NYR20A

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2011

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MS4 Annual Report Cover Page

MCC form for period ending March 9, 2011

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March $9, \boxed{20 |11|}$

Name of MS4	SPDES ID NYR20A	
Each MS4 must submit an MCC form.		
Section 1 - MCC Identification Page		
Indicate whether this MCC form is being submitted to certify endorsement	or acceptance of:	
● An Annual Report for a single MS4		
A Single Entity (Per Part II.E of GP-0-10-002)		
O A Joint Report		
Joint reports may be submitted by permittees with legally bin	nding agreements.	
If Joint Report, enter coalition name:		

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2011

Name of MS4	SPDES ID NYR20A									
Section 2 - Contact Information										
Important Instructions - Please Read										
Contact information must be provided for <u>each</u> of the following pos	sitions as indicated below:									
1. Principal Executive Officer, Chief Elected Official or other qual GP-0-08-002 Part VI.J).	ified individual (per									
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-0-08-00	2 Part VII.A.2.c & Part VIII.A.2.c).									
4. The Stormwater Management Program (SWMP) Coordinator (In coordination/implementation of SWMP).	ndividual responsible for									
5. Report Preparer (Consultants may provide company name in the	space provided).									
1	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									
If a new Duly Authorized Representative is signing this report, a provided and a signature authorization form, signed by the Prince Elected Official must be attached.										
For each contact, select all that apply:										
O Principal Executive Officer/Chief Elected Official										
Ouly Authorized Representative										
O Local Stormwater Public Contact										
O Stormwater Management Program (SWMP) Coordinator										
O Report Preparer										
First Name MI Last Name										
That it is the control of the contro										
Title										
Address										
City Stat	e Zip									
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Phone County										
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MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2011

	SPDES ID
Name of MS4	NYR20A
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all peri	mit requirements during this reporting
period?	Yes ON
If Yes, complete information below.	
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.	
Partner/CoalitionName	
Oneida Co Soil and Water CD	
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicabl
	NINE O
Address 121 Second Street	
City Sta	te Zip
Oriskany NY	
Mail	
jo-anne-humphreys@oneidaswcd.org	
	Binding Agreement in accordance P-0-08-002 Part IV.G.? Yes N
What tasks/responsibilities are shared with this partner (e.g. MM1	School Programs or Multiple Tasks
MM1 outreach to residents	
ommo annual report assistance	
MM3 Outlall recon	
MM4 site plan review	
MM5 stormwater inspection	
MM6 garage assessments	
Additional tasks/responsibilities	
Watershed Improvement Strategy Best Management Practices	required for MS4s in impaired
watersheds included in GP-0-08-002 Part IX.	1

Albany, New York 12233-3505

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2011

	SPDES ID
Name of MS4	NYR20A
Section 4 - Certification Statement	
"I certify under penalty of law that this document and all attachments direction or supervision in accordance with a system designed to assurproperly gathered and evaluated the information submitted. Based on persons who manage the system, or those persons directly responsible the information submitted is, the best of my knowledge and belief, tru aware that there are significant penalties for submitting false information and imprisonment for knowing violations."	re that qualified personnel my inquiry of the person or e for gathering the information, ne, accurate, and complete. I am
This form must be signed by either a principal executive officer or rar authorized representative of that person as described in GP-0-08-002	· ·
First Name MI Last Name	
Title (Clearly print title of individual signing report)	
Signature	Date /
Send completed form and any attachments to the DEC Central Office MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway	at:

This report is being submitted for the reporting period ending March 9, 2011If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20 Name of MS4/Coalition **Water Quality Trends** The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. Yes No If Yes, choose one of the following Report(s) attached to the annual report Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page. URL URL URL URL

This report is being submitted for the reporting period ending March 9, $\boxed{2011}$

If submitting this form as part of a joint report on behalf of								
	SPDES ID NYR20							
Name of MS4/Coalition								
Minimum Control Measure 1. Public Ed	ucation and Outreach							
The information in this section is being reported (check one):								
On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?								
How many MS4s contributed to this report?								
1. Targeted Public Education and Outreach Best Managem	ent Practices							
Check all topics that were included in Education and Outreach d	uring this reporting period:							
○ Construction Sites	O Pesticide and Fertilizer Application							
O General Stormwater Management Information	O Pet Waste Management							
O Household Hazardous Waste Disposal	O Recycling							
O Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration							
○ Infrastructure Maintenance	○ Trash Management							
○ Smart Growth	O Vehicle Washing							
○ Storm Drain Marking	O Water Conservation							
○ Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection							
Other:	○ None							
Other								
2. Specific audiences targeted during this reporting period:								
○ Public Employees ○ Contractors								
○ Residential ○ Developers								
○ Businesses ○ General Public								
○ Restaurants ○ Industries								
Other: O Agricultural								
Other								

This report is being submitted for the reporting period ending March 9, 2011

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20 Name of MS4/Coalition 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply: 308 O Construction Site Operators Trained #Trained O Direct Mailings # Mailings O Kiosks or Other Displays # Locations O List-Serves # In List O Mailing List # In List O Newspaper Ads or Articles # Days Run O Public Events/Presentations # Attendees O School Program # Attendees ○ TV Spot/Program # Days Run O Printed Materials: Total # Distributed Locations (e.g. libraries, town offices, kiosks) Oneida Co. Farm and Home Center Other: O Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed. www.oneidaswcd.org

This report is being submitted for the reporting period ending March 9, 2011

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MS4 Annual Report Form

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

This report is being submitted for the reporting period ending March 9, 2011

	SPDES ID
Name of MS4/Coalition	NYR20
4. Evaluating Progress Toward Measurable Goals MCM 1	
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	1 31
SWCD completed erosion and sediment control training for over reporting period.	300 contractors during the
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness 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 during this reporting period?

Vac	\bigcirc No

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

Yes	\bigcirc No

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

Continue to train contractors. Continue to post relevant information on websites and make information available in public areas.

This report is being submitted for the reporting period ending March 9, 2011

In a late of the female and the reporting period		
If submitting this form as part of a joint report on behalf of a c	coalition leave SPDES SPDES ID	SID blank.
Name of MS4/Coalition	NYR20	
Minimum Control Measure 2. Public Involven	vement/Particip	ation_
The information in this section is being reported (check one):	_	
On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1. What opportunities were provided for public participation development, evaluation and improvement of the Stormwar (SWMP) Plan during this reporting period? Check all that	ter Management P	,
○ Cleanup Events	# Events	3
O Comments on SWMP Received	#Comments	0
○ Community Hotlines Phone # ()] -
Phone # (Phone # ()] -
Phone # (Phone # ()	_
Phone # (Phone # ()	-
Phone # (Phone # ()] -
Phone # (Phone # (
O Community Meetings	# Attendees	
○ Plantings	Sq. Ft.	
○ Storm Drain Markings	# Drains	
O Stakeholder Meetings	# Attendees	
O Volunteer Monitoring	# Events	
Other:		
2. Was public notice of availability of this annual report and S Program (SