Address 4 4 Ρ k S а r t r е е t City Zip Ρ t C 0 r NY 3 | 8 r an 1 3 3 е Phone 6 0 7 0 6 4 8 4 8 0 • Library Address O Annual Report SWMP Plan O Comments 2 1 0 6 C h e n o S t а n g t е City Zip В i n h 3 9 g a m t N Y 1 0 1 0 n Phone 6 O Other O Annual Report O SWMP Plan O Comments Address City Zip 0 Phone 0 0 Web Page URL: O Annual Report SWMP Plan O Comments o|w|n|of f e n t 0 n c o m Please provide specific address of page where report can be accessed - not home page. eMail O Comments i 0 t f f v u . р е r S 0 r 0 W n 0 e n t 0 n С o m

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

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4.a. If this report was made available on the internet, what date v	was it	po	sted?	•			
Leave blank if this report was not posted on the internet.	0	6	/ 0	2	/ 2	0	2 1
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	t 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	d?	/		0 Y / [es	○ No
If No, is one planned?					ОҮ	es	O No
5.b. Was an Annual Report public meeting held for all MS4s con	tribut	ting	g to tl	his 1	repor	t dı	ıring
this reporting period?					• Y	es	O No
If No, is one planned for each?					ОУ	es	O 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.					ОΥ	es	• No

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

Name of MS4/Coalition BROOME-TIOGA STORMWATER COALITION SPDES N Y	
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward achieving measured identified in your Stormwater Management Program Plan (SWMPP), including result. C.1. Submit additional pages as needed.	•
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
Tioga County met or exceeded most MCM 2 Goals: Stream Cleanup - 4 participants; Trees Planted by Trees for Tribs - 12 participant planted; Tree planting event - 12 participants and 100 trees planted; HHW progra properly disposed of 12.1 tons of household hazardous waste and F-Waste Program collected and properly disposed of 57.6 tons of electronic wast	m collected and
B. Briefly summarize the observations that indicated the overall effectiveness Goal.	s of this Measurable
No Illicit Discharges Detected	
C. How many times was this observation measured or evaluated in this repor	rting period?
D. Has your MS4 made progress toward this measurable goal during this rep	(ex.: samples/participants/event Dorting 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 the next reporting cycle (including an implementation schedule).	his MCM during

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

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

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	O Auto Recyclers	● Landscaping (Irrigation)																	
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This report is being submitted for the reporting period ending March 9, 2 0 2 1 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		PLDEP ID													
Name of MS4/Coalition CITY OF BINGHAMTON		N Y R 2	0 A 3	4 1											
3.b. What types of illicit discharges have	been found during this repor	ting period	?												
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• Cross Connections	O 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 Discharge	es													
O Other:															
4. How many illicit discharges/potentia reporting period?	uring thi	1													
5. How many illicit discharges have been	n confirmed during this repo	rting period	i?	1											
6. How many illicit discharges/illegal coperiod?	nnections have been eliminat	ed during t	his repor	ting											
7. Has the storm sewershed mapping be If No, approximately what percent was	-	<u> </u>	• Yes	O No											
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This report is being submitted for the reporting period ending March 9, 2 0 2 1

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

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 CITY OF BINGHAMTON NYR20A 3 4 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.
Updated outfall map and inventory. Update database of SWPPP's, Review IDDE Ordinance. Update City of Binghamton IDDE program manual. Investigated and eliminated all reported illicit discharge. Cleanup and inspected catchbasins. Updated list of non stormwater discharge. Implement educational measures through distribution of water bills and brochures.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Repaired 109 Drainage Structures, 53 manholes, 97 laterals 15, mains 31 headstones. installed 137 New (T-Seal Sanitary) Castings, 90 Clean-outs. Cleaned 1077 Drainage Structures. Flushed 198,456 FT. of Sewer Mains. Remove/Reset 134 Castings for DPW Paving. Televised Inspection 19,373.60 FT Sewer Main & 3,478.20 FT Laterals. Responded to 92 Complaints. Removed & Hauled - 4.6 T Debris Lift Stations, 458.89 T Drainage Structures to BC Landfill. Maintain 9 Combined Sewer OT's
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?
O 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 outfall reconnaissance inventory. Review of ordinance, catchbasins, cleaning, illicit discharge detention investigation, and installation of catchbasin markers will be ongoing. Training in IDDE for all staff. Continued to implement BMP's.

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

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 Binghamton	N Y R 2 0 A 0 0 9
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 t 	
1. Enter the number and approx. percent	nt of outfalls mapped: 2 5 # 1 0 0 %
2. How many of these outfalls have been reporting period (outfall reconnaissat	n screened for dry weather discharges during this nce inventory)?
3.a. What types of generating sites/sewers reporting period?	sheds were targeted for inspection during this
O Auto Recyclers	Landscaping (Irrigation)
■ Building Maintenance	○ Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	 Parking Lot Maintenance
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	Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	● Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
Other:	O None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 1$ 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 Binghamton	N Y R 2 0 A 0 0 9
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	O 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	al illegal connections have been detected during this
reporting period?	
	
5. How many illicit discharges have be	en confirmed during this reporting period?
•	onnections have been eliminated during this reporting
period?	
	een completed in this reporting period? • Yes • No
If No, approximately what percent was	s completed in this reporting period?
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This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 & 1 \end{bmatrix}$

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SPDES ID

Name of MS4/Coalition Town of Binghamton	N Y R 2 0 A 0 0 9
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
Measurable goal is to annually inspect at least 25% of the outfall identify and eliminate illicit discharges if found.	s during dry weather conditions and
B. Briefly summarize the observations that indicated the ove Goal.	rall effectiveness of this Measurable
Since the local IDDE Law was passed the Town has not detected	l any illicit discharges.
C. How many times was this observation measured or evalua	ted in this reporting period?
D. Has your MS4 made progress toward this measurable goa	(ex.: samples/participants/event
D. Has your WIS4 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
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sch	
Continue to do annual outfall inspections to identify illicit discharges and how they can and should be avoided.	
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This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 & 1 \end{bmatrix}$

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2. How many of these outfalls have been s reporting period (outfall reconnaissance)3.a. What types of generating sites/sewersher reporting period?	e inv	ven	tory)	?										his 0	0	0
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O Building Maintenance			rinas		,											
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O Commercial Laundry/Dry Cleaners	0	Par	king l	_ot :	Mai	nter	anc	ce								
O Construction Vehicle Washouts	0]	Pri	nting													
O Cross-Connections	0]	Res	sidenti	al C	Carv	vash	ung									
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O Food Processing Facilities	0;	Scł	nools a	and	Uni	vers	sitie	s								
O Garbage Truck Washouts	0	Sep	otic M	aint	ena	nce										
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

Name of MS4/Coalition	n Town of Chenengo		N Y R 2 0 A	A 1 2 7
12.Evaluating Pro	ogress Toward Measurable G	oals MCM 3		
identified in your S	port on your progress and proje Stormwater Management Progra litional pages as needed.	ct plans toward ac am Plan (SWMPP)	hieving measurable goa), including requiremen	ls s in Part
A. Briefly summa	rize the Measurable Goal ide	ntified in the SW	MPP in this reporting	period.
well as links to the Report Citizen Cor BTSC/STERPDB.	lischarges. The Town website re NYSDEC for complaint repormplaint Form. Have begun standard to the Chenango Heights sanitary spection of sewer mains for I&	ting and Town of orm sewershed/sys sewer area perfor	Chenengo "Illicit Disch stem mapping with m system mapping incl	arge
B. Briefly summa Goal.	rize the observations that ind	licated the overal	l effectiveness of this N	Aeasurable
No discharges four	nd.			
C. How many tim	nes was this observation meas	ured or evaluated	l in this reporting peri	od?
				1
D. Has your MS4	made progress toward this n	neasurable goal d	uring this reporting po	es/participants/even e riod? Yes ONo
E. Is your MS4 or	n schedule to meet the deadlin	ne set forth in the	SWMPP?	∕es ○ No
	rize the stormwater activities ting cycle (including an imple		the goals of this MCM	
	areas investigated and a log. P tershed map of areas contributi			outfalls.
				

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

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 Conklin	N Y R 2 0 A 2 5 5
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	t of outfalls mapped: 50# 100%
2. How many of these outfalls have been s reporting period (outfall reconnaissance	screened for dry weather discharges during this ce inventory)?
3.a. What types of generating sites/sewersh reporting period?	neds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
 Building Maintenance 	O Marinas
O Churches	O Metal Plateing Operations
 Commercial Carwashes 	 Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	 Parking Lot Maintenance
 Construction Vehicle Washouts 	O Printing
O Cross-Connections	O Residential Carwashing
Distribution Centers	Restaurants
O Food Processing Facilities	 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	Vehicle Maint./Repair Shops
Other:	○ None
O Sewersheds:	

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

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3.b.What types of illicit discharges have	e been 1	found d	luring	this	repoi	ting	g pe	erio	d?					
O Broken Lines From Sanitary Sewer	O Ind	lustrial C	Connect	tions										
O Cross Connections	O Infl	low/Infil	tration	ļ										
O Failing Septic Systems	O Pur	mp Statio	on Fail	lure										
O Floor Drains Connected To Storm Sewers	O San	nitary Se	wer O	verflo	ws									
O Illegal Dumping	O Stra	aight Pip	pe Sewo	er Dis	charg	es								
O Other:	• No	one												
4. How many illicit discharges/potentia	al illega	al conne	ections	s hav	e bee	n de	etec	ted	l du	ıriı	1g 1	his	,	
reporting period?														0
5. How many illicit discharges have be	en conf	firmed (during	g this	repo	rtin	ıg t	eri	iod'	?	į			0
2. How many ment discharges in ve oc	on com			8 ·····	- I		-8 F			-				
6. How many illicit discharges/illegal	onnect	tions ha	ve bee	en eli	mina	ted (dur	ing	g th	is 1	rep	ort	ing	
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7. Has the storm sewershed mapping b		-						od?	•		Ye	s	0	No
If No, approximately what percent wa	s compi	ieted in	this re	portii	ig pe	DOL	<i>:</i>							용
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SPDES ID N Y R 2 0 A 2 5 5
Name of M34/Coantron
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.
Measurable goal is to annually inspect a minimum of 25% of the outfalls during dry weather conditions and identify and eliminate illicit discharges if found.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Since the local IDDE Law was passed the Town has not detected any illicit discharges.
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).
Continue to do annual outfall inspections on a four year cycle to identify illicit discharges especially during dry weather conditions. Continue public outreach through the use of flyers and pamphlets explaining illicit discharges and how they can and should be avoided.

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

Name of MS4/Coalition TOWN OF DICKINSON	N Y R 2 0 A 1 4 3
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 tl 	
1. Enter the number and approx. percent	of outfalls mapped: 60# 100%
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)
■ 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	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	 Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	O None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 & 1 \end{bmatrix}$ 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 DICKINSON	N Y R 2	2 0 A 1	4 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		
O Failing Septic Systems	O Pump Station Failure		
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows		
O Illegal Dumping	O Straight Pipe Sewer Discharges		
Other: 4 How many illicit discharges/notentia	None I illegal connections have been detected d	Juring this	
reporting period?	i megai connections have been detected a		0
5. How many illicit discharges have bee	en confirmed during this reporting period	1?	0
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during th	his reporti	ing 0
7. Has the storm sewershed mapping be If No, approximately what percent was		• Yes	○ No 0 %
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Name of MS4/Coalition	TOWN OF DICKINSON		И	Y	R	2	0	A	1	4	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.

ILLICIT DISCHARGES FOUND. Measurable goal is to routinely inspect the outfalls during dry weather conditions and identify and eliminate illicit discharges if found.

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

FOUND ILLICIT DISCHARGES ARE TARGETD FOR ENFORCEMENT AND ELIMINATED AS SOON AS POSIBLE. None were found

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

1 3 6

(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).

ALL PUBLIC WORKS EMPLOYEES WILL BE DIRECTED TO LOOK FOR AND REPORT ALL ILLLICIT DISCHARGES

Continue to do annual outfall inspections to identify illicit discharges especially during dry weather conditions. Continue public outreach through the use of flyers and pamphlets explaining illicit discharges and how they can and should be avoided.

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 Fenton	N Y R 2 0 A 0 7 8
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported ((check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to t 	this report?
1. Enter the number and approx. percent	of outfalls mapped: 3 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?	eds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
■ Building Maintenance	○ Marinas
○ Churches	O Metal Plateing Operations
 Commercial Carwashes 	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	 Parking Lot Maintenance
● Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	O 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	Vehicle Maint./Repair Shops
Other:	● None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, 2 0 2 1 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 Fenton	SPDES ID N Y R 2	0 A 0	7 8
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	O 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		Τ
4. How many illicit discharges/potential reporting period?	l illegal connections have been detected d	uring this	0
5. How many illicit discharges have bee	en confirmed during this reporting period	?	0
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during th	nis reportin	ng
7. Has the storm sewershed mapping be If No, approximately what percent was			○ No 0 %
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This report is being submitted for the reporting period ending March 9, 2 0 2 1

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

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 Fenton N Y R 2 0 A 0 7 8
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.
Measurable goal is to annually inspect 25% of the outfalls during dry weather conditions and identify and eliminate illicit discharges if found.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Since the local IDDE Law was passed the Town has not detected any illicit discharges.
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).
Continue to do annual outfall inspections on a four year cycle to identify illicit discharges especially during dry weather conditions. Continue public outreach through the use of flyers and pamphlets explaining illicit discharges and how they can and should be avoided.

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

	SPDES ID
Name of MS4/Coalition Town of Kirkwood	N Y R 2 0 A 0 7 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 t 	his report?
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1. Enter the number and approx. percent	of outfalls mapped: 9 1 # 1 0 0 %
2. How many of these outfalls have been sereporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?
3.a. What types of generating sites/sewershoreporting period?	eds were targeted for inspection during this
● Auto Recyclers	● Landscaping (Irrigation)
 Building Maintenance 	O Marinas
Churches	 Metal Plateing Operations
 Commercial Carwashes 	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	 Parking Lot Maintenance
Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
Distribution Centers	Restaurants
 Food Processing Facilities 	 Schools and Universities
O Garbage Truck Washouts	Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	● Vehicle Fueling
Industrial Process Water	■ Vehicle Maint./Repair Shops
Other:	○ None
O Sewersheds:	

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

	SPDES ID
Name of MS4/Coalition Town of Kirkwood	N Y R 2 0 A 0 7 2
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	O 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
O Other:	● None
4. How many illicit discharges/potentia	al illegal connections have been detected during this
reporting period?	0
5 How many illigit discharges have been	en confirmed during this reporting period?
3. How many finch discharges have been	en continued during dis 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	<u> </u>
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

Name of MS4/Coalition Town of Kirkwood	N Y R 2 0 A 0 7 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 (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Measurable goal is to annually inspect all outfalls during dry weal eliminate illicit discharges if found.	ather conditions and identify and
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Since the local IDDE Law was passed the Town has not detected	any illicit discharges.
C. How many times was this observation measured or evalua	
D. Hag ways MC4 made maggings toward this maggingble good	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal	• Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in 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 to conduct annual outfall inspections to identify illicit of weather conditions. Continue public outreach through the use of illicit discharges and how they can and should be avoided.	

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

Name of MS4/Coalition TOWN OF OWEGO	SPDES ID N Y R 2 0 A 0 7 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?
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1. Enter the number and approx. percent	t of outfalls mapped:
2 How many of these outfalls have been	screened for dry weather discharges during this
reporting period (outfall reconnaissand	<u> </u>
3.a. What types of generating sites/sewersh	neds were targeted for inspection during this
reporting period?	ious word uniform for unspection during units
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	O 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	O 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, 2 0 2 1

	SPDES ID
Name of MS4/Coalition TOWN OF OWEGO	N Y R 2 0 A 0 7 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
4 Haw many illigit discharges/natential	lillage connections have been detected during this
reporting period?	l illegal 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	<u> </u>
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This report is being submitted for the reporting period ending March 9, 2 0 2 1

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

Name of MS4/Coalition TOWN OF OWEGO	N Y R 2 0 A 0 7 9
12. Evaluating Progress Toward Measurable Goals MCM	3
Use this page to report on your progress and project plans tow identified in your Stormwater Management Program Plan (SV III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the	he SWMPP in this reporting period.
The Town of Owego will inspect and clean a minimum of 28 basis	0 catch basins per year on a rotating
B. Briefly summarize the observations that indicated the Goal.	overall effectiveness of this Measurable
Catch basins are checked annually for damage and cleaning.	i
C. How many times was this observation measured or eva	duated in this reporting period?
	(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable	goał during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth	
F. Briefly summarize the stormwater activities planned to the next reporting cycle (including an implementation s	8
A new Stormwater Management Plan will be written and app	roved in 2021 for the 2021-2026 period

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

Name of MS4/Coalition Town of Union	SPDES ID N Y R 2 0 A 0 5 0												
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination												
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 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to t 	his report? 1												
1. Enter the number and approx. percent	of outfalls mapped: 37# 100%												
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O Auto Recyclers	O Landscaping (Irrigation)												
O Building Maintenance	O Marinas												
Churches	O Metal Plateing Operations												
O Commercial Carwashes	O 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 	Septic Maintenance												
O Hospitals	O Swimming Pools												
O Improper RV Waste Disposal	O Vehicle Fueling												
O Industrial Process Water	O Vehicle Maint./Repair Shops												
O Other:	O None												
O Sewersheds:													

This report is being submitted for the reporting period ending March 9, 2 0 2 1
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Name of MS4/Coalition Town of Union		SPDES ID NYR2	0 A 0 5 0
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3.b. What types of illicit discharges have			;
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O Cross Connections	O Inflow/Infiltration		
O Failing Septic Systems	O Pump Station Failu		
O Floor Drains Connected To Storm Sewers	Sanitary Sewer Over		
Illegal Dumping	O Straight Pipe Sewer	r Discharges	
Other: PumpPrivate	O None S e p t i c	systems	
4. How many illicit discharges/potentia reporting period?	l illegal connections	have been detected d	uring this
5. How many illicit discharges have been	en confirmed during	this reporting period	1?
6. How many illicit discharges/illegal coperiod?	onnections have been	n eliminated during ti	his reporting
7. Has the storm sewershed mapping be If No, approximately what percent was			O Yes ● No
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Name of MS4/Coalition Town of Union N Y R 2 0 A 0 5 0

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.

Code enforcement responds to complaints about dumping into stream channels and illegal dumping into storm system. New outfalls are mapped with new development. Stormwater markers have been obtained. New Catch Basin Covers are purchased with wording that drains to river.

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

Code enforcement have increased fire safety inspections for businesses and have looked for illegal discharges during inspections. Town participates in CRS program and checks certain choke points in streams periodically. Put in bid documents for lawn cutting that contractor cannot discharge cuttings into street. Previous offenders where not observed to be in violation this year.

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

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- D. Has your MS4 made progress toward this measurable goal during this reporting period?
- E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
- O 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).

Need to install more storm drain markers to make public aware that illegal dumping not permitted. Need to increase inspections.

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

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O Cross Connections	O Inflow/Infiltration													
O Failing Septic Systems	O Pump Station Failur	e												
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Ove	rflows												
O Illegal Dumping	O Straight Pipe Sewer	Discharges												
Other: O None Truck fuel tank accident spill														
4. How many illicit discharges/potentia	l illegal connections h	ave been	detec	eted o	lurii	ag t	his							
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7. Has the storm sewershed mapping be	_		_	od?		Ye	s	0	No					
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highway department.

MS4 Annual Report Form

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Name of MS4/Coalition Town of Vestal SPDES ID N Y R 2 0 A 0 6 4
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.
Advanced documentation/reporting and enforcement of Fats, Oil and Grease applications through Code Department. Continued sanitary manhole/sewer reporting form for sewer department and storm catch basin/manhole reporting form for Highway Department.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Improved tracking of sewer issues including private lateral repair/replacement and failing septic systems. More awareness of Fats, Oils and Grease for Code Department.
C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue IDDE training program for other Town Departments. Coordinate and improve documentation between highway, water/sewer, engineering department and code department with respect to our SWMPP. Improve inspection and documentation of outfalls (dry and wet weather).

Replace or install new catch basin markers in 2021 throughout Town through volunteer program and

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

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O Distribution Centers	○ Restaurants													
O Food Processing Facilities	O Schools and Universities													
O Garbage Truck Washouts	O 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:														

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O Floor Drains Connected To Storm Sewers	Sanitary Sewer Overflows													
O Illegal Dumping	Discharges													
Other:	O None													
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Name of MS4/Coalition	Village of Endicott		N Y R 2 0 A 1 4	9]
12. Evaluating Prog	gress Toward Measurable Goals M	(CM 3		
identified in your Sta	ort on your progress and project plans ormwater Management Program Plan tional pages as needed.	s toward achieving 1 (SWMPP), includ	measurable goals ling requirements in Par	rt
A. Briefly summar	ize the Measurable Goal identified	in the SWMPP in	ı this reporting period	l .
aware of Illicit Disc Village of Endicott	age of Endicott's Street and Water Do harges and know to notify their supe Code Enforcement works closely wit illage Code regarding illicit discharg	rvisors of any Illici th the Engineering	it Discharges. The	ļ
B. Briefly summar Goal.	ize the observations that indicated	the overall effecti	veness of this Measur	able
During the reporting The Village Street I	g year one illicit discharge was docur Department got involved and used the	nented, it was a Sa e Vac Truck to alle	nitary Sewer Overflow viate the issue.	•
C. How many time	s was this observation measured o	r evaluated in this	reporting period?	10.10 TO TO TO TO TO TO TO TO TO TO TO TO TO
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			(ex.: samples/partic	ipants/event
D. Has your MS4 r	nade progress toward this measura	able goal during tl	his reporting period? Yes) No
E. Is your MS4 on	schedule to meet the deadline set f	orth in the SWMI	PP? ● Yes C	No No
F. Briefly summar the next reporting	ize the stormwater activities plann ng cycle (including an implementa	ed to meet the goation schedule).	als of this MCM durin	g
The Village of Endi Illicit Discharges an	cott will continue to work on better of what to do when one is reported.	ways to train the es	sential employees on	
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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 1$

Naı	me of MS4/Coalition Village of Johnson City										SP N	T	S ID		0	A	1	0	1
	Minimum Control Measure 3.	<u> I</u>	(<u> </u>	<u>cit</u>	<u>Di</u>	iscl	hai	rge [<u>Det</u>	<u>ect</u>	<u>ior</u>	<u>a</u>	nd	Eli	<u>im</u>	<u>ina</u>	atio	<u>n</u>	
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YR 2 0 A 1 0 1 Village of Johnson City Name of MS4/Coalition 3.b. What types of illicit discharges have been found during this reporting period? O Broken Lines From Sanitary Sewer O Industrial Connections O Inflow/Infiltration O Cross Connections O Failing Septic Systems O Pump Station Failure O Floor Drains Connected To Storm Sewers O Sanitary Sewer Overflows O Straight Pipe Sewer Discharges O Illegal Dumping Other: None 4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 0 0 5. How many illicit discharges have been confirmed during this reporting period? 6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0 7. Has the storm sewershed mapping been completed in this reporting period? O No Yes If No, approximately what percent was completed in this reporting period? O Yes 8. Is the above information available in GIS? No Is this information available on the web? Yes O No If Yes, provide URL(s): Please provide specific address of page where map(s) can be accessed - not home page. URL i 1 £ jΙ h t t р S W W W а g е 0 C C o m 1 d J C on t e n t u р 0 а s W р C. S t rlmlw d f 0 а t е r Μ а ņ а е m n t а n g р URL

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Name of MS4/Coalition	n Village of Johnson City		N Y R 2 0 A 1	0 1
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12. Evaluating Pro	ogress Toward Measurable Goals	s MCM 3		
identified in your S	port on your progress and project p Stormwater Management Program l litional pages as needed.		_	Part
A. Briefly summa	rize the Measurable Goal identif	ied in the SWMPP	in this reporting peri	od.
Village daily; they	use, Street, Sanitary Sewer, and Wa rare trained to look for and notify so artment works closely with the DPV scharges.	supervisors of any il	llicit discharges. The C	
B. Briefly summa Goal.	rize the observations that indica	ted the overall effe	ctiveness of this Meas	urable
During the reporting	ng year, zero (0) illicit discharges v	vere documented.		
C. How many time	es was this observation measure	d or evaluated in tl	his reporting period?	
D. Han klassy MC4	made unequest toward this mean	muahla saal duuine	(ex.: samples/par:	
D. Has your MS4	made progress toward this meas	uranie goai uuring	g this reporting period • Yes	
E. Is your MS4 on	schedule to meet the deadline so	et forth in the SWN		O No
v	rize the stormwater activities pla ing cycle (including an implemer		● Yes goals of this MCM dur	○ No ing
_	ontinue to train employees to be awatify their supervisors as necessary.		rges during their daily	
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

Name of MS4/Coalition VILLAGE OF PORT DICKINSO	SPDES ID N Y R 2 0 A 0 8 0
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 t 	to this report?
1. Enter the number and approx. percen	nt of outfalls mapped: 30# 100%
reporting period (outfall reconnaissa: 3.a.What types of generating sites/sewers	n screened for dry weather discharges during this nce inventory)? 3 0 sheds were targeted for inspection during this
reporting period?	
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	○ Marinas
Churches	O Metal Plateing Operations
O Commercial Carwashes	 Outdoor Fluid Storage
Commercial Laundry/Dry Cleaners	 Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
Distribution Centers	○ Restaurants
O Food Processing Facilities	 Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	● Vehicle Fueling
● Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	O None
O Sewersheds:	

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MS4 Annual Report Form

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

YR 2 0 A 0 8 VILLAGE OF PORT DICKINSON Ν Name of MS4/Coalition 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 O 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 O Other: None 4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 0 0 5. How many illicit discharges have been confirmed during this reporting period? 6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0 7. Has the storm sewershed mapping been completed in this reporting period? Yes O No If No, approximately what percent was completed in this reporting period? 0 왐 8. Is the above information available in GIS? Yes O No Is this information available on the web? Yes O No If Yes, provide URL(s): Please provide specific address of page where map(s) can be accessed - not home page. URL i t b h t r 0 C b p О m е g S 0 r 0 0 m е n У u S i iln i b 1 £ e b s t. е b m u | C O o W r 0 0 е р р r р i е t m i е u n O а C ь L 0 0 0 0 S Α В Е L 0 & \mathbf{L} Α Υ \mathbf{E} R 0 0 0 0 0 0 0 0 0 0 1 1 0 1 0 0 0 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0

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Name of MS4/Coalition	VILLAGE OF PORT DICKINSON	N	Y	R	2	0	Α	0	8	0
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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

ILLICIT DISCHARGES FOUND. Measurable goal is to routinely inspect the outfalls during dry weather conditions and identify and eliminate illicit discharges if found.

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

FOUND ILLICIT DISCHARGES ARE TARGETD FOR ENFORCEMENT AND ELIMINATED AS SOON AS POSIBLE. None were found

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

1 4 6

(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).

THREE PUBLIC WORKS EMPLOYEES WILL BE DIRECTED TO LOOK FOR AND REPORT ALL ILLLICIT DISCHARGES.

Continue to do annual outfall inspections to identify illicit discharges especially during dry weather conditions. Continue public outreach through the use of flyers and pamphlets explaining illicit discharges and how they can and should be avoided.

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

	SPDES ID
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 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 to 	this report? 1
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O Auto Recyclers	● Landscaping (Irrigation)
Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	 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	Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
• Other:	O None
2 0 % C O U N T Y M S	4 R D S & F A C I L I T I E S
O Sewersheds:	

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

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

	SPDES ID
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 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.
MEASURABLE GOAL #3A To verify that 100% of County-odocumented, and inventoried within the MS4 boundaries, includi County-owned facilities. SWMP includes schedule to confirm material facilities.	ng those located at all
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
All of the outfalls within the County roadways (within the design and located using GPS equipment during the summer of 2013. To MS4 boundary have been mapped/surveyed which is up to date. And mapped and will continue to be reviewed and updated as need.	wenty-three (23) facilities within the A couple new features were located
C. How many times was this observation measured or evaluate	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 t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	_
During the summer of 2021, DPW staff will recheck the current youtfalls have been mapped, documented and inventoried.	year's boundary and ensure all

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

SPDES ID
Name of MS4/Coalition BROOME COUNTY N Y R 2 0 A 3 3 2
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.
MEASURABLE GOAL #3B To complete an outfall reconnaissance inventory and dry weather inspections of 20% of County-owned outfalls within the MS4 boundary annually.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Goal objectives have been met during this reporting year. During the 2020 summer season, DPW staff conducted dry weather inspections within Area #2, which is comprised of 187 outfalls.
C. How many times was this observation measured or evaluated in this reporting period?
187
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 inspection program as developed - by inspecting those outfalls in Area #3 (approximately 20%), including outfalls along County roads and at County facilities.

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SPDES ID
Name of MS4/Coalition BROOME COUNTY N Y R 2 0 A 3 3 2
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.
MEASURABLE GOAL #3C To enact appropriate legislation to address any deficiencies in the current County code to address and handle illicit discharge detection and elimination.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Broome County enacted a local law in the County Charter and Code. The local law was passed by the County legislature in October 2020 and a public hearing by the County Executive was held shortly after. The local law has been used to help remediate a routine illicit discharge from a local business.
C. How many times was this observation measured or evaluated in this reporting period?
1
(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 SWMPP identifies that this local law/regulation will be established and enacted by Broome County. AN IDDE local law/regulation was developed using the model law from the Department. The local law was passed during the 2020-2021 reporting period. Throughout the upcoming reporting year, the local law will be utilized as much as needed.

applied/re-applied.

MS4 Annual Report Form

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

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	SPDES ID
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMPI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	VMPP in this reporting period.
MEASURABLE GOAL #3D To install (or reinstall) markers on storm drain CB's and DI's within the MS4 area; to be completed eaweather inspections (at a minimum).	a 100% of the County-owned ach year within areas of dry
B. Briefly summarize the observations that indicated the overa Goal.	ll effectiveness of this Measurable
During the 2020-2021 reporting period, the marker installation gos program priorities.	al was not met due to other
C. How many times was this observation measured or evaluate	ed in this reporting period?
D. Has your MS4 made progress toward this measurable goal	<pre>(ex.: samples/participants/events) during this reporting period?</pre>
1 8	○ 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	
Drain markers that were not installed in area #1 or #2 will be comp County staff will continue to re-install drain markers within areas year. In 2021, Outfall Area #3 will be inspected - markers will be	of dry weather inspections each

A GPS location will also be taken on the catch basin that is marked to track where markers are

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

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Name of MS4/Coalition	BROOME COUNTY			N Y R 2	0 A 3	3 2
12. Evaluating Pro	gress Toward Me	asurable Goals M	ICM 3			
Use this page to repidentified in your St III.C.1. Submit addi	tormwater Manage	ment Program Plan		_	-	Part
A. Briefly summan	rize the Measurab	le Goal identified	in the SWMPl	P in this repor	ting peri	iod.
MEASURABLE G and list it on the sto reporting of IDDE	orm water website.	This goal also inc	ludes creating c			ine
B. Briefly summar Goal.	rize the observation	ons that indicated	the overall effe	ectiveness of th	nis Meas	urable
There are several w fillable on-line form fillable form specified of the complaints / couple illicit dischar	n through Environr ically for reporting issues during 2020	mental Health (par IDDE on the Cou came in through t	t of the Health I nty's DPW Stor he Health Depar	Department) - the mwater webpag rtment. There v	here is a ge. Majoı	rity
C. How many time	es was this observ	ation measured o	r evaluated in t	his reporting]	period?	
				/a		3 2
D. Has your MS4	made progress tov	vard this measur:	able goal durin			ticipants/even ?
·	• 0			-	• Yes	
E. Is your MS4 on	schedule to meet	the deadline set f	orth in the SW	MPP?	• Yes	O No
F. Briefly summar the next reporti	rize the stormwate ing cycle (includin	_		goals of this M		
During this next repany complaints, and throughout the Cou	d to continue reach					
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Name of MS4/Coalition BROOME COUNTY SPDES ID N Y R 2 0 A 3 3 2
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.
MEASURABLE GOAL #3F To educate and inform 100% of Broome County staff about IDDE's - what they are, how to report them, and how to address them. This goal is cross referenced with coalition activities related to public education, but will be directed specifically to county employees.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
DPW staff have been working directly with facility managers to educate their staff regarding IDDE's, SPCC's, and good housekeeping. Several employee educational brochures have been developed relating to IDDE's and stormwater/MS4 in general. Due to COVID-19 in person trainings were not able to be done throughout the 2020-2021 reporting year.
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? • No • Yes
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • No • Yes
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
During the 2021-2022 reporting year, DPW staff will continue to distribute the IDDE and stormwater brochures and hopefully be able to hold in-person trainings to more specified groups of employees (custodial, fleet, etc.) to help cover work specific information. Continuing with special attention to new employees or existing employees in new positions.

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

Name of MCA/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3 3 2
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
12. Evaluating Progress Toward Measurable Goals MCM 3	
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.
MEASURABLE GOAL #3G To inform and educate businesses environmental impacts of illegal dumping, as well as chemical and encourage the use of BMP's to prevent and control these. This is treview process, which is an advisory capacity only.	d hazardous waste spills, and to
B. Briefly summarize the observations that indicated the overa	all effectiveness of this Measurable
Broome County Planning and Engineering staff continue to review reviews where BMP's are incorporated or included as advisory con appropriate. During the 2020-2021 reporting year, 103 reviews we staff and some standardized language was used in the responses.	mments to municipalities as
C. How many times was this observation measured or evaluate	ed in this reporting period?
	103
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 th	e 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
Continue these reviews as established, and to continue the outreach	h to municipal officials.

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

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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.

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Name of MS4/Coalition Tioga County		R 2 0 A 0 4 7
3.b.What types of illicit discharges hav	e been found during this reporting p	period?
O Broken Lines From Sanitary Sewer		
O Cross Connections	O Inflow/Infiltration	
O Failing Septic Systems		
O Floor Drains Connected To Storm Sewers		
O Illegal Dumping	O Straight Pipe Sewer Discharges	
Other:	● None	
4. How many illicit discharges/potenti reporting period?	ai megai connections nave been dete	cted during this
5. How many illicit discharges have be	een confirmed during this reporting	period?
6. How many illicit discharges/illegal operiod?7. Has the storm sewershed mapping between the storm of th	peen completed in this reporting per	0
If No, approximately what percent wa	s completed in this reporting period?	98
8. Is the above information available i Is this information available on the		Yes ○ NoYes ● No
If Yes, provide URL(s):		∪ res • No
Please provide specific address of page	e where map(s) can be accessed - not h	ome page.
URL		

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

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

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Name of MS4/Coalition Tioga County	N Y R 2 0 A 0 4 7
12. 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 (SWMI II.C.1. Submit additional pages as needed.	er), including lequilements in Fart
in.c.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Tioga County Public Works continues to follow the best manager	ment practices as defined in the
"Tioga County and Town of Owego Stormwater Management Pr	ogram Plan", which is effective
through 2020.	
No new catch basins or outfalls have been constructed or discove	ered since the last report.
	•
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
	no mulate d
All catchment basins were cleaned and any repairs needed were c	-
No illicit discharges were observed during biannual inspections of	or outraits.
C. How many times was this observation measured or evaluat	ted in this reporting period?
· · · · · · · · · · · · · · · ·	
Has your MS4 made progress toward this measurable goal	ex.: samples/participants/e
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 the	
7. D.:	• Yes • No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
Catchment Basins (55) and outfalls (6) will continue to be inspec	ted 2 time per year, once in the
spring and once in the fall.	
Γioga County will schedule street sweeping of its MS4 area of ju	risdiction on Pennsylvania Ave
with Town of Owego Highway Department per the intermunicipa	al agreement

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

Nar	ne of MS4/Coalition CTTY OF BINGHAMTON SPDES ID N Y R 2 0 A 3 4 1
	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?
3.	What percent of active construction sites were inspected during this reporting period? \bigcirc NT $\boxed{1\ 0\ 0\ }\%$
4.	What percent of active construction sites were inspected more than once? ONT 100%
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? • Yes • No • NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? • Yes • No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

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

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

,	SP:	DES ID											
Name of MS4/Coalition CITY OF BINGHAMTON	Ŋ	Y R	2 0 A	3 4 1									
5. con't.: Submit additional pages as needed													
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 1

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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

Goals: The city of Binghamton continued reviewing and updating the SWMP to show the SPDES General Permit GP-0-15-003 changes. Continued to review all SWPPP's and maintain a database of SWPPP's reviewed. The city stormwater web page includes the City of Binghamton SWMP for the public to have access. All construction sites requiring a SWPPP had been reviewed and approved.

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

NYSDEC SWPPP review checklist is utilized for all SWPPP reviews in accordance with newly developed SWPPP review practices. Development and associated stormwater documents are present to the public meetings. The SWPPP's approved are confirmed by weekly inspection with the assistance of outside companies and periodically inspected by the City of Binghamton.

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

(ex.: aamplea/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).

SWPPP review and database documentation will continue. Development projects will continue to be presented at public meetings. Inspections of all active projects for SWPPP compliance will continue. Pre-development meetings are held to meet with developers to discuss stormwater issues. Send more employees to SWPPP and illicit discharge classes/seminars.

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

		S	SPD	ES ID				
Nan	ne of MS4/Coalition Town of Binghamton		N	YR	2	0 A	0 0	9
	Minimum Control Measure 4. Construction Site Sto	<u>ormw</u>	<u>ate</u>	er Rı	uno	ff Co	<u>ntı</u>	<u>rol</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?							
	How many construction projects have been authorized for dis during this reporting period?	sturba	nce	s of a	ne a	acre o	r m	ore 0
	How many construction projects disturbing at least one acre during this reporting period?	were a	ıcti	ve in	you	r juris [sdic	tion 0
3.	What percent of active construction sites were inspected during	ng this	s re	porti	ng p	period	?	NT %
4.	What percent of active construction sites were inspected more	e than	on	ce?				NT %
5.	Do all inspectors working on behalf of the MS4s contributing Construction Stormwater Inspection Manual?	g to this	s re	eport • Y		the N		TN C
6.	Does your MS4/Coalition provide public access to Stormwater (SWPPPs) of construction projects that are subject to MS4 re				ova			is O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction public review?	projec	cts	- 1	U		e for	
	If Yes, use the following page to identify location(s) where SWPI	PPs car	n be	e acce	essec	1.		

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 & 1 \end{bmatrix}$ 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 Binghamton SPDES ID N Y R 2 0 A 0 0 9
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 developing procedures for review of SWPPP plans. Utilize NYS Construction Stormwater Inspection Manual for Site Inspections.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
SWPPP procedures ensures thorough review. Manual ensures thorough inspection.
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).
Review SWPPP plans in accordance with procedures and inspect construction sites according to manual.

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

Naı	me of MS4/Coalition Town of Chenengo SPDES ID N Y R 2 0 A 1	2 7
	Minimum Control Measure 4. Construction Site Stormwater Runoff Cont	<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?	
1.	How many construction projects have been authorized for disturbances of one acre or n during this reporting period?	nore
2.	How many construction projects disturbing at least one acre were active in your jurisdiduring this reporting period?	ction 3
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?	0 % O NT 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	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Pla (SWPPPs) of construction projects that are subject to MS4 review and approval? • Yes • O No	ns O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?	or O No
	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, 2 0 2 1 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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	SPDES ID
Name of MS4/Coalition Town of Chenengo	N Y R 2 0 A 1 2 7
7. Evaluating Progress Toward Measurable Goals MCM 4	
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 to develop and implement spreadsheet checklist of prenforcement actions.	rojects reviewed, inspected, and/or
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Inspections ongoing and reviews are conducted and logged. Staff	f are trained.
C. How many times was this observation measured or evaluat	red 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?
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheme)	-
Continue training staff on permit updates: continue to review, insp	pect, and document.

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

Naı	me of MS4/Coalition Town of Conklin SPDES ID N Y R 2 0 A 2 5 5
	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?
3.	What percent of active construction sites were inspected during this reporting period? \bigcirc NT $\phantom{aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa$
4.	What percent of active construction sites were inspected more than once? ONT 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 No
	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, $\begin{vmatrix} 2 & 0 & 2 & 1 \end{vmatrix}$ 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 MSA/Coolition Town of Conklin	SPDES ID N Y R 2 0 A 2 5 5
Name of MS4/Coalition Town or Conkin	N I R Z O R Z S S
7. Evaluating Progress Toward Measurable Goals MCM 4	
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.
Measurable goal is to inventory the number of SWPPP's received the number of sites and amount of times they are inspected.	l and reviewed. Also to document
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
All construction projects with disturbances of one or more acres land All active construction projects were inspected multiple times du	
C. How many times was this observation measured or evaluate	ted in this reporting period?
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D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events) 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 sche	
Continue to verify that all construction projects disturbing 1 or m in place, have stormwater permit coverage through DEC, and insproject at least once a month during construction.	

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

		5	SPDE	ES ID				
Nan	ne of MS4/Coalition TOWN OF DICKINSON		N I	YR	2 () A	1 4	3
	Minimum Control Measure 4. Construction Site St	<u>tormw</u>	<u>ate</u>	er Ru	<u>ınof</u>	f Co	<u>ntro</u>	<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.	How many construction projects have been authorized for diduring this reporting period?	isturba	nce	s of o	ne a	cre or	moi	0
2.	How many construction projects disturbing at least one acreduring this reporting period?	e were a	activ	ve in ;	your	· juris	dicti	on
3.	What percent of active construction sites were inspected dur	ring thi	s re	porti	ng p		0 0	NT] %
4.	What percent of active construction sites were inspected mor	re than	one	ce?		1	0 0	NT] %
5.	Do all inspectors working on behalf of the MS4s contributin Construction Stormwater Inspection Manual?	g to thi	is re	port ● Y		the N		NT
6.	Does your MS4/Coalition provide public access to Stormwat (SWPPPs) of construction projects that are subject to MS4 r				oval			
	If your MS4 is Non-Traditional, are SWPPPs of construction public review?	n proje	ects	made		ilable ○ Yes		No
	If Yes, use the following page to identify location(s) where SWI	PPPs ca	ın be	e acce	ssed	•		

This report is being submitted for the reporting period ending March 9, 2 0 2 1 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 DICKINSON	N Y R 2 0 A 1 4 3
6. con't.: Submit additional pages as needed.	
O MS4/Coalition Office	
Department	
TOWN HALLL	
Address	
City	Zip
DICKINSON NY	1 3 9 0 5 -
Phone	
(6 0 7) 7 2 3 - 5 9 5 4	
O Library	
Address	
City	7:5
City	Zip 0 - -
Phone	
O Other	
Address	
City	Zip 0
Phone	\
O Web Page URL(s): Please provide specific address where SWPPPs can	be accessed - not home page.
URL	
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

Name of MS4/Coalition TOWN OF DICKINSON N Y R 2 0 A 1 4 3
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.
THERE WERE NO SWPPPS RECEIVED. Measurable goal is to inventory the number of SWPPP'S received and reviewed. Also to document the number and amount of times construction projects are inspected.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
WE ARE PREPARED TO TAKE ACTION WHEN WE RECEIVE A PROJECT.
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).
REVIEW ANY SWPPP'S AND MAKE AVAILABLE FOR PUBLIC COMMENT Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place, have stormwater permit coverage through DEC, and inspect every active construction project at least once a month during construction.

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

Nar	spdes ID Town of Fenton N Y R 2	0 A 0	7 8
	Minimum Control Measure 4. Construction Site Stormwater Runo	ff Con	trol
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 disturbances of one a during this reporting period?	icre or n	nore 1
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisdi	iction 1
3.	. What percent of active construction sites were inspected during this reporting p	period?	O NT
4.	. What percent of active construction sites were inspected more than once?	1 0	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? ● Yes	the NYS	S ONT
6.	. Does your MS4/Coalition provide public access to Stormwater Pollution Preven (SWPPPs) of construction projects that are subject to MS4 review and approva • Yes		ns ONT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?	ailable fo O Yes	or O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	I.	

This report is being submitted for the reporting period ending March 9, 2 0 2 1 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 Fenton		NY	R	2	0 A	0	7	8
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Submit additional pages as needed.								
• •								
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Naı	ame of MS4/Coalition Town of Kirkwood N Y R 2 0	A 0	7 2
	Minimum Control Measure 4. Construction Site Stormwater Runoff	<u>Cont</u>	<u>rol</u>
Th	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 disturbances of one act during this reporting period?	re or m	ore 1
2.	How many construction projects disturbing at least one acre were active in your j during this reporting period?	jurisdi	ction 0
3.	. What percent of active construction sites were inspected during this reporting per	riod?	• NT
4.	. What percent of active construction sites were inspected more than once?		• NT 0 %
5.	. Do all inspectors working on behalf of the MS4s contributing to this report use the Construction Stormwater Inspection Manual?		O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention (SWPPPs) of construction projects that are subject to MS4 review and approval? ● Yes		ns O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available public review?		r O No
	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, $2 \mid 0 \mid 2 \mid 1$ 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, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

Name of MS4/Coalition	Town of Kirkwood		SPDES ID N Y R 2 0 A 0	7 2
7. Evaluating Prog	ress Toward Measurable Goals	s MCM 4		
identified in your Sto	ort on your progress and project pormwater Management Program I ional pages as needed.	_		'art
A. Briefly summari	ize the Measurable Goal identif	ied in the SWMPP in	n this reporting perio	od.
	to inventory the number of SWPF of sites and amount of times they		wed. Also to docume	ent
B. Briefly summari Goal.	ize the observations that indicat	ted the overall effect	iveness of this Measu	rable
There were no active	e construction sites during this re	porting period.		
C. How many times	s was this observation measured	d or evaluated in this	s reporting period?	
			(ex.: samples/part:	1
D. Has your MS4 n	nade progress toward this meas	urable goal during t	·	_
		4.0 41.1 41. (377)		○ No
E. Is your MS4 on s	schedule to meet the deadline so	et forth in the SWMI		O No
2	ze the stormwater activities plang cycle (including an implemen	_	als of this MCM duri	ng
in place, have storm	nat all construction projects disturtions are through E a month during construction.	_		PPP
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This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 \end{bmatrix}$

Nan	me of MS4/Coalition TOWN OF OWEGO SPDES ID N Y R 2	0 A 0	7 9
	Minimum Control Measure 4. Construction Site Stormwater Runo	ff Con	<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?		
1.	How many construction projects have been authorized for disturbances of one a during this reporting period?	icre or i	more 0
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 2
3.	What percent of active construction sites were inspected during this reporting p	period?	○ NT 0 %
4.	What percent of active construction sites were inspected more than once?	5	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? • Yes	the NY	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approva		ans O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?	ailable f O Yes	or O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	1.	

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

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 OWEGO	N Y R 2 0 A 0 7 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 (SWMI tional pages as needed.	-	
A. Briefly summar	ize the Measurable Goal identified in the S	SWMPP in this reporting period.	
to maintain NYS st	g goals from our SWMPP for MCM 4 are 1) a community or standards defined by the most recent ojects are open for review and comment.	_	
B. Briefly summar Goal.	rize the observations that indicated the over	erall effectiveness of this Measurable	
C. How many time	es was this observation measured or evaluat	ated in this reporting period?	
D. Has your MS4 1	made progress toward this measurable goal	(ex.: samples/participants/ al during this reporting period? ● Yes ○ No	/events
E. Is your MS4 on	schedule to meet the deadline set forth in t		
•	ize the stormwater activities planned to me	3	
A new Stormwater	Management Plan will be written and approve	ved in 2021 for the 2021-2026 period	

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

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

	SPDES ID		· - · · ·
Nan	ne of MS4/Coalition Town of Union N Y R 2	0 A 0	5 0
	Minimum Control Measure 4. Construction Site Stormwater Runo	ff Con	<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?		·
	How many construction projects have been authorized for disturbances of one during this reporting period?	acre or 1	more 1
	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 3
3.	What percent of active construction sites were inspected during this reporting	period?	O NT
4.	What percent of active construction sites were inspected more than once?	1 0	0 NT 0 %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? • Yes	the NY	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approva	d?	
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avenuable review?	○ No ailable f ○ Yes	ONT or ONo
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	d.	

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix} 2 \begin{bmatrix} 1 \end{bmatrix}$ 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 Union	N Y R 2 0 A 0 5 0
6. con't.: Submit additional pages as needed.	
MS4/Coalition Office	
Department	
Address 3 1 1 1 E Main Street	
City	Zip
E n d w e 1 1 N Y	1 3 7 6 0 -
Phone	
(6 0 7) 7 8 6 - 2 9 2 0	
O Library	·
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O Web Page URL(s): Please provide specific address where SWPPPs car	be accessed - not home page.
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This report is being submitted for the reporting period ending March 9, 2 0 2 1

If submitting this form as part of a joint report on behalf of a	a coalition le	eave SPDES ID blank.
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Name of MS4/Coalition Town of Union	NYRZ0A050
7. Evaluating Progress Toward Measurable Goals MCM 4	
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.
There was 1 project started this period- Fairmont Park Housing. Avenue and 3901 Country Club Road are still ougoing.	National Pipe & Plastic at 1 N. Page
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Inspection reports are reviewed weekly, repeat problems are additracking used for SWPPP. Sites inspected more than once. Com	
C. How many times was this observation measured or evalua	ted in this reporting period? 25 (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	● Yes ○ No eet the goals of this MCM during edule).
Need to increase staff training. Promote contractor training avail stormwater facilities during building inspections.	lability on website. Need to look at

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

	SPDES ID		
Nan	ne of MS4/Coalition Town of Vestal N Y R 2	0 A C	6 4
	Minimum Control Measure 4. Construction Site Stormwater Run	off Cor	<u>itrol</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?		
	How many construction projects have been authorized for disturbances of one during this reporting period?	acre or	more 1
	How many construction projects disturbing at least one acre were active in yo during this reporting period?	ur jurisc	liction 8
3.	What percent of active construction sites were inspected during this reporting	period?	$\overline{}$
4.	What percent of active construction sites were inspected more than once?	1 0	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report us Construction Stormwater Inspection Manual? • Yes	e the NY O No	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	al?	ans O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made as public review?	vailable i O Yes	for O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	∌d.	

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

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N 6M646 P2	Town of Vestal				SPDES ID N Y R	2 0 A 0	0 6 4
Vame of MS4/Coalition							
. Evaluating Pro	gress Toward M	easurable Goa	ls MCM 4				
Use this page to rep dentified in your St III.C.1. Submit addi	ormwater Manag	ement Program	plans toward Plan (SWMF	achieving PP), inclu	g measura ding requ	ble goals irements in	ı Part
A. Briefly summar	rize the Measura	ble Goal ident	ified in the S	WMPP i	in this rep	porting per	riod.
All development an engineering departrerosion and sedime	nent. All other de	velopment plan	is were reviev	wed for B			
B. Briefly summar Goal.	rize the observat	ions that indica	ated the over	all effect	tiveness o	f this Mea	surable
All SWPPP project Engineer. The Tow minor corrective ac noted on the submit	n Engineer and/o tions with site re	r engineering st presentatives if	aff visited ead	ch site pe	riodically	and discus	ssed
C. How many time	es was this obser	vation measur	ed or evaluat	 ted in thi	s reporti	ng period?	
					-		1 2
D. Has your MS4 1	nade progress t	oward this mea	surable goal	during		: samples/parting perio ● Yes	d?
E. Is your MS4 on	schedule to mee	et the deadline	set forth in t	he SWM	PP?		
F. Briefly summar the next reporti					als of thi	● Yes s MCM du	O No uring
Continue reviewing construction for con inspections report re Dept on building/ho erosion and sedime	nformance to SW epetitive issues the ousing projects, le	PPP and follow nat are not being	up with correge effectively a	ective act addressed	tions shou l. Coordin	ild SWPPP ate with Co	ode

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.

Name of MS4/Coalition	nTown of Fenton		N Y R 2 0 A	0 7 8
7. Evaluating Pro	ogress Toward Measurable Goals	MCM 4		
identified in your S	port on your progress and project pl stormwater Management Program F litional pages as needed.		-	
A. Briefly summa	rize the Measurable Goal identifi	ied in the SWMPP	in this reporting	period.
	Reviews nform public of ongoing activities and contractors on the construction re		ects	
B. Briefly summar Goal.	rize the observations that indicat	ed the overall effec	tiveness of this M	leasurable
Maintenance of ES Record Maintenance				
C. How many time	es was this observation measured	l or evaluated in th		od? 2 s/participants/events
D. Has your MS4	made progress toward this measu	urable goal during		
·				es O No
E. Is your MS4 on	1 schedule to meet the deadline se	et forth in the SWM	1PP? ● Y	es O No
J	rize the stormwater activities pla ing cycle (including an implemen	_		
	nd Sediment Control rrequirements Free Library) and address activity actor.			
				

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

Nar	ne of MS4/Coalition Village of Endicott SPDES ID N Y R 2 0 A 1 4 9
	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?
3.	What percent of active construction sites were inspected during this reporting period? \bigcirc NT $ \boxed{ 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?
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
	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, 2 0 2 1 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 Endicott	N Y R 2 0 A 1 4 9
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	nal pages as needed.	
● MS4/Coalition Off	fice	
Department		
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O Web Page URL(s):	Please provide specific address where SWPP	Ps can be accessed - not home page.
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This report is being submitted for the reporting period ending March 9, 2 0 2 1

Name of MS4/Coalition Village of Endicott	N Y R 2 0 A 1 4 9
7. Evaluating Progress Toward Measurable Goals MCM	14
Use this page to report on your progress and project plans to identified in your Stormwater Management Program Plan (SIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in	the SWMPP in this reporting period.
During this time period two projects continued under the pro Heights Project as well as the Central Endicott Drainage Pro	
B. Briefly summarize the observations that indicated the Goal.	e overall effectiveness of this Measurable
The Skye View Heights project had a Final SWPPP inspects Mayor signed the Notice of Termination for the project after Drainage Project was periodically inspected until completio WWTP Director. There were minor corrective actions that we corrected within a short time of the notification.	r proper review. The Central Endicott n by VOE Engineering as well as the
C. How many times was this observation measured or ev	valuated in this reporting period?
•	[ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable	e goal during this reporting period?
E. Is your MS4 on schedule to meet the deadline set fortl	• Yes O No h in the SWMPP?
F. Briefly summarize the stormwater activities planned to the next reporting cycle (including an implementation	
The Village of Endicott will continue to review projects to continue to require Best Management Practices be implement	
The state of the s	

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.

Naı	me of MS4/Coalition	Village of Johnson City		NYR2	0 A 1	0 1
	Minimum C	ontrol Measure 4. Construct	ion Site Storn	awater Runo	off Con	<u>trol</u>
The	e information in thi	is section is being reported (check one)):			
	On behalf of an ind On behalf of a coal How ma		? 1			
1.	How many cons during this repo	struction projects have been authorting period?	orized for distur	bances of one	acre or 1	more 1
2.	How many cons during this repo	struction projects disturbing at leaperting period?	ast one acre wer	e active in you	ır jurisd	iction 1
3.	What percent o	of active construction sites were in	spected during t	his reporting	period?	O NT
4.	What percent o	f active construction sites were in	spected more th	an once?	1 0	O NT
5.	_	rs working on behalf of the MS4s tormwater Inspection Manual?	contributing to	this report use • Yes	the NY	S ONT
6.	•	/Coalition provide public access to instruction projects that are subje		w and approva		ins Ont
	If your MS4 is lipublic review?	Non-Traditional, are SWPPPs of	construction pro	jects made av	ailable f ○ Yes	or O No
	If Yes, use the fo	ollowing page to identify location(s)	where SWPPPs	can be accessed	đ.	

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

6. con¹t.: Submit additional pages as needed. MS4/Coalition Office Department	Name of MS4/Coalition Village of Johnson City		N Y	R 2	0 A	1 0	1
Department							
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 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 SW	VMPP in this reporting period.						
During this period, one (1) project began that was under SWPPP, the project. Three (3) SWPPPs were closed out, these were Binghamto Project, UHS-Wilson Hospital Parking Lot Project, and the 530 Co.	on University School of Nursing						
B. Briefly summarize the observations that indicated the overal Goal.	ll effectiveness of this Measurable						
The projects had weekly SWPPP inspections by a NYS Licensed E Control Specialist and were periodically inspected by JC DPW per corrective actions required; all were corrected within a short time of	sonnel. There were minor						
C. How many times was this observation measured or evaluated	5 1						
D. Has your MS4 made progress toward this measurable goal d	(ex.: samples/participants/eventuring this reporting period? ■ 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	t the goals of this MCM during						
The Village will continue to review each project to determine if a S will also continue to require Best Management Practices be implem SWPPP.	<u> </u>						

This report is being submitted for the reporting period ending March 9, 2 0 2 1 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 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?	acre or i	more 0
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 0
3.	What percent of active construction sites were inspected during this reporting p	period?	● NT
4.	What percent of active construction sites were inspected more than once?		• NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use	the NY	S
	Construction Stormwater Inspection Manual? • Yes	O No	
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preven (SWPPPs) of construction projects that are subject to MS4 review and approved	1?	
		O No	ONT.
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?	O Yes	or O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	d.	

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

Name of MS4/Coalition VILLAGE OF PORT DICKINSON Name of MS4/Coalition VILLAGE OF PORT DICKINSON
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.
THERE HAVE BEEN NO SWPPPs RECEIVED. Measurable goal is to inventory the number of SWPPP'S received and reviewed. Also to document the number and amount of times construction projects are inspected.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
WE ARE PREPARED TO TAKE ACTION WHEN WE RECEIVE A PROJECT.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period?
● Yes ○ No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
• Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
REVIEW ANY SWPPP'S AND MAKE AVAILABLE FOR PUBLIC COMMENT Continue to verify that all construction projects disturbing 1 or more acres have an approved SWPPP in place, have stormwater permit coverage through DEC, and inspect every active construction project at least once a month during construction.

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

Naı	me of MS4/Coalition BROOME COUNTY N Y R 2 0 A 3 3 2
	Minimum Control Measure 4. Construction Site Stormwater Runoff Control
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.	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?
3.	What percent of active construction sites were inspected during this reporting period? \circ NT $\boxed{1\ \circ\ \circ}$ %
4.	What percent of active construction sites were inspected more than once? ONT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?
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 O No O NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? • Yes • No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

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

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	SPDES ID
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurab	le Goals MCM 4
	project plans toward achieving measurable goals rogram Plan (SWMPP), including requirements in Part
A. Briefly summarize the Measurable Goal	l identified in the SWMPP in this reporting period.
with contractors include appropriate erosion of from consultants or construction consideration	at 100% of County Contracts, both with consultants and control language - either requiring design considerations ons from contractors. This includes SWPPP's and other cuments as part of the legal contract, and language cts are in non-compliance.
B. Briefly summarize the observations that Goal.	t indicated the overall effectiveness of this Measurable
involve earth disturbance and the potential for disturbed. In addition to the standard notes as	g erosion control language in all contracts bid that r erosion and sedimentation, irregardless of the area dded to plans and specifications, the County added the nt" into our bid documents which are returned as part of reporting period.
C. How many times was this observation m	neasured or evaluated in this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward th	is measurable goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the dea	
F. Briefly summarize the stormwater activities the next reporting cycle (including an im-	● Yes ○ No ities planned to meet the goals of this MCM during aplementation schedule).
1 ***	ntinue to work with the Broome County Purchasing ojects have appropriate contractor erosion control notes

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

Name of MS4/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 4	
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.
MEASURABLE GOAL #4B To assure that 100% of County we contractor with appropriately trained staff (NYSDEC Erosion Concertification be provided prior to start of work, and that this trained moving operations.	ntrol Certified), that a copy of the
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Appropriate contract language has been inserted into contract doc County DPW projects required a SWPPP during this reporting pe	<u>-</u>
C. How many times was this observation measured or evaluat	ed in this reporting period?
	9
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	et the goals of this MCM during
Continue as developed and implemented - continue to ensure that erosion control training certificates for all projects with earth district stormwater impact.	

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

Name of MS4/Coalition BROOME COUNTY SPDES ID N Y R 2 0 A 3 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.
MEASURABLE GOAL #4C To assure that 100% of inspectors on 100% of County projects are either P.E.'s, CPESC's or trained and certified in erosion and sediment control.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Notices were sent to all consulting engineers that provide construction consulting services to the County that this would be a County requirement beginning in 2014. Additionally, all County DPW engineering staff are NYSDEC trained and certified or NYS licensed PE's.
C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this reporting period?
● Yes ○ No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue as developed and implemented - improve reporting / record keeping for this goal copies of certifications need to be copied to the MS4 files as well as to the individual project files.

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

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Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM) III.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
MEASURABLE GOAL #4D To have 100% of County staff wand construction types of projects for the County complete the 4-training for contractors. This includes (at a minimum), County F Crew chiefs who are responsible for directing construction activities.	-hour erosion and sediment control -lighway Superintendents and Field
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
All applicable DPW staff members are now certified (engineerin management, and buildings & grounds construction crew). A total are certified through this NYSDEC training.	
C. How many times was this observation measured or evalua	ted in this reporting period? [[] 1 [ex.: samples/participants/events]
D. Has your MS4 made progress toward this measurable goa	l during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation scho	
Continue as developed and implemented make sure that all nevertified, and make sure that all certified staff members are renev	w staff members are trained and wed every 3 years as needed.

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

	SPDES ID
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 4	
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.
MEASURABLE GOAL #4E To track and inspect 100% of Coand sediment control compliance at least once, irregardless of wh	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
100% of County sponsored projects are/were inspected and tracked whether they had a SWPPP or not. There were a total of 9 project this reporting period.	
C. How many times was this observation measured or evaluat	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 the	● Yes ○ No he SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	et the goals of this MCM during
Continue as developed and implemented - improve record keeping period.	g and collation during reporting

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

Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
7. Evaluating Progress Toward Measurable Goals MCM 4	
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.
MEASURABLE GOAL #4F To log and track 100% of compla County related to erosion and/or sedimentation issues, and tracking	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
There were three calls/complaints that came into the County this Highway projects. An updated tracking sheet was given to the Highway projected.	•
C. How many times was this observation measured or evaluat	ted in this reporting period? [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 the	he SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	et the goals of this MCM during
Continue as developed and implemented update program tracki Coordinate with highways to forward information to MS4 coordin	

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

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		 SPL	<u>)ES</u>	ID						
Name of MS4/Coalition	BROOME COUNTY	N	Y	R	2	0	Α	3	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.

MEASURABLE GOAL #4G -- To utilize the 239 review process for site plan and development review to incorporate consideration of potential water quality impacts and to ensure consistency with erosion and sediment control criteria in general, and potential impacts to County owned properties and infrastructure specifically.

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

103 total 239 reviews were reviewed by the Engineering Division for potential impacts to County properties and/or infrastructure. 22 projects with potential storm water related impacts were reviewed, and 12 had SWPPPs out of our jurisdiction. DPW has been working towards standard language for our review memos to include comments pertaining to stormwater management and the use of low impact development and green infrastructure.

C. Ho	w many times was	this observation	measured or evalua	ited in this re	eporting 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 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).

This process is ongoing and well established, and County staff will continue to perform these duties in accordance with the established SWMP goal and review criteria; however, we will look at better definition of how many 239 reviews deal with water quality issues and continue to improve the tracking spreadsheet in 2021.

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

Nan	me of MS4/Coalition Tioga County SPDES ID N Y R 2 0 A 0	4 7
	Minimum Control Measure 4. Construction Site Stormwater Runoff Con	<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?	
1.	How many construction projects have been authorized for disturbances of one acre or during this reporting period?	more
2.	How many construction projects disturbing at least one acre were active in your jurisd during this reporting period?	iction
3.	What percent of active construction sites were inspected during this reporting period?	● NT
4.	What percent of active construction sites were inspected more than once?	● NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the NY Construction Stormwater Inspection Manual? O Yes O No	S • NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Pl (SWPPPs) of construction projects that are subject to MS4 review and approval? O Yes O No	ans ● NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available public review? • Yes	for O No
	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, 2 0 2 1

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 Tioga County	N	Y	R	2	0	A	0	4	7
6. con't.:									
Submit additional pages as needed.									
MS4/Coalition Office									
Department Department									
Tioga County Public Wo	r	k	s						
Address									
4 7 7 R o u t e 9 6									
City Zi O w e g o N Y		8	2	7	_				
Phone		<u> </u>			L				ш
(607)687-0302									
O Library									
Address	1				- 1	_			
City				\neg	٦				
					-				
Phone									
O Other									
Address		. 1	1	1	- 1	- 1			
City	1 1	i 1		\neg	Г		_		
					-				
Phone									
O Web Page URL(s): Please provide specific address where SWPPPs can be	acce	essec	1 - r	not	hor	ne p	oag	e.	
URL	1 1			- т	1	-		_	
URL			•						
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	† †				_				

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

R 2 0 A 0 4 7 Surable goals equirements in Part reporting period.
equirements in Part
equirements in Part
reporting period.
ss of this Measurable
orting period? O (ex.: samples/participants/event
porting period?
○ Yes ○ No ○ Yes ○ No
this MCM during
- ;]

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

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

	it submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.
	SPDES ID
Na	me of MS4/Coalition CTY OF BINGHAMTON NYR 2 0 A 3 4 1
	Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control
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 a	Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for
	Stormwater Discharges from Construction Activities? • Yes O No
1b	o. 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 O No O NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. ○ 09/2004 ○ 03/2006 ● NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No • NT
	If Yes, how many public comments were received during this reporting period?
5.	Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? • Yes • No

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	#	Ш		0	O No Authority
• Stop Work Orders	#			0	O No Authority
O Criminal Actions	#				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	
O Other	#				O No Authority

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

		_	SPDE	S ID			
Nar	ne of MS4/Coalition Town of Binghamton		ИЯ	R	2 0) A (0 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, mechanism that provides equivalent protection to the NY Stormwater Discharges from Construction Activities?				Pern		r
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 certification Analysis Workbook?	ter Mana	ageme	ent ai	nd E DEC	Crosio	n and
	If Yes, Towns, Cities and Villages provide date of equivalent		mple 1 09/200			v. /2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure	re in plac	æ?		(• Yes	○ No
3.	How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	n Plans (S	SWPI	PPs) i	have	e beer	0
4.	Does your MS4/Coalition have a mechanism for receipt a comments related to construction SWPPPs?	nd consid	lerati	on of ● Ye	_	olic O No	O 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		he loc Yes	

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
Criminal Actions	#		0	O No Authority
O Termination of Contracts	#			No Authority
O Administrative Fines	#			No Authority
• Civil Penalties	#		0	O No Authority
O Administrative Orders	#			O No Authority
O Enforcement Actions or Sanctions	#			
O Other	#			No Authority

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

Nar	ame of MS4/Coalition Town of Chenengo SPDES ID N Y R 2 0 A	1 2 7
	Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control	
Th	he 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	a. Has each MS4 contributing to this report adopted a law, ordinance or other regulate mechanism that provides equivalent protection to the NYS SPDES General Permit f Stormwater Discharges from Construction Activities?	or
1b	b.Has each Town, City and/or Village contributing to this report documented that the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Eros Sediment Control through either an attorney cerfification or using the NYSDEC Ga Analysis Workbook? • Yes • N	ion and p
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. © 09/2004 © 03/200	06 O NT
2.	. Does your MS4/Coalition have a SWPPP review procedure in place? • You	es O No
3.	. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	en 1
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? ● Yes ○ N	o ONT
	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 least SWPPP process? ● Yes	

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 Authori	ty
Stop Work Orders	#		0	O No Authori	ty
O Criminal Actions	#			O No Authori	ty
O Termination of Contracts	#			O No Authori	ty
O Administrative Fines	#			O No Authori	ty
O Civil Penalties	#			O No Authori	ty
O Administrative Orders	#			O No Authori	ty
O Enforcement Actions or Sanctions	#	-			
O Other	#			O No Authori	ty

SWPPP process?

MS4 Annual Report Form

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

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 Conklin	SPDES ID N Y R 2	0 A 2	5 5						
Minimum Control Measures 4 and Construction Site and Post Construction									
Construction Site and Post-Construction Control									
The information in this section is being reported (check one):									
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 									
1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?									
Storm value Substantial Constitution Reservation		J 105	0 110						
1b. Has each Town, City and/or Village contributing to this report of equivalent to a NYSDEC Sample Local Law for Stormwater Massediment Control through either an attorney certification or using Analysis Workbook?	anagement and	Erosion							
If Yes, Towns, Cities and Villages provide date of equivalent NYS	-	aw. 03/ 2 006	O NT						
2. Does your MS4/Coalition have a SWPPP review procedure in p	lace?	• Yes	O No						
3. How many Construction Stormwater Pollution Prevention Plans reviewed in this reporting period?	s (SWPPPs) ha	ve been	0						
4. Does your MS4/Coalition have a mechanism for receipt and concomments related to construction SWPPPs?	sideration of p ● Yes	ublic ○ No	ONT						
If Yes, how many public comments were received during this report	ing period?		0						

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

● Yes O No

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

Notices of Violation	#			0	O No Authority
Stop Work Orders	#			0	O No Authority
Criminal Actions	#			0	O No Authority
O Termination of Contracts	#				No Authority
O Administrative Fines	#				No Authority
O Civil Penalties	#				No Authority
O Administrative Orders	#		İ		No Authority
O Enforcement Actions or Sanctions	#				
O Other	#				No Authority

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

	0.000		-
	SPDES ID		
Nar	me of MS4/Coalition TOWN OF DICKINSON NYR 2	0 A 1	. 4 3
	Minimum Control Measures 4 and 5.		
	Construction Site and Post-Construction Control		
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, ordinance or other reg mechanism that provides equivalent protection to the NYS SPDES General Per	-	
	Stormwater Discharges from Construction Activities?	• Yes	O No
1b	Has each Town, City and/or Village contributing to this report documented that equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSDE Analysis Workbook?	Erosior	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La ○ 09/2004 ● 0	w. 3/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have reviewed in this reporting period?	ve been	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of procomments related to construction SWPPPs? • Yes	ıblic O No	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 SWPPP process?	_	al O No

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

O Notices of Violation	#	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	
O Other	#	0	O No Authority

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

		SP	DES ID					
Nar	ne of MS4/Coalition Town of Fenton	N	YR	2	0 A	0	7	8
	Minimum Control Measures 4 an Construction Site and Post-Construction		<u>ıtrol</u>					
Th	e information in this section is being reported (check one):							
00	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?				_	or	01	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?	Tanage	ment a	and DE	Eros	ion p		đ
	If Yes, Towns, Cities and Villages provide date of equivalent NYS	Sampl			aw. 03/200	16	10	NT
2.	Does your MS4/Coalition have a SWPPP review procedure in	place?			• Y	es	01	No
3.	How many Construction Stormwater Pollution Prevention Planewiewed in this reporting period?	ns (SW	PPPs)	ha	ve be	en		2
4.	Does your MS4/Coalition have a mechanism for receipt and cocomments related to construction SWPPPs?	nsidera	ation o	_	ublic O N	о_	10	٧T
	If Yes, how many public comments were received during this repo	rting pe	eriod?					0
5.	Does your MS4/Coalition provide education and training for coswPPP process?	ontract	tors at	out	the l		I	No

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

O Notices of Violation	#		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	
O Other	#	0	0	O No Authority

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

		SPDES ID		
Naı	me of MS4/Coalition Town of Kirkwood	N Y R	2 0 A 0	7 2
	Minimum Control Measures 4 and Construction Site and Post-Construction			
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, ordina mechanism that provides equivalent protection to the NYS SPD Stormwater Discharges from Construction Activities?			•
1b	.Has each Town, City and/or Village contributing to this report of equivalent to a NYSDEC Sample Local Law for Stormwater Market Control through either an attorney cerfification or using Analysis Workbook?	anagement a	nd Erosio DEC Gap	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS	-	l Law. ○ 03/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in p	lace?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Planereviewed in this reporting period?	s (SWPPPs)	have been	1
4.	Does your MS4/Coalition have a mechanism for receipt and concomments related to construction SWPPPs?	sideration o	-	O NT
	If Yes, how many public comments were received during this report	ing period?		0
5.	Does your MS4/Coalition provide education and training for cos SWPPP process?	ntractors ab	out the loc • Yes	al O No

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

Notices of Violation	#		0	O No Authority
• Stop Work Orders	#		0	O No Authority
Criminal Actions	#		0	O No Authority
O Termination of Contracts	#			No Authority
O Administrative Fines	#			No Authority
Civil Penalties	#		0	O No Authority
O Administrative Orders	#			No Authority
O Enforcement Actions or Sanctions	#			
O Other	#			No Authority

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

		SPDES L)			
Nan	ne of MS4/Coalition TOWN OF OWEGO	N Y I	2	0 A	0	7 9_
	Minimum Control Measures 4 and 5.	•				
	Construction Site and Post-Construction C	<u>ontro</u>	ļ		٠	
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, ordinance mechanism that provides equivalent protection to the NYS SPDES Stormwater Discharges from Construction Activities?			_	r	O No
1b	.Has each Town, City and/or Village contributing to this report doct equivalent to a NYSDEC Sample Local Law for Stormwater Manas Sediment Control through either an attorney cerfification or using Analysis Workbook?	gement the NY	and	Erosi	on a	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sam	iple Loc 9/2004		aw. 03/2006	5 (7 n C
2.	Does your MS4/Coalition have a SWPPP review procedure in place	e?		• Ye	s '	O No
3.	How many Construction Stormwater Pollution Prevention Plans (S reviewed in this reporting period?	WPPP:	s) ha	ve bee		0
4.	Does your MS4/Coalition have a mechanism for receipt and consider comments related to construction SWPPPs?		of pu Yes	ublic	, (TN C
	If Yes, how many public comments were received during this reporting	period?	ı		(0
5.	Does your MS4/Coalition provide education and training for contra SWPPP process?	nctors a	bout	the lo		○ N o

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	#	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	#	
O Other	#	O No Authority

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

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

		SPI	DES	S ID					_	
Name of MS4/Coalition Town	u) Union	N	Y	R	2	0	Α	0	5	0

Minimum Control Measures 4 and 5.

	Construction Site and Post-Construction Control	
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?	
la	. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?	O No
16	o. Has each Town, City and/or Village contributing to this report documented that the law equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. O 09/2004 O 03/2006	● NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	1
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No	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 loca SWPPP process? • Yes	l O No

6.	Identify which of the fo	ollowing typ	es of enfor	cement	actions you used during (the reporting
	period for construction	activities, i	indicate the	e numbe	er of actions, or note those	e for which you
	do not have authority:					
O N	lotices of Violation	#		ио Г	lo Authority	

0	Notices of Violation	#]	O No Authority
(1)	Stop Work Orders	#		1	O No Authority
O	Criminal Actions	#			O No Authority
0	Termination of Contracts	#			O No Authority
•	Administrative Fines	#			No Authority
0	Civil Penalties	#			O No Authority
О	Administrative Orders	#			O No Authority
Ö	Enforcement Actions or Sanctions	#			
•	Other	#		1	O No Authority

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

Nam	ne of MS4/Coalition Town of Vestal SPDES ID N Y R 2 0 A 0	0 6 4							
	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?								
1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? ● Yes ○ No									
1b.	.Has each Town, City and/or Village contributing to this report documented that the la equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosio Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? • Yes • No								
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. ○ 09/2004 ● 03/2006	O NT							
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	O No							
	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	8							
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No	O NT							
	If Yes, how many public comments were received during this reporting period?	0							
	Does your MS4/Coalition provide education and training for contractors about the loc SWPPP process? • Yes	cal O No							

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

Ø Notices of Violation	#		1	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	
O Other	#		0	O No Authority

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

		SPDES ID	in a service of the s	
Nan	me of MS4/Coalition Village of Endicott	NYR2	0 A 1	4 9
	Minimum Control Measures 4 and	<u>15.</u>		
	Construction Site and Post-Construction	<u>Control</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	a. Has each MS4 contributing to this report adopted a law, ordinal mechanism that provides equivalent protection to the NYS SPDI Stormwater Discharges from Construction Activities?			O No
1b	o. Has each Town, City and/or Village contributing to this report of equivalent to a NYSDEC Sample Local Law for Stormwater Ma Sediment Control through either an attorney cerfification or usi Analysis Workbook?	magement and	Erosion	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS S	-	aw. 03/2006	o nt
2.	Does your MS4/Coalition have a SWPPP review procedure in pl	lace?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans reviewed in this reporting period?	s (SWPPPs) ha	ve been	0
4.	Does your MS4/Coalition have a mechanism for receipt and conscomments related to construction SWPPPs?	sideration of p • Yes	ublic ○ No	O NT
	If Yes, how many public comments were received during this reports	ing period?		0
5.	Does your MS4/Coalition provide education and training for con-	ntractors abou	t the loca	ıl

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	#		 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

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

		SPDES ID)		
Nar	me of MS4/Coalition Village of Johnson City	N Y R	2	0 A 1	L 0 1
	Minimum Control Measures 4 and 5 Construction Site and Post-Construction				
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, ordinance mechanism that provides equivalent protection to the NYS SPDES Stormwater Discharges from Construction Activities?			_	-
1b	o. 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 using Analysis Workbook?	agement g the NY	and	Erosio	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sa	mple Loc 09/2004		aw. 03/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in pla	ce?		• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (reviewed in this reporting period?	SWPPPs) ha	ve been	1
4.	Does your MS4/Coalition have a mechanism for receipt and considerated to construction SWPPPs?		of pi Yes	ublic O No	O NT
	If Yes, how many public comments were received during this reporting	g period?			0
5.	Does your MS4/Coalition provide education and training for contra SWPPP process?	ractors a	bout	the loc • Yes	eal O No

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

O Notices of Violation	#		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	
O Other	#		0	O No Authority

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

		SPDES ID						
Nar	me of MS4/Coalition VILLAGE OF PORT DICKINSON	N Y R 2	0 A 0	8 0				
	Minimum Control Measures 4 and Construction Site and Post-Construction							
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, ordinand mechanism that provides equivalent protection to the NYS SPDES Stormwater Discharges from Construction Activities?			O No				
1b.Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? • Yes • No • NT								
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sa	-	aw. 03/2006	ONT				
2.	Does your MS4/Coalition have a SWPPP review procedure in pla	ice?	• Yes	O No				
3.	How many Construction Stormwater Pollution Prevention Plans (reviewed in this reporting period?	(SWPPPs) ha	ve been	0				
4.	Does your MS4/Coalition have a mechanism for receipt and considerated to construction SWPPPs?	deration of p	ublic O No	ONT				
	If Yes, how many public comments were received during this reporting	g period?		0				
5.	Does your MS4/Coalition provide education and training for cont SWPPP process?	ractors about	t the loca • Yes	ll O No				

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	#			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	
O Other	#			0	O No Authority

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

		SPD	ES ID						
Nar	ne of MS4/Coalition BROOME COUNTY	N	Y R 2	0 A 3	3 2				
Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control									
The information in this section is being reported (check one):									
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 									
	How many MS4s contributed to this report? []								
1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? • Yes • No									
	Stormwater Discharges from Construction Activities?			• 165	O NO				
1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap									
	Analysis Workbook?		O Yes	O No	• NT				
	If Yes, Towns, Cities and Villages provide date of equivalent NYS	S Sample		iw. 3/2006	• NT				
2.	Does your MS4/Coalition have a SWPPP review procedure in	place?		• Yes	O No				
3.	How many Construction Stormwater Pollution Prevention Pla reviewed in this reporting period?	ıns (SWP	PPs) hav	ve been	0				
4.	Does your MS4/Coalition have a mechanism for receipt and comments related to construction SWPPPs?	onsiderat	ion of pu ● Yes	ıblic O No	ONT				
	If Yes, how many public comments were received during this repo	orting per	iod?		0				
5.	Does your MS4/Coalition provide education and training for c SWPPP process?	contracto	rs about	the loca • Yes	l O No				

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

O Notices of Violation	#			0	O No Authority
O Stop Work Orders	#			0	O No Authority
O Criminal Actions	#				No Authority
O Termination of Contracts	#			0	O No Authority
O Administrative Fines	#				No Authority
O Civil Penalties	#				No Authority
O Administrative Orders	#			0	O No Authority
O Enforcement Actions or Sanctions	#			0	
O Other	#				O No Authority

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

Nam	ne of MS4/Coalition Tioga County SPDES ID N Y R 2 0	A 0	4 7					
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?							
1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?								
1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? ○ Yes ○ No ● NT								
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 09/2004 03/2	006	• NT					
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	Yes	O No					
	3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?							
	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • O	c No	ONT					
	If Yes, how many public comments were received during this reporting period?		0					
	Does your MS4/Coalition provide education and training for contractors about the SWPPP process?	e loca Yes	al O No					

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

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

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

				SPDES	<u>D</u>			
Name of MS4/Coalitio	7 [R 2 0 A 3 4 1						
Minimum Control Measure 5. Post-Construction Stormwater Management								
The information in t	his section is bein	ng reported (che	ck 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 Practice	ces	9	1 8	9				
O Filter Systems								
O Infiltration Basins								
O Open Channels								
O Ponds								
O Wetlands								
• Other		0	0	0				
 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 C	omprehensive P	lans					
O Overlay Districts O Open Space Preservation Program								
Zoning								
O None								
O Watershed Plans	O Other Compr	rehensive Plan						
O Other:								

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

		SPD	ES .	D_						
Nar	ne of MS4/Coalition CITY OF BINGHAMTON	N	Y	R	2	0	Α	3	4	1
4a.	. Are the MS4s contributing to this report involved in a regional/watersho	ed w	ide	pla	ınn	_	eff Ye			No
4b. Does the MS4 have a banking and credit system for stormwater management practices?										
						0	Ye	8		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'	?	Ν̈́o
4d.	How many stormwater management practices have been implemented a	s pa	rt o	f ti	his	8y81	tem	in	thi	S
	reporting period?								1	
5.	What percent of municipal officials/MS4 staff responsible for program i	_					itte	nde	d	
	training on Low Impace Development (LID), Better Site Design (BSD) and other Green Company of the Company of th								_	
	Infrastructure principles in this reporting period?					L	$oldsymbol{\perp}$	4	3	%

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

Name of MS4/Coalition CITY OF BINGHAMTON	SPDES ID N Y R 2 0 A 3 4 1								
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.									
Train inspection/enforcement personnel on post construction runoff regulations and inspection procedures. Perform inspections to ensure conformance with specifications. Continue to keep inventory of post construction stormwater practices.									
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.									
SWPPP inventory is used to track post construction stormwater practices. A post construction stormwater map has been created and will be updated as needed.									
C. How many times was this observation measured or evaluat	ted in this reporting period?								
	1								
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events) during this reporting period?								
2. Man Jour 1918, made by objects country and mensurance Bour	● Yes O 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 goals of this MCM during the next reporting cycle (including an implementation schedule).									
Train inspection personnel. Perform inspections when appropriate. Continue to track construction projects and post construction stormwater practices. Continue to develop and implement procedures for inspections, maintenance, and tracking of activities related to post-construction controls.									

P | 1 | a | n | n | i | n | g

MS4 Annual Report Form

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

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 Binghamton			SPDES II	
Minimum Control Measure 5. Post-Construction Stormwater Management					
The information in th	is section is bein	g reported (chec	ck 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	
O Alternative Practic	es	0	0	0	
O Filter Systems		0	0	0	
O Infiltration Basins		0	0	0	
Open Channels		0	0	0	
O Ponds		0	0	0	
O Wetlands		0	0	0	
O Other		0	0	0	
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				
O Overlay Districts	O Open Space Preservation Program				
● Zoning	● Local Law or Ordinance				
O None	■ Land Use Regulation/Zoning				
O Watershed Plans	O Other Compr	ehensive Plan			
Other:					

 $R \mid e \mid c \mid o \mid m \mid m \mid e \mid n \mid d \mid a \mid t \mid i \mid o \mid n$

Board

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

		SPD	es ij)							
Naı	ne of MS4/Coalition Town of Binghamton	N	YF	2	0	A	0	0	9		
4a	. Are the MS4s contributing to this report involved in a regional/watershe	d wi	ide p	lanı	_	eff Ye			No		
4b	. Does the MS4 have a banking and credit system for stormwater manager	men	t pra	ctic	es?						
					0	Ye	es		No		
4c	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?										
									No		
4d	. How many stormwater management practices have been implemented as reporting period?	s pa	rt of	this	sys [ten	ı in	thi 0	is		
5.	What percent of municipal officials/MS4 staff responsible for program in training on Low Impace Development (LID), Better Site Design (BSD) and					atte	nd	ed			
	Infrastructure principles in this reporting period?	•	_				2	5	%		

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

Name of MS4/Coalition Town of Binghamton	SPDES ID N Y R 2 0 A 0 0 9
6. Evaluating Progress Toward Measurable	Goals MCM 5
Use this page to report on your progress and pro- identified in your Stormwater Management Pro- III.C.1. Submit additional pages as needed.	oject plans toward achieving measurable goals gram Plan (SWMPP), including requirements in Part
A. Briefly summarize the Measurable Goal is	dentified in the SWMPP in this reporting period.
Continue to inventory, inspect and/or maintain practices.	any post-construction stormwater management
B. Briefly summarize the observations that it Goal.	ndicated the overall effectiveness of this Measurable
Stormwater ordinance allows enforcement. Inspections ensure compliance with regulations	S.
C. How many times was this observation mea	asured or evaluated in this reporting period?
D. Has your MS4 made progress toward this	(ex.: samples/participants/events measurable goal during this reporting period?
	● Yes ○ No
E. Is your MS4 on schedule to meet the dead	lline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activiti the next reporting cycle (including an imp	ies planned to meet the goals of this MCM during blementation schedule).
Continue to improve tracking, reviewing and in	spection procedures.

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

Name of MS4/Coalition	N	YR	2 0	A	1	2 7	7			
<u>Minimum</u>	Control Mea	asure 5. Pos	t-Constructio	on Stormwa	iter I	Man	ager	<u>ne</u>	<u>nt</u>	
The information in the	his section is bein	ng reported (che	eck one);							
On behalf of an incOn behalf of a coa	dividual MS4		· .							
1. How many and MS4/Coalition i	•		n stormwater ma intained in this re	_		has y	our			
		# Inventoried	#	# Times Maintained						
O Alternative Practic	ces		Inspections	Wantamed						
O Filter Systems	•				•					
O Infiltration Basins										
Open ChannelsPonds		2								
WetlandsOther										
o omer										
2. Do you use an o BMPs, inspecti			abase, spreadsl	neet) to track	post		truci O Ye		ı • N	Ja
3. What types of a Development/B	non-structural	practices hav		-	ow I1			3	• I	40
■ Building Codes	Municipal C	comprehensive 1	Plans							
Overlay Districts	O Open Space	Preservation Pr	ogram							
O Zoning	Zoning O Local Law or Ordinance									
O None	O Land Use R	egulation/Zonin	g							
O Watershed Plans	Other Comp	rehensive Plan								
Other:					T			\neg		

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

			SLL	ᄱᅅᇿ	,				
Nar	ne of MS4/Coalition Town of Chenengo		N	Y R	2	0 A	1 2	2 7	
4a.	. Are the MS4s contributing to this report involved in a regional/	/watersh	ed w	ide p	lann	_			
4h	. Does the MS4 have a banking and credit system for stormwater	r manage	emer	ıt ora	ctic	○ Y es?	es	● N	0
						ОΥ	es	• N	О
4c.	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?								
				-		OY	es	● N	0
4d.	. How many stormwater management practices have been imple reporting period?	mented a	ıs pa	rt of	this	system	n in	this	
	•								
5.	What percent of municipal officials/MS4 staff responsible for p						ende	d	
	training on Low Impace Development (LID), Better Site Design Infrastructure principles in this reporting period?	(пор) а	mu ()LIICI	GIE			0 9	%

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

Name of MS4/Coalition	Town of Chenengo		N Y R 2 0 A 1 2 7
6. Evaluating Pro	gress Toward Measurable Goa	als MCM 5	
identified in your St	oort on your progress and project tormwater Management Program itional pages as needed.	-	_
A. Briefly summar	rize the Measurable Goal ident	ified in the SWMP	P in this reporting period.
Staff continued im	prove inspection and maintenan	ce skills.	
B. Briefly summar Goal.	rize the observations that indic	ated the overall effo	ectiveness of this Measurable
Limited or no probl	lems annually.		
	•		
	<u> </u>		
C. How many time	es was this observation measur	ed or evaluated in 1	
			(ex.: samples/participants/eve
D. Has your MS4	made progress toward this mea	asurable goal durin	g this reporting period?
E Igworn MC4 on	a cahadula to most the deadline	got forth in the CW	● Yes ○ No
E. IS your MIS4 on	schedule to meet the deadline	set forth in the 5 w	• Yes ○ No
•	rize the stormwater activities p ing cycle (including an implem		goals of this MCM during
Continue to train en	mployees. Develop GIS and/or sp	preadsheet to track n	naintenance, practices, etc.
		· ·	

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.

SPDES ID

Name of MS4/Coalition Town of		N Y F	R 2 0	A 2	5 5		
Minimum Contr	rol Measure 5. Post	-Construc	tion Storm	water	Mana	geme	<u>ent</u>
The information in this secti	on is being reported (chec	ck one):					
On behalf of an individualOn behalf of a coalitionHow many M	MS4 S4s contributed to this	report?					
1. How many and what ty MS4/Coalition inventor	pe of post-construction ried, inspected and main		_	~	es has yo	our	
	# Inventoried	# Inspections	# Time Maintair				
O Alternative Practices							
● Filter Systems	1	1		1			
● Infiltration Basins	1			1			
Open Channels		1		1			
Ponds	5	5		1			
O Wetlands							
O Other							
2. Do you use an electro BMPs, inspections an		nbase, sprea	dsheet) to tr	ack pos		ructio Yes	on O No
3. What types of non-str Development/Better S	ructural practices have Site Design/Green Infr		-	nt Low 1	Impact		
O Building Codes • Mu	nicipal Comprehensive P	lans					
O Overlay Districts O Ope	en Space Preservation Pro	ogram					
○ Zoning • Loc	cal Law or Ordinance						
O None O Lan	nd Use Regulation/Zoning	5					
O Watershed Plans O Oth	er Comprehensive Plan						
Other: Planning	Board	R e c o	m m e n	d a t	io	n	

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

		SPI	DES	ID						
Name of MS4/Coalition Town of Conklin		N	Y	R	2	0	A	2	5	5
4a. Are the MS4s contributing to this rep	ort involved in a regional/watersh	ed v	vide	pla	ann	_	effo Yes		• 1	Νo
4b. Does the MS4 have a banking and cre	dit system for stormwater manag	eme	nt p	rac	tice	es?				
						0	Yes	5	1 •	No
4c. Do the SWMP Plans for each MS4 con and approval of banking and credit of	-	_				pr		ce?	1 •	Vо
4d. How many stormwater management	practices have been implemented a	as pa	art (of tl	his :	sysi	tem	in t	his	j
reporting period?									0	
5. What percent of municipal officials/M	· · · · · · · · · · · · · · · · · · ·	_					tten	ded	l	
training on Low Impace Development Infrastructure principles in this repor	, ,,	ınd (othe	er G	iree	en [2 5	5	%

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

Name of MS4/Coalition Town of Conklin	N Y R 2 0 A 2 5								
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.	achieving measurable goals PP), including requirements in Part								
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.									
Measurable goal is to document the number of post construction sinspected. Also to verify that the owner has conducted and docur construction stormwater management practice.									
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable								
After the post construction stormwater management practices were after heavy rainfall events and found no flood damage or migration downstream receiving waters.	re in place staff inspected them on of silt/sediment in/along the								
C. How many times was this observation measured or evaluat	ed in this reporting period?								
	8								
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	et the goals of this MCM during								
Continue to inspect post construction stormwater management praaccountable to maintain them. Also, to request and file annual maconstruction stormwater management practice.									

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.

		SPDES ID	1		
Name of MS4/Coalition	TOWN OF DICKINS	ON		N Y R	2 0 A 1 4 3
<u>Minimum</u>	Control Mea	sure 5. Post	-Constructio	on Stormwater l	<u>Management</u>
The information in the	his section is bein	g reported (chec	ck one):		
On behalf of an inOn behalf of a coaHow n		ributed to this I	report?		
1. How many and MS4/Coalition i				magement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces	0	0	0	
O Filter Systems		0	0	0	
O Infiltration Basins		0	0	0	
Open Channels		0	0	0	
O Ponds		0	0	0	
O Wetlands		0	0	0	
O Other		0	0	0	
, ,	ions and mainta	nance?		, <u>-</u>	● Yes ○ No
3. What types of a Development/E	Better Site Desig				прасі
Building Codes	Municipal Co	omprehensive Pl	ans		
O Overlay Districts	Open Space I	Preservation Pro	gram		
O Zoning	O Local Law or	Ordinance			
O None	O Land Use Re	gulation/Zoning			
O Watershed Plans	Other Compr	ehensive Plan			
Other:					

Recommendation

Воа

r d

| 1 | a | n | n | i | n | g

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

		SP	DES	עו						
Na	me of MS4/Coalition TOWN OF DICKINSON	N	Y	R	2	0	Α	1	4	3
4a	a. Are the MS4s contributing to this report involved in a regional/watersh	ied v	vide	pla	ann	_	eff Ye			No
4b	o. Does the MS4 have a banking and credit system for stormwater manag	eme	nt p	rac	tice	es?				
						0	Ye	S		No
4c	 Do the SWMP Plans for each MS4 contributing to this report include a and approval of banking and credit of alternative siting of a stormwate 	_								
						Ô	Ye	S		No
4d	l. How many stormwater management practices have been implemented reporting period?	as p	art (f tl	his	sys	tem	in	thi 0	s
5.	What percent of municipal officials/MS4 staff responsible for program training on Low Impace Development (LID), Better Site Design (BSD) a Infrastructure principles in this reporting period?	-					ittei	nde	ed 0	%

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

Name of MS4/Coalition	TOWN OF DICKINSON		SPDES ID N Y R 2 0 A 1	4 3
6 Evoluting Drog	gross Toward Massagable C	icola MCM 5		
6. Evaluating Prog	ress Toward Measurable G	oais MCM 5		
identified in your Sto	ort on your progress and proje ormwater Management Progra ional pages as needed.	-	-	Part
A. Briefly summari	ize the Measurable Goal ide	entified in the SWMP	P in this reporting per	riod.
_	o document the number of poonducted and documented ma		~	ify
B. Briefly summari Goal.	ze the observations that ind	licated the overall eff	ectiveness of this Meas	surable
NO ACTIVITY				
C. How many times	s was this observation meas	ured or evaluated in		0 rticipants/events)
D. Has your MS4 m	nade progress toward this m	neasurable goal durin		
E. Is your MS4 on s	schedule to meet the deadlin	ne set forth in the SW	MPP? ● Yes	O No
-	ze the stormwater activities ng cycle (including an imple	_	goals of this MCM du	
YEAR Continue to inspect p	THAT THERE WILL BE A	hold owner's /operator	s accountable to mainta	
them. Also, to reque	est and file annual maintenand	ce records from each p	ost construction BMP.	

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

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 Fenton			N Y R	2 0 A 0 7 8
<u>Minimum</u>	Control Mea	asure 5. Post	-Constructio	o <u>n Stormwater N</u>	<u>Management</u>
The information in the	his section is bei	ng reported (che	ck one):		
On behalf of an inOn behalf of a coaHow n		tributed to this	report?		
				nnagement practices eporting period?	has your
		#	#	# Times	
		Inventoried	Inspections	Maintained	
O Alternative Practic	ces				
O Filter Systems					
O Infiltration Basins					
Open Channels					
Ponds		1		1	
O Wetlands					
O Other					
2. Do you use an BMPs, inspecti		. •	abase, spreads	heet) to track post	-construction ○ Yes ● No
3. What types of Development/I		-		implement Low Ir nciples?	npact
O Building Codes	Municipal C	Comprehensive P	Plans		
Overlay Districts	Open Space	Preservation Preservation	ogram		
Zoning	• Local Law of	or Ordinance			
O None	● Land Use R	egulation/Zoning	g		
O Watershed Plans	Other Comp	rehensive Plan			
Other:	er De	v e lon	ment	Permit.	t i n a

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

	SF	DES	ID				_	
Nar	me of MS4/Coalition Town of Fenton	Y	R	2	0	A C	7	8
4a.	. Are the MS4s contributing to this report involved in a regional/watershed	wide	pla	nn	ing	effoi	t?	
					Ο	Yes		No
4b	. Does the MS4 have a banking and credit system for stormwater manageme	ent p	rac	tice	es?			
					0	Yes		No
4c.	. Do the SWMP Plans for each MS4 contributing to this report include a pro and approval of banking and credit of alternative siting of a stormwater m							
	and approval of banking and execut of internative bining of a coordinate in		5		_	Yes		No
4d	. How many stormwater management practices have been implemented as preporting period?	art (of t	his	syst	em i	n th	iis]
5.	What percent of municipal officials/MS4 staff responsible for program imp					tteno	led	
	training on Low Impace Development (LID), Better Site Design (BSD) and Infrastructure principles in this reporting period?	othe	er C	Free	en [0] %

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

Name of MS4/Coalition Town of Fenton SPDES ID N Y R 2 0 A 0 7 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.
Beer Tree Brewery Expansion NOI requires updating original to accommodate changes.
Fenton Free Library addition Engineering oversight during construction assessing ES&C
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Continued monitoring of activity at each site as part approval of New Site Plan Approvals and amending the existing and current NOIs.
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).
Inspect, approve or have corrected any Post Construction activity on completed projects. 2 projects are currently in the Construction Phase.

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

Name of MS4/Coalition	n Town of Kirkwood			N Y F	R 2 0 A 0	7 2
<u>Minimum</u>	Control Mea	sure 5. Post	-Constructio	on Stormwater	<u>Manageme</u>	<u>nt</u>
The information in the	his section is bein	ng reported (che	ck one):			
On behalf of an in○ On behalf of a coaHow n		ributed to this	report?			
1. How many and MS4/Coalition i				nagement practice eporting period?	es has your	
		#	#	# Times		
O Alternative Practic	ces	Inventoried	Inspections	Maintained		
O Filter Systems						
O Infiltration Basins						
Open Channels						
• Ponds		3	3	3		
O Wetlands						
O Other						
2. Do you use an BMPs, inspect			abase, spreads	heet) to track pos		ı 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	g			
O Watershed Plans	Other Comp	rehensive Plan				
Other:	i n a B	o a r d	Recom	m e n d a t	lion	

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

Naı	me of MS4/Coalition Town of Kirkwood N	DES Y	ID R	2	0 A	0	7	2
4a	. Are the MS4s contributing to this report involved in a regional/watershed	wide	pla	anni				
					O Y	es		No
4b	. Does the MS4 have a banking and credit system for stormwater manageme	ent p	rac	tice	s?			
					ΟY	es		No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a pro and approval of banking and credit of alternative siting of a stormwater m				prac		?	No
4d	. How many stormwater management practices have been implemented as preporting period?	art (of tl	his :	syste	m in	thi 0	S
5.	What percent of municipal officials/MS4 staff responsible for program imperaining on Low Impace Development (LID), Better Site Design (BSD) and Infrastructure principles in this reporting period?					tend 2	ed 5	%

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

Name of MS4/Coalition Town of Kirkwood SPDES ID N Y R 2 0 A 0 7 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.								
Measurable goal is tracking the number of post construction BMP's inspected and maintained. Also to verify that the owner has conducted and documented maintenance of the post construction BMP's.								
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.								
After the post construction BMP's were in place staff inspected them after heavy rainfall events and found no flooding or migration of silt/sediment in/around receiving waters.								
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).								
Continue to inspect post construction BMP's and hold owner's/operators accountable to maintain them. Also, to request and file annual maintenance records from each post construction BMP.								

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

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		NY	R	2 0	A	0	7 9			
<u>Minimum</u>	Control Meas	sure 5. Post	-Constructio	on Stormy	wate	er M	an	agei	<u>me</u> i	<u>nt</u>
The information in the	nis section is being	g reported (che	ck one):							
On behalf of an inOn behalf of a coaHow n		ibuted to this	report?							
1. How many and	•	t-construction	stormwater ma	_			ıas y	our'		
		#	#	# Times						
O Alternative Practic	200	Inventoried 0	Inspections 0	Maintaine	ea T					
O Filter Systems	.cs									
O Infiltration Basins			0							
Open Channels		0	0	0						
O Ponds		0	2	0	7					
O Wetlands		0	0	0	Ħ					
O Other		0	0	0	1					
2. Do you use an BMPs, inspection3. What types of the second s	ons and mainta	nance?		·	•		(⊃ Ye		ı ● No
Development/B	Better Site Desig	n/Green Infr	astructure prii	nciples?		-	-			
O Building Codes	O Municipal Co	omprehensive P	lans							
Overlay Districts	Open Space P	reservation Pro	ogram							
O Zoning	Zoning O Local Law or Ordinance									
None	None O Land Use Regulation/Zoning									
O Watershed Plans	Other Compre	ehensive Plan								
Other:	<u> </u>						T	<u> </u>		

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

	SPDES ID					
Nar	me of MS4/Coalition TOWN OF OWEGO NYR 2	0	Α	0	7	9
4a	. Are the MS4s contributing to this report involved in a regional/watershed wide plant	_	eff Ye		?	No
4b	. Does the MS4 have a banking and credit system for stormwater management practic	es?				
		0	Ye	S		No
4c.	. Do the SWMP Plans for each MS4 contributing to this report include a protocol for a and approval of banking and credit of alternative siting of a stormwater managemen	t pr		ce'	?	No
4d	. How many stormwater management practices have been implemented as part of this reporting period?	sys [in 0	thi:	S
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?			nde 0	ed	%

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

Name of MS4/Coalition TOWN OF OWEGO	SPDES ID N Y R 2 0 A 0 7 9
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achie identified in your Stormwater Management Program Plan (SWMPP), i III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWM	PP in this reporting period.
Amend stormwater ordinance as needed to maintain compliance with	future permits.
B. Briefly summarize the observations that indicated the overall edgoal.	ffectiveness of this Measurable
C. How many times was this observation measured or evaluated in	this reporting period?
D. Has your MS4 made progress toward this measurable goal dur	(ex.: samples/participants/events) ing this reporting period?
E. Is your MC4 on schoolule to most the deadline set fouth in the Ci	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the S	• Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule	-
A new Stormwater Management Plan will be written and approved in	2021 for the 2021-2026 period

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.

SPDES ID

Name of MS4/Coalition	n Town of Union			N	I Y R	2 0 A (0 5 0
Minimum	Control Mea	isure 5. Post	-Constructio	n Stormy	vater N	/Ianagem	ent
The information in the	his section is beir	ng reported (che	ck one):				
On behalf of an inOn behalf of a coaHow n		ributed to this	report?				
1. How many and MS4/Coalition i						has your	
		#	#	# Times	_		
O Alternative Practic	ces	Inventoried	Inspections	Maintaine	a]		
O Filter Systems					ĺ		
O Infiltration Basins					ĺ		
O Open Channels					ĺ		
Ponds		10	8		ĺ		
O Wetlands						•	
O Other					j		
2. Do you use an o		· -	abase, spreadsl	neet) to trac	ek post-	constructi • Yes	on O No
3. What types of a Development/B		-		-	Low In	apact	
Building Codes	• Municipal Co	omprehensive P	lans				
O Overlay Districts	O Open Space	Preservation Pro	gram				
O Zoning	O Local Law or	r Ordinance					
O None	Land Use Re	egulation/Zoning					
O Watershed Plans	O Other Compr	ehensive Plan					
O Other:							7

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

								SPI	DES	ID						
Nan	ne of MS4/Coalition	Town of Union		ii	···· • ··· ···			N	Y	R	2	0	A	0 5	5	0
4a.	Are the MS4s co	ntributing to	this report	t involve	d in a r	egional	/watersl	ied v	vide	pla	inni	ing	effo	rt?		
												•	Yes	(1 C	Vο
4b.	Does the MS4 ha	ive a banking	and credit	system	for stor	mwate	r manag	eme	at p	rac	tice	s?				
												0	Yes	•	•	٧o
	Do the SWMP P and approval of															
	ma upprovince				,					•			Yes		1	Йo
4d.	How many storn reporting period		gement pra	ectices h	ave beei	n imple	mented	as pa	irt (of t	his :	syst	ет	in (I	bis	i
	What percent of training on Low												ften	ded		
	Infrastructure p	rinciples in th	iis reportin	ig period	1?									C	,	%

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

Name of MS4/Coalition Town of Union SPDES ID N Y R 2 0 A 0 5 0	
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.	
Code enforcement software is used to track SWPPP inspections. The Town is only responsible for maintaining one system.	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.	
Yearly inspections made to make sure systems are performing properly.	
C. How many times was this observation measured or evaluated in this reporting period?	
6	
(ex.: samples/participants/eve D. Has your MS4 made progress toward this measurable goal during this reporting period?	ents)
● 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). 	
Train additional staff to inspect systems. had I more code officer certified to inspect.	

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

Name of MS4/Coalition	Town of Vestal			SPDES II			
<u>Minimum</u>	Control Meas	ure 5. Post-	Construction	on Stormwater	Management		
The information in th	is section is being	reported (chec	k one):				
● On behalf of an individual MS4 ○ On behalf of a coalition How many MS4s contributed to this report?							
1. How many and w				anagement practice reporting period?	es has your		
		# Inventoried	# Inspections	# Times Maintained			
O Alternative Practic	es	0	0	0			
● Filter Systems		1 8	1 4	0			
● Infiltration Basins		3	2	0			
Open Channels		2	2	0			
Ponds		2 1	1 6	3			
O Wetlands		0	0	0			
O Other		0	0	0			
2. Do you use an o BMPs, inspecti	electronic tool (o ons and mainta		base, spreads	sheet) to track pos	et-construction ● Yes ○ No		
3. What types of a Development/B	non-structural p Setter Site Desig				Impact		
● Building Codes	O Municipal Co	mprehensive Pl	ans				
Overlay Districts	O Open Space P	reservation Pro	gram				
Zoning	• Local Law or	Ordinance					
O None	O Land Use Reg	gulation/Zoning	•				
O Watershed Plans	O Other Compre	chensive Plan					
• Other:	D 1						

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

			S .	'DE	S ID					
Na	ame of MS4/Coalition Town of Vestal		1	1 X	R	2	0	A 0	6	4
4a	a. Are the MS4s contributing to this report invo	olved in a regional/w	vatershed	wid	le pl	ann	_	effor Yes		No
4b	b. Does the MS4 have a banking and credit syst	em for stormwater	managem	ent	pra	ctic				
							Ο,	Yes		No
4c	c. Do the SWMP Plans for each MS4 contributi and approval of banking and credit of alterna	~ .	_				t pra		?	No
4d	d. How many stormwater management practice reporting period?	s have been implem	ented as j	part	of t	his	syste	em ir	1 th	is
							L			

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

If submittin	ig this form as part of a joint i	report on behalf of a coal	lition leave SPDES ID blank.
Name of MS4/Coalition	Town of Vestal		N Y R 2 0 A 0 6 4
6. Evaluating Prop	gress Toward Measurable	e Goals MCM 5	
identified in your St	ort on your progress and pr ormwater Management Pro tional pages as needed.		ieving measurable goals including requirements in Part
A. Briefly summar	rize the Measurable Goal	identified in the SWN	IPP in this reporting period.
Management annua property owner is n for maintenance of	otified if any issues are ide	nspected yearly by the ntified that need addre	struction Storm Water engineering department. The ssing. The owner is responsible nent follows up to verify that
B. Briefly summar Goal.	ize the observations that	indicated the overall	effectiveness of this Measurable
corrective actions w		n is performed and lett	orrective actions to owners. If a ter to the owner stating that the records.
C. How many time	es was this observation me	easured or evaluated i	in this reporting period?
, and the second			
D. Has your MS4 1	nade progress toward thi	s measurable goal du	(ex.: samples/participants ring this reporting period? ● Yes ○ No
E. Is your MS4 on	schedule to meet the dead	dline set forth in the S	
-	ize the stormwater activit ng cycle (including an im	~	● Yes ○ No he goals of this MCM during e).
inspections to include engineering department		ay be installed during t ices to those owners/pa	ections and expanding the future reporting periods. The roperties about maintenance and

MS4 Annual Report Form

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

If submitting this form as par	rt of a joint repo	rt on behalf of a	coalition leav	e SPDES ID blank.
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THERE OF THE PARTY COURTS OF	L. 1	To be an address of the second			
<u>Minimum</u>	Control Mea	sure 5. Post	-Constructio	<u>n Stormwate</u>	r Management
The information in th	is section is beir	ng reported (che	ck one):		
On behalf of an incOn behalf of a coaHow m	lividual MS4 lition any MS4s cont	ributed to this	report?	1	
1. How many and was MS4/Coalition in	what type of po nventoried, insp	st-construction pected and mair	stormwater ma tained in this r	nagement practi eporting period?	ces has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	es	0	0	0	
O Filter Systems		0	3	0	
O Infiltration Basins		0	.3	0	
Open Channels		0	0	0	
O Ponds		0	0	0	
O Wetlands		0	0	0	
Other		0	0	0	
2. Do you use an o BMPs, inspecti	ons and maint	anance?			O Yes O No
3. What types of a Development/B	non-structural Setter Site Desi	practices have gn/Green Infr	e been used to astructure pri	implement Low nciples?	/ Impact
● Building Codes	O Municipal C	omprehensive P	lans		
Overlay Districts	● Open Space	Preservation Pro	ogram		
■ Zoning	• Local Law o	r Ordinance			
○ None	O Land Use Re	egulation/Zoning	5		
O Watershed Plans	Other Comp	rehensive Plan			
Other:					

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

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 Endicott	NYR2	0 A 1	4 9
4a. Are the MS4s contributing to this report involved in a regional/wat	tershed wide planni	ing effoi ● Yes	
4b. Does the MS4 have a banking and credit system for stormwater ma	anagement practice		
		O Yes	No
4c. Do the SWMP Plans for each MS4 contributing to this report inclu	•		
and approval of banking and credit of alternative siting of a storm	water management	-	● No
4d. How many stormwater management practices have been implemen	J	O Yes	• No
.,	J	O Yes	• No

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. SPDES ID Y R 2 Village of Endicott Name of MS4/Coalition 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 Skye View Heights Project and Central Endicott Drainage Project were completed and the Village will continue to monitor the storm water system for the property by doing annual inspections. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. The annual inspections conclude that the implemented systems are maintained and operable. C. How many times was this observation measured or evaluated in this reporting period? 3 (ex.: samples/participants/events) D. Has your MS4 made progress toward this measurable goal during this reporting period? O No Yes E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O No Yes F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). The MCM goal will continue to be met by continuing the annual inspections and expanding the inspections to include any new systems that may be installed during future reporting periods.

Site

Plan

MS4 Annual Report Form

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

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	n Village of Johnson Ci	ity		NY	R 2 0 A 1 0 1			
<u>Minimum</u>	Control Mea	sure 5. Post-	Construction	on Stormwater	· Management			
The information in the	his section is bein	g reported (chec	k one):					
On behalf of an inOn behalf of a coaHow n		ributed to this r	report?	1				
1. How many and MS4/Coalition i				nagement practic eporting period?	es has your			
		# Inventoried	# Inspections	# Times Maintained				
O Alternative Practic	ces							
● Filter Systems		1	1	0				
● Infiltration Basins		2	2	0				
Open Channels								
• Ponds		5	5					
O Wetlands								
O Other								
 2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance? Yes ONo 3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles? 								
Building Codes	·	omprehensive Pl	_	ucipies.				
Overlay Districts	Open Space 1	-						
■ Zoning	• Local Law or							
O None	O Land Use Re	gulation/Zoning						
O Watershed Plans	Other Compr	ehensive Plan						
• Other:								

Reviews

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

	2LI	ՆԵՉ ԼՄ						
Name of MS4/Coalition Village of Johnson City	N	YR	2	0 A	1	0	1	
4a. Are the MS4s contributing to this report involved in a regional/w	vatershed w	vide pl	ann	ing efi ● Yo			No	
4b. Does the MS4 have a banking and credit system for stormwater	manageme	nt prae	etice	es?				
	_			O Ye	es	•	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?								
				O Y	es		No	
4d. How many stormwater management practices have been implem	ented as pa	art of 1	his	systen	n in	thi	s	
reporting period?						2		
5. What percent of municipal officials/MS4 staff responsible for pro-					ende	d		
training on Low Impace Development (LID), Better Site Design (Infrastructure principles in this reporting period?	(BSD) and (other (3rec		0 (ا م	0/2	
				<u>.</u>	0 1		70	

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

Name of MS4/Coalition Village of Johnson City SPDES ID N Y R 2 0 A 1 0 1
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 has established a database of Post-Construction Water Management Annual Inspections. The individual property owner is responsible for maintenance of their storm system; therefore, the Village does not maintain these systems.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
The annual inspections concluded that the implemented systems are maintained properly and in operable condition.
C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
The MCC goal will continue to be met by continuing the annual inspections and expanding the inspections to include new systems that may be installed during future reporting periods.

ио

ACTIVITY

MS4 Annual Report Form

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

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	VILLAGE OF PORT	DICKINSON		N Y R	2 0 A 0 8 0
<u>Minimum</u>	Control Mea	sure 5. Post	-Constructio	on Stormwater I	<u>Management</u>
The information in the	his section is bein	ng reported (chea	ck one):		
On behalf of an inOn behalf of a coaHow n		ributed to this 1	report?		
				nnagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces	0		0	
O Filter Systems		0	0	0	
O Infiltration Basins		0	0	0	
O Open Channels		0	0	0	
O Ponds		0	0	0	
O Wetlands		0	0	0	
O Other		0	0	0	
2. Do you use an BMPs, inspecti		. –	ıbase, spreads	heet) to track post	-construction ● Yes ○ No
3. What types of a Development/E	non-structural Better Site Desig	_		_	npact
O Building Codes	Municipal Control	omprehensive P	lans		
Overlay Districts	O Open Space 1	Preservation Pro	ogram		
○ Zoning	O Local Law or	r Ordinance			
O None	O Land Use Re	egulation/Zoning			
O Watershed Plans	O Other Compr	ehensive Plan			
Other:					

PERIOD

T H I S

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

	SPDES ID					
Na	me of MS4/Coalition VILLAGE OF PORT DICKINSON NYR 2	0	А	0	8	0
4a	. Are the MS4s contributing to this report involved in a regional/watershed wide planni	_	effe Ye			No
4 b	. Does the MS4 have a banking and credit system for stormwater management practice	s?				
		0	Ye	s		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					
4c	. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evanual and approval of banking and credit of alternative siting of a stormwater management	pr		ice'	?	No
	• • • • • • • • • • • • • • • • • • • •	pra O	acti Ye	ice: s	•	

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

		SPDES ID	
Name of MS4/Coalition	VILLAGE OF PORT DICKINSON	N Y R 2	0 A 0 8 0
6. Evaluating Pro	gress Toward Measurable Goals MCM	15	
identified in your St	ort on your progress and project plans to cormwater Management Program Plan (S tional pages as needed.	_	_
A. Briefly summar	rize the Measurable Goal identified in	the SWMPP in this repo	rting period.
	to document the number of post construction conducted and documented maintenance		
B. Briefly summar Goal.	rize the observations that indicated the	overall effectiveness of t	his Measurable
NO ACTIVITY	-		
C. How many time	es was this observation measured or ev	aluated in this reporting	period?
		·	samples/participants/events
D. Has your MS4 i	nade progress toward this measurable	goal during this reporting	ng period? ● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth	in the SWMPP?	● Yes ○ No
_	ize the stormwater activities planned t ng cycle (including an implementation	_	
YEAR	THAT THERE WILL BE ANY POST post construction BMP's and hold owner		
	est and file annual maintenance records t		

MS4 Annual Report Form

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

			SPD	ES ID
Name of MS4/Coalition BROOME COUNT	Υ		N	Y R 2 0 A 3 3 2
Minimum Control Mea	asure 5. Post	-Construction	on Stormwa	ter Management
The information in this section is bei	ng reported (che	ck one):		
 On behalf of an individual MS4 On behalf of a coalition How many MS4s con 	tributed to this	report?	1	
1. How many and what type of po MS4/Coalition inventoried, ins				
	# Inventoried	# Inspections	# Times Maintained	
O Alternative Practices				
O Filter Systems				
O Infiltration Basins				
Open Channels	3	3	1	
• Ponds	1	1		
O Wetlands				
• Other	2	2	1	
2. Do you use an electronic tool BMPs, inspections and main		abase, spreads	heet) to track	post-construction ● Yes ○ No
3. What types of non-structural Development/Better Site Desi	_		_	ow Impact
○ Building Codes • Municipal C	Comprehensive P	lans		
O Overlay Districts O Open Space	Preservation Pro	ogram		
O Zoning • Local Law o	or Ordinance			
O None O Land Use R	tegulation/Zoning	3		
● Watershed Plans ○ Other Comp	rehensive Plan			
● Other: H A Z A R D M I T	I G A T I	ON PL	AN	

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

		<u>S</u> 1	'DE	<u>8 ID</u>					
Nar	me of MS4/Coalition BROOME COUNTY	I	Y	R	2	0 A	. 3	3	2
4a.	. Are the MS4s contributing to this report involved in a regional/v	vatershed	wid	e pl	aur	_			No
4b	. Does the MS4 have a banking and credit system for stormwater	managem	ent	pra	etic				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 stor					valua	tion etice	1 :?	
4d.	. How many stormwater management practices have been implen reporting period?	nented as p	part	of t	his	syste	m ir	thi	is
5.	What percent of municipal officials/MS4 staff responsible for pr training on Low Impace Development (LID), Better Site Design (Infrastructure principles in this reporting period?	_	_				end	ed 0	%

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

Name of MS4/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3 3 2
6. Evaluating Progress Toward Measurable Goals	MCM 5
Use this page to report on your progress and project plaidentified in your Stormwater Management Program Pl III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identific	ed in the SWMPP in this reporting period.
MEASURABLE GOAL #5A To develop and maintained Post-Construction Stormwater Management Practices responsible departments / staff.	
B. Briefly summarize the observations that indicate Goal.	d the overall effectiveness of this Measurable
This measure has been met with existing measures, and During the 2020-2021 reporting year, no new post-con County's inventory.	
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 measu	
E. Is your MS4 on schedule to meet the deadline set	forth in the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities plan the next reporting cycle (including an implement	ned to meet the goals of this MCM during
During the next reporting period any new measures commaintenance will be continued on existing structures.	nstructed will be added to the inventory and

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

SPDES ID
Name of MS4/Coalition BROOME COUNTY N Y R 2 0 A 3 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.
MEASURABLE GOAL #5B To INSPECT 100% of the County's Post-Construction Stormwater Management Practices annually.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
100% of the County's Post-Construction Stormwater Management Practices were inspected during this reporting period. Inspection responsibilities are covered by DPW - Engineering Staff and inspection sheets/tracking are updated as needed.
C. How many times was this observation measured or evaluated in this reporting period?
6
(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 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 inspections as established and for any new measures added.

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

			SPDES ID
Name of MS4/Coalition	BROOME COUNTY		N Y R 2 0 A 3 3 2
6. Evaluating Pro	ogress Toward Measurable Goa	ıls MCM 5	
identified in your S	port on your progress and project Stormwater Management Program ditional pages as needed.		
A. Briefly summa	nrize the Measurable Goal ident	tified in the SWMP	P in this reporting period.
	GOAL #5C To MAINTAIN 10gement Practices annually - in acc		
B. Briefly summa Goal.	nrize the observations that indic	ated the overall effe	ectiveness of this Measurable
•	ty's Post-Construction Stormwate ne O&M guidelines during this re	_	ices were maintained in
C. How many time	nes was this observation measur	ed or evaluated in t	
			(ex.: samples/participants/events
D. Has your MS4	made progress toward this mea	asurable goal durin	
E. Is your MS4 on	n schedule to meet the deadline	set forth in the SW	
	rize the stormwater activities p ting cycle (including an impleme		● Yes ○ No goals of this MCM during
Continue maintena	ance as established and for any ne	w measures added.	

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

Name of MSA/Coolition BROOME COUNTY		SPDES ID N Y R 2 0 A 3 3 2
Name of MS4/Coalition BROOME COUNTY	 	
6. Evaluating Progress Toward Measura	able Goals MCM 5	
Use this page to report on your progress and identified in your Stormwater Management III.C.1. Submit additional pages as needed.		_
A. Briefly summarize the Measurable Go	oal identified in the S	WMPP in this reporting period.
MEASURABLE GOAL #5D To train 10 O&M of the County's Post-Construction St inspections, record keeping, operation, and	ormwater Managemen	nt Practices, with respect to
B. Briefly summarize the observations the Goal.	nat indicated the over	rall effectiveness of this Measurable
Staff training was started in 2016 (2 people not progressed as planned during the past reareas to make sure that there is coverage be	eporting period. We v	
C. How many times was this observation	measured or evalua	ted in this reporting period?
D. Has your MS4 made progress toward	this massurable goal	(ex.: samples/participants/events,
D. Has your 19154 made progress toward	tilis illeasurable goal	Yes ● No
E. Is your MS4 on schedule to meet the d	leadline set forth in t	he SWMPP? ○ Yes • No
F. Briefly summarize the stormwater act the next reporting cycle (including an	-	et the goals of this MCM during
During the 2021-2022 reporting year, the gin accordance with adopted good housekeep continue to be handled by DPW - Engineer other staff where the BMP is located, etc.)	ping documents. Moning staff, Cross training	itoring and inspections will ag with staff (facility managers and

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

Name of MS4/Coalition	Tioga Cou	nty			SPDES I	D R 2 0 A 0 4 7
Minimum (<u>Contro</u>	l Meas	ure 5. Post	t- <u>Constructio</u>	on Stormwater	Management
The information in th	is section	ı is being	reported (che	eck one):		
● On behalf of an inc O On behalf of a coa How m	lition		buted to this	report?		
1. How many and MS4/Coalition is	what typ nventori	e of post ed, inspe	-construction cted and mai	stormwater ma ntained in this r	nnagement practic eporting period?	es has your
			# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	es					
O Filter Systems						
O Infiltration Basins						
O Open Channels						
O Ponds						
O Wetlands						
O Other						
2. Do you use an BMPs, inspecti				abase, spreads	heet) to track po	st-construction O Yes O No
3. What types of Development/F						Impact
O Building Codes	O Mun	icipal Co	omprehensive	Plans		
Overlay Districts	O Opei	n Space F	Preservation Pr	rogram		•
O Zoning	O Loca	al Law or	Ordinance			
○ None	O Land	l Use Re	gulation/Zonir	ıg		
Watershed Plans	O Othe	er Compre	ehensive Plan			
Other:						

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

Na	me of MS4/Coalition Broome-Tioga Stormwater Coalition SPDES ID N Y R 2	0	A	0	4	7]
4a	. Are the MS4s contributing to this report involved in a regional/watershed wide plann	_	eff Ye			N	`
4 b	o. Does the MS4 have a banking and credit system for stormwater management practice	es?	Ye	_		No	
4c	. Do the SWMP Plans for each MS4 contributing to this report include a protocol for e and approval of banking and credit of alternative siting of a stormwater management	val t pr	uati	ion ice'	?		
4d	. How many stormwater management practices have been implemented as part of this reporting period?	sys [tem	in	thi	is	
5.	What percent of municipal officials/MS4 staff responsible for program implementation training on Low Impace Development (LID), Better Site Design (BSD) and other Great Infrastructure principles in this reporting period?		atte	nde	ed	%	,

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

	SPDES ID
Tioga County Tioga County	N Y R 2 0 A 0 4 7
Evaluating Progress Toward Measurable Goals MCM 5	
se this page to report on your progress and project plans toward achieving entified in your Stormwater Management Program Plan (SWMPP), included. Submit additional pages as needed.	_
. Briefly summarize the Measurable Goal identified in the SWMPP i	n this reporting period.
.	
. Briefly summarize the observations that indicated the overall effect oal.	iveness of this Measurable
How many times was this observation measured or evaluated in this	s reporting period?
	(ex.: samples/participants/ev
Has your MS4 made progress toward this measurable goal during t	his reporting period?
Is your MS4 on schedule to meet the deadline set forth in the SWM	○ Yes ○ No
is your 14154 on schedule to meet the deadline set for the in the 5 44 141.	○ Yes ○ No
Briefly summarize the stormwater activities planned to meet the got the next reporting cycle (including an implementation schedule).	als of this MCM during

not done already.

MS4 Annual Report Form

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

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

r		SPI	ES	ID						
Name of MS4/Coalition	CITY OF BINGHAMTON	И	Y	R	2	0	A	3	4	1

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

Self-Assessment Operation/Activity/Facility performed within the past 3 Operation/Activity/Facility Addressed in SWMP? years? Street Maintenance..... O No • Yes O No Bridge Maintenance..... O Yes • No O Yes No Winter Road Maintenance.....

Yes O No ● Yes O No Salt Storage..... O No ■ Yes O No Solid Waste Management..... O Yes ● No ○ Yes No New Municipal Construction and Land Disturbance. Yes O No • Yes O No Right of Way Maintenance..... 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 No Yes O No Municipal Building..... O No • Yes O No Stormwater System Maintenance..... • Yes O No • Yes O No Vehicle and Fleet Maintenance...... O No • Yes O No Other...... O Yes ● No O Yes No

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$ 1 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 CITY OF BINGHAMTON	N Y R 2	0 A	3	4	1
2. Provide the following information about municipal operations go	ood housekeep	ing pr	ogr	am	s:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres				2
• Streets Swept. (Number of miles X Number of times swept)	# Miles	3	7	7	9
● Catch Basins Inspected and Cleaned Where Necessary	+ #	1	0	7	7
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#				2
Phosphorus Applied In Chemical Fertilizer	#Lbs.			6	0
Nitrogen Applied In Chemical Fertilizer	# Lbs.			9	0
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 provide during this reporting period?	d to municipa	l emp	loye		2
4. What was the date of the last training?	0 3 / 1 9	/ 2	0	2	0
5. How many municipal employees have been trained in this report	ing period?				2
6. What percent of municipal employees in relevant positions and d stormwater management training?	epartments re	eceive	4 :	3 9	%

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

Continue training as available. Continue the use of BMP's in moving/landscaping operations.	
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	
● Yes O No	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	
D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes • O No	
(ex.: samples/participants/evo	ents)
C. How many times was this observation measured or evaluated in this reporting period?	
reporting period. NOTE: Parking Lot Swept Number Low due to No Public Activities Requiring Lots to be Swept (i.e Baseball Gam3es, Fireworks) Due to Covid -19 restrictions, 125 Trees Planted	
3779.4 miles of street swept, 2 acres of parking lot swept, and 1077 catchbasins cleaned during	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.	
Provided training to all municipal employees whose operations impact storm water. Reduce the impact of moving/landscaping through the use of best management practices. Perform vehicle and equipment maintenance/washing according to plan, to reduce impact of storm water. Prevent hazardous waste material from impacting storm water through proper use, disposal, storage methods. Continue street sweeping and cleaning catchbasins.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.	
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.	
7. Evaluating Progress Toward Measurable Goals MCM 6	
Name of MS4/Coalition CITY OF BINGHAMTON N Y R 2 0 A 3 4 1	
Name of MS4/Coalition CITY OF BINGHAMTON SPDES ID N Y R 2 0 A 3 4 1	
If submitting this form as part of a joint report on behalf of a coalition leave SPDES 1D blank.	

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

	SPDES ID
Name of MS4/Coalition Town of Binghamton	N Y R 2 0 A 0 0 9
Minimum Control Measure 6. Stormwater Manageme	<u>ent for Municipal Operation</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 contributes Pollutants of Concern to the MS4 system. For each operation operation/facility has been addressed in the MS4's/Coalition' Program(SWMP) Plan and whether a self-assessment has be reporting period. A self-assessment is performed to: 1) deterpotentially generated by the permittee's operations and facility effectiveness of existing programs and 3) identify the municity that will be addressed by the pollution prevention and good by not done already.	n/facility indicate whether the s Stormwater Management en performed during the mine the sources of pollutants ties; 2) evaluate the ipal operations and facilities

		<u>perfor</u>	med withir	the past 3
Operation/Activity/Facility	Addressed in	n SWMP?	<u>years?</u>	•
Street Maintenance	• Yes	○ No	• Yes	O No
Bridge Maintenance	• Yes	○ No	• Yes	O No
Winter Road Maintenance		○ No	• Yes	O No
Salt Storage	• Yes	○ No	• Yes	O No
Solid Waste Management		○ No	• Yes	O No
New Municipal Construction and Land Disturbation	nce • Yes	○ No	• Yes	O No
Right of Way Maintenance	• Yes	○ No	• Yes	\circ No
Marine Operations	O Yes	• No	O Yes	No
Hydrologic Habitat Modification	O Yes	• No	O Yes	No
Parks and Open Space		○ No	• Yes	O No
Municipal Building		O No	• Yes	\circ No
Stormwater System Maintenance	● Yes	O No	• Yes	O No
Vehicle and Fleet Maintenance		O No	• Yes	O No
Other	O Yes	• No	O Yes	No

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

	SPDES ID		-	
Name of MS4/Coalition Town of Binghamton	N Y R 2	0 A	0 0	9
	_			
2. Provide the following information about municipal operation	tions good housekeer	ning nre	oran	ns:
2. 110 rue me rono mig miormation about mamespar opera-	cions good nodsencel	me bro	6	11,51
• Parking Lots Swept (Number of acres X Number of times swep	ot) # Acres			4
• Streets Swept (Number of miles X Number of times swept)	# Miles		3	0
● Catch Basins Inspected and Cleaned Where Necessary	#		2 0	0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		Τ	0
hispected and Cleaned where Necessary		1		ш
O Phosphorus Applied In Chemical Fertilizer	# Lbs.			0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.			0
O Pesticide/Herbicide Applied	" 1 TO TO	0	<u> </u>	
(Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	Number of			
2 W		.11		
3. How many stormwater management trainings have been partial during this reporting period?	providea to municipa	ii empid	yees	1
4. What was the date of the last training?	0 3 / 1 1	/ 2	0 2	0
5. How many municipal employees have been trained in this	reporting period?			1
6. What percent of municipal employees in relevant position	s and departments r	eceive		1
stormwater management training?			2 5	%

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

Name of MS4/Coalition Town of Binghamton	SPDES ID
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 SV	WMPP in this reporting period.
Self assess municipal operations and train personnel in procedures	S.
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
Self assessment has identified potential pollutants and training has Eight additional training elements were covered.	s promoted proper procedures.
C. How many times was this observation measured or evaluate	ed 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 th	
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	-
Continue training and proper procedures. Implement capital improvement projects to reduce pollutants of co	oncern.

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

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 Chenengo	N Y R 2 0 A 1 2 7
Minimum Control Measure 6. Stormwater Manage	ment 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 contribu	tes or may notentially contribute

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 in SWMP? vears? Street Maintenance.....

Yes ○ No • Yes O No Bridge Maintenance..... O Yes ● No ○ Yes No O No ● Yes Winter Road Maintenance..... • Yes O No Salt Storage...... • Yes ○ No • Yes O No Solid Waste Management..... O Yes No ○ Yes No New Municipal Construction and Land Disturbance..

Yes O No O Yes No ○ No ○ Yes Right of Way Maintenance..... • Yes No Marine Operations..... O Yes • No • Yes No Hydrologic Habitat Modification..... ○ Yes ● No ○ Yes No Parks and Open Space.....

Yes ○ No ○ Yes No ○ No ○ Yes Municipal Building.....

Yes No ○ No • Yes O No Stormwater System Maintenance..... • Yes No Vehicle and Fleet Maintenance..... • Yes O No O Yes Other...... O Yes ● No ○ Yes No

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

	SPDES ID
Name of MS4/Coalition Town of Chenengo	N Y R 2 0 A 1 2 7
2. Provide the following information about municipal operation	tions good housekeeping programs:
Parking Lots Swept (Number of acres X Number of times swep	pt) # Acres 1
• Streets Swept (Number of miles X Number of times swept)	# Miles 6 6
Catch Basins Inspected and Cleaned Where Necessary	# 1 0 0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	# 2
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 0
3. How many stormwater management trainings have been pluring this reporting period?	provided to municipal employees
4. What was the date of the last training?	0 1 / 1 2 / 2 0 2 1
5. How many municipal employees have been trained in this	reporting period?
6. What percent of municipal employees in relevant position stormwater management training?	as and departments receive

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

Name of MS4/Coalition Town of Chenengo SPDES ID N Y R 2 0 A 1 2 7
7. Evaluating Progress Toward Measurable Goals MCM 6
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Continue to maintain a clean fleet, hydroseed exposed ares and ditches, control wasteful salt and sand application, as well as chemical applications (fertilizers, etc.). Staff training ongoing.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
No noticeable runoff problems noted or reported associated within municipal facilities.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period?
● Yes ○ No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
Yes 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 to improve on staff training and log of imrovements. Possible IPM programs for parks and recreation.

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

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 Conklin		N	Y	R	2	0	A	2	5	5	
Minimum Can	tuel Macana C. Chamanatan Managa	4 C -	1	#			_1	Λ-		- 42		_
— wunumum Coni	trol Measure 6. Stormwater Manage	ment to	rN	VIII)	nı	:in	ai '	ιJr	ıer	ati	on	S

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 Operation/Activity/Facility Addressed in SWMP? vears? Street Maintenance..... 9 Yes ○ No • Yes O No ○ No • Yes Bridge Maintenance..... • Yes O No Winter Road Maintenance..... • Yes O No ● Yes O No. Salt Storage...... 9 Yes ○ No • Yes O No Solid Waste Management..... O Yes ● No ○ Yes No New Municipal Construction and Land Disturbance.. • Yes ○ No • Yes O No Right of Way Maintenance.....

Yes ○ No • Yes O No Marine Operations..... O Yes ● No ○ Yes No Hydrologic Habitat Modification..... ○ Yes No ○ Yes No ○ No • Yes O No Parks and Open Space.....

Yes ○ No • Yes O No Municipal Building.....

Yes Stormwater System Maintenance...... • Yes O No ● Yes O No ○ No • Yes O No Vehicle and Fleet Maintenance.....

Yes Other..... ○ No Yes O No

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

	5	PDES L	D					
Name of MS4/Coalition Town of Conklin		и А	2	0	A	2	5	5
2. Provide the following information about municipal operat	ions good	house	keer	oing	, pr	ogr	am	ıs:
Parking Lots Swept (Number of acres X Number of times swep	ot)	# A	cres					3
• Streets Swept (Number of miles X Number of times swept)		# M	iles				4	1
● Catch Basins Inspected and Cleaned Where Necessary			#				3	9
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 			#					8
O Phosphorus Applied In Chemical Fertilizer		# I	.bs.					
O Nitrogen Applied In Chemical Fertilizer		# I	.bs.					
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	lumber of	# Acr	es [0].[
3. How many stormwater management trainings have been p	provided t	o mun	icipa	ıl er	mpl	loye		
during this reporting period?					Ш			1
4. What was the date of the last training?	0	4 / 2	2 0]/[2	0	2	0
5. How many municipal employees have been trained in this	reporting	period	1?					1
6. What percent of municipal employees in relevant positions stormwater management training?	s and depa	artmen	ts r	ecei		2		%

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

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

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	TJOWN OF DICKINSON	N	Y	R	2	0	A	1	4	3

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):		
 On behalf of an individual MS4 On behalf of a coalition 		
How many MS4s contributed to this report?		

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

Self-Assessment

Operation/Activity/Facility performed within the past 3 Operation/Activity/Facility Addressed in SWMP? vears? Street Maintenance..... 9 Yes ○ No • Yes O No Bridge Maintenance..... O Yes ● No ○ Yes No ○ No • Yes Winter Road Maintenance..... • Yes O No O No Salt Storage..... • Yes ○ No • Yes Solid Waste Management..... • Yes O No

■ Yes O No New Municipal Construction and Land Disturbance..

Yes O No ○ No • Yes Right of Way Maintenance.....

Yes O No Yes O No Marine Operations..... O Yes ● No ○ Yes No Hydrologic Habitat Modification..... O Yes No ○ Yes No ○ No Yes O No Parks and Open Space..... • Yes O No ● Yes Municipal Building..... • Yes O No ○ No • Yes O No Stormwater System Maintenance..... • Yes Vehicle and Fleet Maintenance.....

Yes ○ No Yes O No Other..... O Yes O No O Yes O No

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

	SPL	DES ID					
Name of MS4/Coalition TOWN OF DICKINSON	N	Y R	2	0 A	1	4	3
2. Provide the following information about municipal operations go	od h	ousek	еер	ing pı	rogr	am	s:
● Parking Lots Swept (Number of acres X Number of times swept)		# Acı	es				5
• Streets Swept (Number of miles X Number of times swept)		# Mil	es			3	0
● Catch Basins Inspected and Cleaned Where Necessary			#			3	7
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary			#				0
Phosphorus Applied In Chemical Fertilizer		# Lt	s.				0
● Nitrogen Applied In Chemical Fertilizer		# Lt	s.				0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)		Acres	; [0 0].[
3. How many stormwater management trainings have been provided during this reporting period?	d to 1	munic	ipa	I emp	loye	$\overline{}$	1
4. What was the date of the last training?	3	/ 0	3	/ 2	0	2	1
5. How many municipal employees have been trained in this reporti	ng p	eriod'	?				4
6. What percent of municipal employees in relevant positions and destormwater management training?	epart	tment	s re	ceive	0	0 (%

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

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 TJOWN OF DICKINSON N Y R 2 0 A 1 4 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.
CLEANING OF STREETS AND PARKING LOTS, INSPECTION OF CATCHBASINS, AND GOOD HOUSEKEEPING. Measurable goal is to reduce pollutants of concern through the use of good housekeeping programs. Also, to ensure that all relevant staff receive good housekeeping training.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
THE SWEEPING WAS DONE 12 TMES AND THE CATCHBASINS WERE INSPECTED,2 CATCHBASINS WERRE REPAIRED, 12 WERE VACUUMED; YARD WASTE PICK UP WAS DONE 64 TIMES; LEAF PICK UP WAS DONE 40 TIMES. There has been a decrease in migration of materials to the streams and rivers due to catch basin and culvert cleaning. LEAF AND YARD WASTE ARE COLLECTED WEEKLY SPRING THROUGH FALL.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
ALL EMPLOYEES GET GOOD HOUSEKEEPING TRAINING ONCE A YEAR. Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern. Continue to attend stormwater management training(s) when available.

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

Name of MS4/Coalition Town of Fenton		N Y R 2 0 A 0 7 8
Minimum Control Measure 6. Sto	ormwater Management	for Municipal Operations
The information in this section is being reporte	d (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to 	o this report?	
1. Choose/list each municipal operation/Pollutants of Concern to the MS4 systoperation/facility has been addressed Program(SWMP) Plan and whether a reporting period. A self-assessment is potentially generated by the permittee effectiveness of existing programs and that will be addressed by the pollution not done already.	tem. For each operation/faction the MS4's/Coalition's Storage self-assessment has been performed to: 1) determined to: 3) identify the municipal	cility indicate whether the commater Management erformed during the e the sources of pollutants 2) evaluate the operations and facilities
		Self-Assessment
		Operation/Activity/Facility performed within the past 3
Operation/Activity/Facility	Addressed in SWMP?	
Street Maintenance	■ Yes ○ No.	Yes O No

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

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

	SPDES ID
Name of MS4/Coalition Town of Fenton	N Y R 2 0 A 0 7 8
2. Provide the following information about municipal operation	tions good housekeeping programs:
Parking Lots Swept (Number of acres X Number of times swep	pt) # Acres 5
• Streets Swept (Number of miles X Number of times swept)	# Miles 5 1
Catch Basins Inspected and Cleaned Where Necessary	# 5 0
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#
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 N times applied to the nearest tenth.)	# Acres 0 0 0 0
3. How many stormwater management trainings have been parting this reporting period?	provided to municipal employees
4. What was the date of the last training?	1 1 / 0 5 / 2 0 1 5
5. How many municipal employees have been trained in this	reporting period?
6. What percent of municipal employees in relevant position stormwater management training?	s and departments receive

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

	SPDES ID N Y R 2 0 A 0 7 8
7. Evaluating Progress Toward Measurable Goals MCM 6	
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	n this reporting period.
New Staff orientation to include operations and methods	
B. Briefly summarize the observations that indicated the overall effecti Goal.	veness of this Measurable
No issues	
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 the	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMI	
F. Briefly summarize the stormwater activities planned to meet the goathe next reporting cycle (including an implementation schedule).	
Additional Staff Training	

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.

Name of MS4/Coalition Town of Kirkwood	SPDES ID N Y R 2 0 A 0 7 2
Minimum Control Measure 6. Stormwater Manage	ement 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 Operation/Activity/Facility Addressed in SWMP? vears? Street Maintenance..... 9 Yes ○ No • Yes O No Bridge Maintenance..... O Yes ● No ○ Yes No Winter Road Maintenance..... • Yes ○ No • Yes O No Salt Storage..... • Yes ○ No • Yes O No Solid Waste Management..... O Yes ■ No ○ Yes No New Municipal Construction and Land Disturbance.. • Yes ○ No • Yes O No Right of Way Maintenance..... • Yes ○ No • Yes O No Marine Operations..... O Yes • No O Yes No Hydrologic Habitat Modification..... ○ Yes ■ No ○ Yes No Parks and Open Space..... • Yes ○ No • Yes O No ○ No ____ • Yes O No Municipal Building..... • Yes ○ No • Yes O No. Stormwater System Maintenance..... • Yes O No Vehicle and Fleet Maintenance..... • Yes ○ No Yes Other..... ○ No • Yes O No

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

	SPDES.	עי			
Name of MS4/Coalition Town of Kirkwood	NY	R 2	0 A	0 7	2 2
2. Provide the following information about municipal operation	ions good house	keep	ing pi	rogra	ms:
Parking Lots Swept (Number of acres X Number of times swept	t) # A	cres			5
• Streets Swept (Number of miles X Number of times swept)	# N	liles		4	4
Catch Basins Inspected and Cleaned Where Necessary		#		2	2 3
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 		#			3
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 N times applied to the nearest tenth.)	# Acumber of	es	0 0		.0
3. How many stormwater management trainings have been p	rovided to mur	icipa	ıl emp	loyee	S
during this reporting period?					1
4. What was the date of the last training?	0 6 /	0 1	/ 2	0 2	0
5. How many municipal employees have been trained in this	reporting perio	d?			1
6. What percent of municipal employees in relevant positions stormwater management training?	and departme	its re	eceive	2 5]%

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

Name of MS4/Coalition	Town of Kirkwood		N Y R 2 0 A	0 7 2
7. Evaluating Pro	gress Toward Measurable (Goals MCM 6		
identified in your St	ort on your progress and projectormwater Management Progretional pages as needed.			n Part
A. Briefly summar	rize the Measurable Goal id	entified in the SV	WMPP in this reporting po	eriod.
	to reduce pollutants of conce all relevant staff receive goo			grams.
B. Briefly summar Goal.	rize the observations that in	dicated the overa	all effectiveness of this Me	asurable
Since staff have been	en trained on good housekeep	ing practices ther	e have been no reported vio	lations.
C. How many time	es was this observation meas	sured or evaluate	ed in this reporting period	
				articipants/events)
D. Has your MS4 r	nade progress toward this r	neasurable goal (during this reporting perio	
E. Is your MS4 on	schedule to meet the deadli	ne set forth in th	e SWMPP?	
	ize the stormwater activitien ng cycle (including an imple			
	e good housekeeping progran ae to attend stormwater mana			lutants

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

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

		5	SPDES ID	
Name of MS4/Coalition TOWN OF OWEGO			N Y R 2 0	A 0 7 9
Minimum Control Measure 6. Stormwater I	Manage	ment for	r 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 Pollutants of Concern to the MS4 system. For each operation/facility has been addressed in the MS4's Program(SWMP) Plan and whether a self-assessing reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention not done already.	ch operates/Coalition ment has to: 1) de us and face the mun	ion/facilit on's Storn been perf termine tl cilities; 2) nicipal op-	ty indicate whenwater Mana formed during the sources of personate the evaluate the erations and f	ether the gement g the pollutants facilities
			Self-Assess	sment
		O		
		~	peration/Activ	
			peration/Activerformed withi	ity/Facility
Operation/Activity/Facility Address	ssed in S	pe		rity/Facility n the past 3
Operation/Activity/Facility Street Maintenance		pe	erformed withi years	rity/Facility n the past 3
Street Maintenance	Yes O	<u>pe</u> WMP?	erformed withi years • Yes	rity/Facility n the past 3
Street Maintenance Bridge Maintenance	Yes O	<u>pe</u> WMP? No	erformed with years Yes Yes	rity/Facility n the past 3 ? O No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance.	Yes O Yes O	No	erformed with years Yes Yes	rity/Facility n the past 3 O No No No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage.	Yes O Yes O Yes O Yes O	No No No No	erformed withing vears Yes Yes Yes Yes	rity/Facility n the past 3 P O No O No O No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage. Solid Waste Management.	Yes O Yes O Yes O Yes O	No	erformed withing vears Yes Yes Yes Yes Yes Yes	ity/Facility n the past 3 ? O No O No O No O No O No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage. Solid Waste Management. New Municipal Construction and Land Disturbance.	Yes O Yes O Yes O Yes O Yes O	No	erformed withing vears • Yes • Yes • Yes • Yes • Yes • Yes • Yes • O Yes	ity/Facility n the past 3 ? ○ No ○ No ○ No ○ No ○ No ○ No ○ No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance	Yes O Yes O Yes O Yes O Yes O Yes O Yes O	No	erformed withing vears	ity/Facility n the past 3 ? O No O No O No O No O No O No O No O No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage. Solid Waste Management. New Municipal Construction and Land Disturbance. Right of Way Maintenance. Marine Operations.	Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O	No	erformed withing vears • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	ity/Facility n the past 3 ? O No O No O No O No O No O No O No O N

○ No • Yes

○ No • Yes

○ No • Yes

O No O Yes

O No

O No

O No

O No

Municipal Building..... • Yes

Stormwater System Maintenance..... • Yes

Vehicle and Fleet Maintenance...... • Yes
Other...... • Yes

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

	SPDES ID				
Name of MS4/Coalition TOWN OF OWEGO	N Y R 2	0 2	A 0	7	9
2. Provide the following information about municipal operat	ions good housekee	ping j	prog	ran	ns:
• Parking Lots Swept (Number of acres X Number of times swep	t) # Acres				1
• Streets Swept (Number of miles X Number of times swept)	# Miles			4	4
● Catch Basins Inspected and Cleaned Where Necessary	#		2	8	0
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 N times applied to the nearest tenth.)	# Acres [fumber of	0		<u>]</u> .	
3. How many stormwater management trainings have been p	provided to municip	al em	ıploy	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 period?			0	
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments r	eceiv	/e 5	0	%

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

Name of MS4/Coalition TOWN OF OWEGO Name of MS4/Coalition TOWN OF OWEGO Name of MS4/Coalition TOWN OF OWEGO	
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.	
For Year 5, all goals listed in MCM 6 are related to annual assessments, training, and maintenance.	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.	
Training opportunities were not as readily available over the past year, all other annual maintenance activities were implemented.	
C. How many times was this observation measured or evaluated in this reporting period?	
(ex.: samples/participants/ D. Has your MS4 made progress toward this measurable goal during this reporting period?	events)
• Yes • No	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	
 Yes ○ No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule). 	
A new Stormwater Management Plan will be written and approved in 2021 for the 2021-2026 period	

This report is being submitted for the reporting period ending March 9, 2 0 2 1 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	Town ofUnion		N	Y R	2	0	A	0	- 1	0

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

O No

O No O Yes

Operation/Activity/Facility performed within the past 3 Addressed in SWMP? Operation/Activity/Facility years? Street Maintenance..... 9 Yes O No O Yes No Bridge Maintenance..... O Yes O No O Yes O No O No O Yes Winter Road Maintenance..... • Yes No Salt Storage..... • Yes O No O Yes No O No O Yes Solid Waste Management..... • Yes No No New Municipal Construction and Land Disturbance.. Yes O No O Yes Right of Way Maintenance.....

Yes O No O Yes No O No Marine Operations..... O Yes O No O Yes Hydrologic Habitat Modification..... O Yes O No O Yes O No O No O Yes No Parks and Open Space.....

Yes No Municipal Building.....

Yes O No O Yes O No O Yes No Stormwater System Maintenance..... • Yes Vehicle and Fleet Maintenance...... O No O Yes No.

Other..... O Yes

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

	SPI	DES 1D)					
Name of MS4/Coalition Town of Union	N	YR	2	0	A	0	5	0
2. Provide the following information about municipal operations go	ođ h	ousek	een	ino	nr	ะกฮา	าลท	18.
an 170 that the tono, mg miorimation would material part of or attending to	,	Оцьог	.cc _l ,	6	£/*	ve.	. 14 23	11.71
O Parking Lots Swept (Number of acres X Number of times swept)		# Ac	res					
Streets Swept (Number of miles X Number of times swept)		# Mi	les				9	9
Catch Basins Inspected and Cleaned Where Necessary			#			4	3	3
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary			#					7
O Phosphorus Applied In Chemical Fertilizer		# LI	os.					0
O Nitrogen Applied In Chemical Fertilizer		# LI	os.					0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	of.	Acre	s [].[
3. How many stormwater management trainings have been provided	ł to i	muni	sina	lan	nnl	A. 2.	300	
during this reporting period?	1 10	111431114	.ipa	1 61	p.	Oye		9
			ļ		!			ك
4. What was the date of the last training?	3	/ 0	4	1	2	0	2	1
5. How many municipal employees have been trained in this reporti	ng p	eriod'	?				6	9
6. What percent of municipal employees in relevant positions and do stormwater management training?	epart	ment	s re	Г		0	0	%

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

	Town of Union			SPDES ID N Y R 2	0 A 0 5 0
Name of MS4/Coaliti	ion			14 1 1 2	<u> </u>
7. Evaluating P	rogress Toward N	Ieasurable Goals N	исм 6		
identified in your	report on your progr Stormwater Manag dditional pages as n	gement Program Pla	ns toward achi nn (SWMPP),	eving measurable including require	goals ments in Part
A. Briefly summ	narize the Measur	able Goal identifie	d in the SWN	IPP in this repor	ting period.
disposal at landfi	collection and cont ill. Continue to pro ilt with proper was	mote good houseke	eping efforts a	at municipal facili	iproper ities. New
B. Briefly summ Goal.	narize the observa	tions that indicate	d the overall o	effectiveness of f	his Measurable
Amount of e was	ste collected. Amou	nt of roads swept a	nd storm drain	as cleaned	
C. How many ti	mes was this obse	rvation measured	or evaluated i	in this reporting	period?
				(ex.:	samples/participants/event
D. Has your MS	84 made progress (toward this measu	rable goal du	ring this reporti	ng period? ● Yes ○No
E. Is your MS4	on schedule to me	et the deadline set	forth in the S	SWMPP?	
F. Briefly summ	narize the stormwa orting cycle (includ	ater activities plan ling an implement	ned to meet th ation schedul	he goals of this N e).	O Yes ● No 4CM during
Increase staff trai	ining on BMP and	self evaluations. In	stall storm dra	nin markers. Purcl	nased training
				_	

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

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

		SPDES ID	\neg
Name of MS4/Coalition Town of Vestal		N Y R 2 0 A 0 6 4	i
Minimum Control Measure 6. Stormwater	<u>Management</u>	for Municipal Operation	<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	t contributes or	may potentially contribute	
Pollutants of Concern to the MS4 system. For ea			
	-	•	
operation/facility has been addressed in the MS4	's/Coalition's S	tormwater Management	
operation/facility has been addressed in the MS4 Program(SWMP) Plan and whether a self-assess			
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed	ment has been l to: 1) determin	performed during the ne the sources of pollutants	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation	ment has been j l to: 1) determin ns and facilities	performed during the ne the sources of pollutants ; 2) evaluate the	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify	sment has been placed to: 1) determing and facilities by the municipal	performed during the ne the sources of pollutants s; 2) evaluate the l operations and facilities	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention	sment has been placed to: 1) determing and facilities by the municipal	performed during the ne the sources of pollutants s; 2) evaluate the l operations and facilities	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify	sment has been placed to: 1) determing and facilities by the municipal	performed during the ne the sources of pollutants s; 2) evaluate the l operations and facilities sekeeping program, if it's	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention	sment has been placed to: 1) determing and facilities by the municipal	performed during the ne the sources of pollutants; 2) evaluate the loperations and facilities sekeeping program, if it's Self-Assessment	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention	sment has been placed to: 1) determing and facilities by the municipal	performed during the ne the sources of pollutants s; 2) evaluate the l operations and facilities sekeeping program, if it's Self-Assessment Operation/Activity/Facility	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention not done already.	sment has been placed to: 1) determing and facilities by the municipal	performed during the ne the sources of pollutants; 2) evaluate the loperations and facilities sekeeping program, if it's Self-Assessment Operation/Activity/Facility performed within the past 3	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention not done already. Operation/Activity/Facility Addressess	ment has been in the second in	performed during the ne the sources of pollutants; 2) evaluate the loperations and facilities sekeeping program, if it's Self-Assessment Operation/Activity/Facility performed within the past 3	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention not done already. Operation/Activity/Facility Addresset Maintenance	ment has been of the to: 1) determined and facilities by the municipal nand good hou essed in SWMP Yes O No	performed during the ne the sources of pollutants s; 2) evaluate the l operations and facilities sekeeping program, if it's Self-Assessment Operation/Activity/Facility performed within the past 3 years?	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention not done already. Operation/Activity/Facility Street Maintenance	essed in SWMP Yes O No Yes O No	performed during the ne the sources of pollutants s; 2) evaluate the l operations and facilities sekeeping program, if it's Self-Assessment Operation/Activity/Facility performed within the past 3 years? Yes O No	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention not done already. Operation/Activity/Facility Street Maintenance	essed in SWMP Yes O No Yes O No Yes O No	performed during the ne the sources of pollutants s; 2) evaluate the l operations and facilities sekeeping program, if it's Self-Assessment Operation/Activity/Facility performed within the past 3 years? Yes O No Yes O No	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention not done already. Operation/Activity/Facility Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management	essed in SWMP Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No	performed during the ne the sources of pollutants s; 2) evaluate the l operations and facilities sekeeping program, if it's Self-Assessment Operation/Activity/Facility performed within the past 3 Years? Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No	
Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is performed potentially generated by the permittee's operation effectiveness of existing programs and 3) identify that will be addressed by the pollution prevention not done already. Operation/Activity/Facility Street Maintenance	essed in SWMP Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No Yes O No	performed during the ne the sources of pollutants s; 2) evaluate the l operations and facilities sekeeping program, if it's Self-Assessment Operation/Activity/Facility performed within the past 3 2	

● No ○ Yes

● No ○ Yes

O No • Yes

○ No • Yes

O No ● Yes

○ No Yes

O No O Yes

No

No

O No

O No

O No

O No

Marine Operations..... O Yes

Hydrologic Habitat Modification..... O Yes

Parks and Open Space.....

Yes

Municipal Building..... • Yes

Stormwater System Maintenance...... • Yes

Vehicle and Fleet Maintenance..... • Yes

Other..... O Yes

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

	SPDES ID
Name of MS4/Coalition Town of Vestal	N Y R 2 0 A 0 6 4
2. Provide the following information about municipal operat	ions good housekeeping programs:
Parking Lots Swept (Number of acres X Number of times swep	t) # Acres 8
• Streets Swept (Number of miles X Number of times swept)	# Miles 8 0
Catch Basins Inspected and Cleaned Where Necessary	# 5 2 6
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	# 2 8
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 0
3. How many stormwater management trainings have been parting this reporting period?	provided to municipal employees
4. What was the date of the last training?	0 2 / 0 3 / 2 0 2 1
5. How many municipal employees have been trained in this	reporting period?
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments receive

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

in submitting this form as part of a joint report on behalf of a	
Name of MSA/Coalition Town of Vestal	SPDES ID N Y R 2 0 A 0 6 4
Name of MS4/Coalition Town or Vestal	NINZOAO
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 Sy	WMPP in this reporting period.
The Town will continue to train employees regarding municipal of contribute POCs to the MS4 system. The Town will continue streastorm pipes and ditches each year and also provide brush and leaf wood chip mulch and leaf mulch for the use of the residents.	et sweeping, cleaning catch basins,
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
The accurate documentation of street sweeping, catch basin cleaniallowing greater efficiency each year. Crews are now able to more need additional attention.	
COVID did not allow mass training this year	
C. How many times was this observation measured or evaluate	ed in this reporting period?
•	4
	(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	e SWMPP?
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	
The Town will focus on training employees responsible for munic and problem areas as well as improve management of the MS4 systoperations of brush and leaf pick up, street sweeping, catch basin or	stem. The Town will continue its

This report is being submitted for the reporting period ending March 9, 2 0 2 1 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 Endicott		N		R	2	0	Α	1	1	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	hamma decreasive la com

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

			Der tormen Armin mi	, hage o
Operation/Activity/Facility	Addressed in	SWMP?	<u>vears?</u>	
Street Maintenance	• Yes	O No	• Yes O	No
Bridge Maintenance	• Yes	○ No	• Yes O	No
Winter Road Maintenance	• Yes	O No	• Yes O	No
Salt Storage	• Yes	○ No	• Yes O	No
Solid Waste Management	• Yes	O No	• Yes O	No
New Municipal Construction and Land Disturba	nce 🛡 Yes 🕠	○ No	• Yes O	No
Right of Way Maintenance	• Yes	O No	• Yes O	No
Marine Operations		• No	○ Yes •	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		O No	● Yes ○	No
Vehicle and Fleet Maintenance		○ No	• Yes O	No
Other	O Yes (○ No	O Yes O	No

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

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 Endicott	N Y R 2 0 A 1 4 9
2. Provide the following information about municipal operation	s good housekeeping programs:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres 2 0
• Streets Swept (Number of miles X Number of times swept)	# Miles 3 4 0
Catch Basins Inspected and Cleaned Where Necessary	# 2 0 0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	# 6
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 Numtimes applied to the nearest tenth.)	# Acres 0 0
3. How many stormwater management trainings have been produring this reporting period?	vided to municipal employees
4. What was the date of the last training?	0 3 / 2 9 / 2 0 1 8
5. How many municipal employees have been trained in this rep	porting period?
6. What percent of municipal employees in relevant positions as stormwater management training?	nd departments receive

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

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 Endicott	N Y R 2 0 A 1 4 9
7. Evaluating Pro	gress Toward Measurable Goals MCM 6	
identified in your St	ort on your progress and project plans toward tormwater Management Program Plan (SWM tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the	SWMPP in this reporting period.
	icott continues to train employees regarding POCs to the MS4 system.	municipal operations that could
B. Briefly summar Goal.	rize the observations that indicated the over	erall effectiveness of this Measurable
	ng period the street sweeper was utilized 400 ing catchbasins, and a total of 1000 manhour	
C. How many time	es was this observation measured or evalua	ated in this reporting period? [5 2] (ex.: samples/participants/events
D. Has your MS4 r	made progress toward this measurable go	- ·- ·
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	•
could potentially could of street sweeping, of	icott will continue to train employees respon- entribute to the MS4 system. The Village of catch basin cleaning, parking lot sweeping, a r Management Practices.	Endicott will continue its operations

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 Village of Johnson City	N Y R 2 0 A 1 0 1
	·

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

	1

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

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

			<u>performed withir</u>	the past 3
Operation/Activity/Facility	Addressed i	n SWMP?	<u>years?</u>	•
Street Maintenance	Yes	O No	• Yes	O No
Bridge Maintenance	O Yes	● No	O Yes	No
Winter Road Maintenance	• Yes	○ No	• Yes	O No
Salt Storage	• Yes	○ No	• Yes	O No
Solid Waste Management	• Yes	○ No	• Yes	O No
New Municipal Construction and Land Disturba	nce • Yes	○ No	• Yes	O No
Right of Way Maintenance	• Yes	○ No	• Yes	O No
Marine Operations	O Yes	● No	○ Yes	No
Hydrologic Habitat Modification	O Yes	● No	O Yes	No
Parks and Open Space	• Yes	O No	• Yes	\circ No
Municipal Building		O No	Yes	\bigcirc No
Stormwater System Maintenance	• Yes	○ No	• Yes	O No
Vehicle and Fleet Maintenance	• Yes	O No	● Yes	O No
Other	○ Yes	○ No	○ Yes	O No

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

	SPDES ID
Name of MS4/Coalition Village of Johnson City	N Y R 2 0 A 1 0 1
2. Provide the following information about municipal operate	tions good housekeeping programs:
Parking Lots Swept (Number of acres X Number of times swep	et) # Acres 3
• Streets Swept (Number of miles X Number of times swept)	# Miles 2 6 4 0
• Catch Basins Inspected and Cleaned Where Necessary	# 500
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	# 8
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 N times applied to the nearest tenth.)	# Acres 0.
3. How many stormwater management trainings have been parting this reporting period?	provided to municipal employees
4. What was the date of the last training?	0 2 / 1 8 / 2 0 2 1
5. How many municipal employees have been trained in this	reporting period? 3 0
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments receive

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

II Subilitui	ng this form as part of a joint report on behalf of	a coalition leave of DES 1D blank.
		SPDES ID
Name of MS4/Coalition	Village of Johnson City	N Y R 2 0 A 1 0 1
7. Evaluating Pro	ogress 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.	d achieving measurable goals MPP), including requirements in Part
A. Briefly summa	rize the Measurable Goal identified in the	SWMPP in this reporting period.
The Village contin POCs to the MS4 s	ues to employees regarding municipal operatesystem.	tions that could possibly contribute to
B. Briefly summa Goal.	rize the observations that indicated the ov	erall effectiveness of this Measurable
utilized 312 hours clean creeks & dite	ng period, the street sweeper was utilized for to clean catch-basins; the loader/backhoe/exc ches and a total of 2912 man-hours were utili rkers are continuing to be placed at all catchl	cavator were utilized 184 hours to zed for the Measurable Goal. Also,
C. How many tim	es was this observation measured or evalu	nated in this reporting period?
, and the second		150
		(ex.: samples/participants/ev
D. Has your MS4	made progress toward this measurable go	al 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 n ing cycle (including an implementation sc	
The Village will co	ontinue to train employees responsible for mute to the MS4 system. The Village will consist cleaning, creek/ditch maintenance and cl	unicipal operations that could tinue it's operations of street

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

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SPDES ID

O No

No

No

O No

O No

O No

O No

No

○ No • Yes

● No O Yes

• No • Yes

○ No Yes

○ No • Yes

O No ● Yes

○ No • Yes

● No O Yes

		=	1 D D 3 1 D	
Name of MS4/Coalition VILLAGE OF PORT DICKINSON			N Y R 2 0	A 0 8 0
Minimum Control Measure 6. Storm	water Mana	agement for	Municipal (<u>Operations</u>
The information in this section is being reported (ch	ieck one);			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this 	s report?			
1. Choose/list each municipal operation/facilify Pollutants of Concern to the MS4 system. operation/facility has been addressed in the Program(SWMP) Plan and whether a self-reporting period. A self-assessment is perpotentially generated by the permittee's operation of existing programs and 3) that will be addressed by the pollution promot done already.	For each open to MS4's/Coaf-assessment formed to: 1) perations and identify the 1	eration/facilit dition's Storm has been perf determine th I facilities; 2) municipal ope	y indicate who nwater Manag formed during ne sources of p evaluate the erations and fa	ether the ement the ollutants
			Self-Assessi	ment
		<u>o</u>	peration/Activi	
		pe	rformed within	the past 3
Operation/Activity/Facility	Addressed i	<u>n SWMP?</u>	<u>years?</u>	•
Street Maintenance	● Yes	○ No	• Yes	O No
Bridge Maintenance	O Yes	● No	○ Yes	No
Winter Road Maintenance	• Yes	○ No	● Yes	O No
Salt Storage	• Yes	○ No	● Yes	O No
Solid Waste Management	• Yes	○ No	● Yes	O No
New Municipal Construction and Land Disturba	nce O Yes	No	O Yes	No

New Municipal Construction and Land Disturbance.. O Yes

Right of Way Maintenance.....

Yes

Marine Operations..... O Yes

Hydrologic Habitat Modification..... O Yes

Parks and Open Space..... • Yes

Municipal Building.....

Yes

Stormwater System Maintenance..... • Yes Vehicle and Fleet Maintenance.....

Yes

Other..... O Yes

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

	SPDES ID		
Name of MS4/Coalition VILLAGE OF PORT DICKINSON	N Y R 2	0 A 0	8 0
2. Provide the following information about municipal operation	ons good housekeep	ping pro	grams:
Parking Lots Swept (Number of acres X Number of times swept)) # Acres		2
• Streets Swept (Number of miles X Number of times swept)	# Miles		9
Catch Basins Inspected and Cleaned Where Necessary	#		9 8
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#		0
Phosphorus Applied In Chemical Fertilizer	# Lbs.		0
Nitrogen Applied In Chemical Fertilizer	# Lbs.		0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Nutimes applied to the nearest tenth.)	# 110103	0	
3. How many stormwater management trainings have been pr during this reporting period?	ovided to municipa	al emplo	yees 1
4. What was the date of the last training?	0 3 / 0 3	/ 2 0	2 1
5. How many municipal employees have been trained in this r	reporting period?		3
6. What percent of municipal employees in relevant positions stormwater management training?	and departments r	eceive	0 %

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

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 PORT DICKINSON N Y R 2 0 A 0 8 0
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.
CLEANING OF STREETS AND PARKING LOTS, INSPECTION OF CATCHBASINS, AND GOOD HOUSEKEEPING. Measurable goal is to reduce pollutants of concern through the use of good housekeeping programs. Also, to ensure that all relevant staff receive good housekeeping training.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
THE SWEEPING WAS DONE SIX DAYS AND THE CATCHBASINS WERE INSPECTED. There has been a decrease in migration of materials to the streams and rivers due to catch basin and culvert cleaning. YARD WASTE PICK-UP WAS DONE 24 DAYS, LEAF PICK-UP WAS DONE 21 DAYS.
C. How many times was this observation measured or evaluated in this reporting period? [2] [ex.: samples/participants/events]
D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes • 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).
ALL EMPLOYEES GET GOOD HOUSEKEEPING TRAINING ONCE A YEAR. Continue to evaluate good housekeeping programs and implement new practices to reduce pollutants of concern. Continue to attend stormwater management training(s) when available.

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

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		SPE	ES	ID						
Name of MS4/Coalition	BROOME COUNTY	N	Y	R	2	0	Α	3	3	2
•										

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

1

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

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

		<u>perform</u>	<u>ed withir</u>	ı the past 3
Operation/Activity/Facility	Addressed i	n SWMP?	years?	•
Street Maintenance	• Yes	○ No	Yes	O No
Bridge Maintenance	• Yes	○ No	Yes	O No
Winter Road Maintenance	● Yes	○ No	Yes	O No
Salt Storage	• Yes	○ No	Yes	O No
Solid Waste Management	• Yes	O No	Yes	O No
New Municipal Construction and Land Disturba	nce • Yes	O No	Yes	O No
Right of Way Maintenance	• Yes	O No	Yes	O No
Marine Operations	O Yes	● No	O Yes	No
Hydrologic Habitat Modification	• Yes	○ No	Yes	O No
Parks and Open Space	• Yes	○ No	Yes	O No
Municipal Building	• Yes	○ No	Yes	\circ No
Stormwater System Maintenance	• Yes	○ No	Yes	O No
Vehicle and Fleet Maintenance		O No		\circ No
Other	• Yes	O No	Yes	O No

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

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

Name of MS4/Coalition BROOME COUNTY YR 2 0 Α 3 3 | 2. Provide the following information about municipal operations good housekeeping programs: # Acres Parking Lots Swept (Number of acres X Number of times swept) # Miles • Streets Swept (Number of miles X Number of times swept) 3 3 4 # Catch Basins Inspected and Cleaned Where Necessary 2 5 9 Post Construction Control Stormwater Management Practices # 6 Inspected and Cleaned Where Necessary # Lbs. Phosphorus Applied In Chemical Fertilizer # Lbs. Nitrogen Applied In Chemical Fertilizer 3 4 7 6 Pesticide/Herbicide Applied # Acres 3 7 8 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) 3. How many stormwater management trainings have been provided to municipal employees during this reporting period? 0 4. What was the date of the last training? 2 5. How many municipal employees have been trained in this reporting period? 0 6. What percent of municipal employees in relevant positions and departments receive stormwater management training? 8 0 %

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

SPDES ID
Name of MS4/Coalition BROOME COUNTY N Y R 2 0 A 3 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.
MEASURABLE GOAL #6A To complete a self-assessment every 3 years for each of the 22 County facilities within the MS4 jurisdictional area, and then to use these assessments to evaluate established good housekeeping and implement changes as needed.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Self-assessments at the 22 County Facilities within the MS4 boundaries were 100% completed during the 2019-2020 reporting year, including on-site inspections at each facility by DPW staff. The next self assessment is due during the 2022-2023 reporting year.
C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this reporting period?
● Yes ○ No E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes ○ No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Complete the next 3-year assessment of County Facilities during the 2023-2024 reporting period. Continue to adjust individualized reporting checklists for each facility use, as operations change, and based on their individual needs and functions.

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

in submitting this form as part of a joint report on ochan of a coantion scave of	
Name of MS4/Coalition BROOME COUNTY SPDES N Y	
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward achieving meas identified in your Stormwater Management Program Plan (SWMPP), including re III.C.1. Submit additional pages as needed.	_
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
MEASURABLE GOAL #6B To sweep 100% of County Roads and Parking L boundaries at least once annually in accordance with Good Housekeeping measurements.	
B. Briefly summarize the observations that indicated the overall effectivenes Goal.	ss of this Measurable
During the 2020-2021 reporting year, the MS4 road boundaries and infrastructurupgraded for better accuracy and tracking has slightly improved. Although roads were swept, we did not get the MS4 boundary definition completed as described still an issue. For facility parking lots, lots in common areas were grouped togeth efficiency.	and parking lots because tracking is
C. How many times was this observation measured or evaluated in this repo	rting period?
	3 5 8
D. Has your MS4 made progress toward this measurable goal during this re	<pre>(ex.: samples/participants/eve porting period?</pre>
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).	
Continue working together with Highways to accomplish all roads and parking loboundary and create a better tracking system.	ots within the MS4

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

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			SPL)ES	Ш						
Name of MS4/Coalition BROOME COUNTY		N	Y	R	2	0	Α	3	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.

MEASUREABLE GOAL #6C -- To clean and inspect 50% of catch basins and drop inlets within the MS4 boundary annually.

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

Cleaning / inspection is occurring by County Highway Division each year, however, we do not have confirmation whether 50% of structures as denoted in this goal are actually being cleaned and inspected due to the lack of good mapping. Catch basins have been assigned IDs and Highways has been provided with accurate locations of the catch basins within the boundary.

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

2 5 9

(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 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).

Work on optimizing the cleaning by grouping nearby roads together to be cleaned on the same day. And during 2021-2022 a goal is to continue working towards a map of closed systems within the MS4 boundary and identifying CB structures. From there better tracking will take place of which catch basins are inspected and cleaned.

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

		SPDES ID	
Name of MS4/Coalition	BROOME COUNTY	N Y R 2	0 A 3 3 2
7. Evaluating Pro	gress Toward Measurable Goals MCM	6	
identified in your St	port on your progress and project plans tow tormwater Management Program Plan (SV itional pages as needed.		
A. Briefly summar	rize the Measurable Goal identified in t	he SWMPP in this repo	rting period.
MEASUREABLE chemical fertilizers	GOAL #6D To minimize the amount o	f phosphorus and nitroger	applied in
B. Briefly summan	rize the observations that indicated the	overall effectiveness of t	his Measurable
	s are only being used / applied at the En Jour Parks or other facilities, except for sma		
C. How many time	es was this observation measured or eva	luated in this reporting	period?
			1
T			samples/participants/events)
D. Has your MS4 i	made progress toward this measurable	goal during this reporti	ng period? ● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth	in the SWMPP?	C 105 C 110
15. 15 your 1454 on	senedule to meet the deadline set for the	m the Switter.	● Yes ○ No
•	rize the stormwater activities planned to ing cycle (including an implementation	-	1CM during
Continue as develor nitrogen contents.	ped and implemented, and continue to mo	nitor materials for phosph	norus /

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

Name of MS4/Coalition	BROOME COUNTY		N Y R 2 0 A	3 3 2
7. Evaluating Pro	gress Toward Measurable Goals N	1CM 6		
identified in your St	ort on your progress and project plan ormwater Management Program Pla tional pages as needed.			ı Part
A. Briefly summar	rize the Measurable Goal identified	d in the SWMPP i	in this reporting per	riod.
MEASUREABLE MS4 boundaries.	GOAL #6E To minimize the acrea	ige of herbicide/pe	sticide usage within	the
B. Briefly summar Goal.	ize the observations that indicated	l the overall effect	tiveness of this Mea	surable
Herbicides are only En-Joie golf course	being used along County roadways	at guide rail locati	ons as needed, and a	t
C. How many time	s was this observation measured o	er evaluated in thi	s reporting period?	
				4 9
D. Has your MS4 r	nade progress toward this measur	able goal during (rticipants/events) d?
,	. 0		• Yes	○ No
E. Is your MS4 on	schedule to meet the deadline set t	forth in the SWM	PP? • Yes	O No
	ize the stormwater activities planr ng cycle (including an implementa			
	ion to the greatest extent possible anntal friendly options and a way to cu	-		ook

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

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Name of MS4/Coalition BROOME COUNTY SPDES ID N Y R 2 0 A 3	3 3 2
Name of MS4/Coalition	7 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 III.C.1. Submit additional pages as needed.	ı Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting per	riod.
MEASUREABLE GOAL #6F To develop staff training related to the stormwater program, and good housekeeping measures, and to have 100% of applicable County staff educated in accordance with this goal. This goal will be accomplished in part by the BTSC as part of MCM and MCM-2, they will assist in the creation of applicable training materials and opportunities.	
B. Briefly summarize the observations that indicated the overall effectiveness of this Mea Goal.	surable
A general power point presentation was developed for specific groups of employees to educate them about stormwater, good housekeeping measures and IDDE.	;
C. How many times was this observation measured or evaluated in this reporting period?	
	1
ex.: samples/pa. D. Has your MS4 made progress toward this measurable goal during this reporting perio	
• Yes	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	0.34
Yes F. Briefly summarize the stormwater activities planned to meet the goals of this MCM du the next reporting cycle (including an implementation schedule).	O No ring
Continue educational outreach to all County employees - specifically targeting those identified during the self-assessment process as critical (such as custodial workers, fleet staff, Highways, Continue developing more targeted training materials related to Good Housekeeping measures to different groups of employees depending on their job responsibilities.	etc.).

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

nnoova a		SPDES ID	7
Name of MS4/Coalition BROOME C	OUNTY	N Y R 2 0 A 3 3 2	J
7. Evaluating Progress Tov	vard Measurable Goals MCM 6		
		I achieving measurable goals (PP), including requirements in Part	
A. Briefly summarize the M	leasurable Goal identified in the S	SWMPP in this reporting period.	7
training to new County emple	oG To target 100% distribution of oyees upon orientation. This goal was MCM-2, they will assist in the creater		
B. Briefly summarize the ol Goal.	bservations that indicated the ove	rall effectiveness of this Measurabl	e
Printed material is developed	l but not currently distributed to new	w employees during orientation.	
C. How many times was thi	is observation measured or evalua	1	_
D. Has your MS4 made nro	gress toward this measurable goa	ex.: samples/participan al during this renorting neriod?	its/events)
D. Has your MIST made pro	gress toward this measurable goa	○ Yes • No	0
E. Is your MS4 on schedule	to meet the deadline set forth in t		_
	ormwater activities planned to mo		_
Goal this reporting period is a employees during their orient training PowerPoint as well.	to work with the Personnel Departm tation. Upon being hired into the de	nent to distribute to all new partment they will complete the	:

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

	SPDES ID
Name of MS4/Coalition BROOME COUNTY	N Y R 2 0 A 3 3 2
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 (SWM III.C.1. Submit additional pages as needed.	•
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
MEASUREABLE GOAL #6H To maintain the County's exist established and to keep these plans current with any changes in s	
B. Briefly summarize the observations that indicated the overGoal.	erall effectiveness of this Measurable
Existing SPCC plans are reviewed annually for compliance with regulations. In addition, County SPCC plans were reviewed and COVID-19 pandemic, no SPCC trainings were held.	
C. How many times was this observation measured or evalua	0
D. Has your MS4 made progress toward this measurable goa	(ex.: samples/participants/even al 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	eet the goals of this MCM during
Continue program as established tracking that 100% of staff train within the SPCC plan documents. Training is normally offered or should added to accommodate staff. During this next reporting per of all staff members at each facility or within each department the	eriod the County will develop a list

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

Name of MS4/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3 3 2
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 SV	WMPP in this reporting period.
MEASUREABLE GOAL #6I To complete an updated and deta and facilities within the MS4 boundaries (including updated mapp specific good housekeeping programs for each.	
B. Briefly summarize the observations that indicated the overa	all effectiveness of this Measurable
There are 18 County facilities, 4 County parks, and 1 County Goldboundary.	f Course located within the MS4
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? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheen	9
During the 2021-2022 reporting period, the new procedures and ir housekeeping procedures will be continued and changes made acc program.	• • • • • • • • • • • • • • • • • • • •

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

Name of MS4/Coalition BROOME COUNTY	SPDES ID N Y R 2 0 A 3 3 2
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.
MEASUREABLE GOAL #6J To implement program tracking individualized for each County facility based on the good housek accordance with the NYSDEC tracking system and forms so that transition to this annual reporting method once it is implemented	eeping documents and in the County will be in a position to
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
This was a new program goal in 2016. Individualized annual rep and are being used to report on parameters measured in the annual tracking have been created for general good housekeeping tasks twriter for accountability at the facilities.	al DEC permit report. Forms and
C. How many times was this observation measured or evaluate	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 t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
Continue to update the reporting forms to the most recent type of new NYSDEC permit is issued.	reporting and be prepared when the

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

	SPDES ID
Name of MS4/Coalition Tioga County	N Y R 2 0 A 0 4 7
Minimum Control Measure 6. Sto	rmwater Management for Municipal Operations
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?
Pollutants of Concern to the MS4 syst operation/facility has been addressed Program(SWMP) Plan and whether a reporting period. A self-assessment is potentially generated by the permittee effectiveness of existing programs an	facility that contributes or may potentially contribute em. For each operation/facility indicate whether the in the MS4's/Coalition's Stormwater Management self-assessment has been performed during the performed to: 1) determine the sources of pollutants is operations and facilities; 2) evaluate the d 3) identify the municipal operations and facilities a prevention and good housekeeping program, if it's
	<u>Self-Assessment</u> Operation/Activity/Facility
	performed within the past 3
Operation/Activity/Facility	Addressed in SWMP? years?
Street Maintenance	● Yes ○ No ○ Yes ● No

		perre	A INCO WILLIAM	the past 5
Operation/Activity/Facility	Addressed in	n SWMP?	<u>years?</u>	
Street Maintenance	Yes	O No	• Yes	No
Bridge Maintenance	● Yes	O No	O Yes	No
Winter Road Maintenance		O No	O Yes	No
Salt Storage	● Yes	O No	O Yes	No
Solid Waste Management		O No	○ Yes	No
New Municipal Construction and Land Disturba	· · · · ·	O No	O Yes	No
Right of Way Maintenance	• Yes	O No	• Yes	No
Marine Operations	○ Yes	● No	O Yes	No
Hydrologic Habitat Modification	O Yes	● No	O Yes	No
Parks and Open Space	O Yes	● No	O Yes	No
Municipal Building	• Yes	O No	O Yes	No
Stormwater System Maintenance		O No	O Yes	No
Vehicle and Fleet Maintenance		○ No	O Yes	No
Other	O Yes	No	O Yes	No

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

	SPDES ID
Name of MS4/Coalition Tioga County	N Y R 2 0 A 0 4 7
2. Provide the following information about municipal operat	ions good housekeeping programs:
O Parking Lots Swept (Number of acres X Number of times swep	t) # Acres
O Streets Swept (Number of miles X Number of times swept)	# Miles
• Catch Basins Inspected and Cleaned Where Necessary	# 5 5
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 N times applied to the nearest tenth.)	umber of # Acres 0 .
3. How many stormwater management trainings have been p	provided to municipal employees
during this reporting period?	
4. What was the date of the last training?	02/10/2021
5. How many municipal employees have been trained in this	reporting period?
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments receive

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

SPDI	ES ID
Name of MS4/Coalition Tioga County N	Y R 2 0 A 0 4 7
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward achieving me identified in your Stormwater Management Program Plan (SWMPP), including III.C.1. Submit additional pages as needed.	asurable goals requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in th	is reporting period.
Tioga County Public Works continues to follow the best management practice: "Tioga County and Town of Owego Stormwater Management Program Plan", through 2020	
B. Briefly summarize the observations that indicated the overall effectiven Goal.	less of this Measurable
No illicit discharges or spills, leaks observed	
C. How many times was this observation measured or evaluated in this rep	porting 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 O No
F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).	of this MCM during
Continue to follow EPA/OSHA self audit recommendations conducted 11 year	
also been incorporated into the Tioga County and Town of Owego Stormwater Program Plan 2020. County Public Works continue to follow all recommenda	
2013 and 2019 audits	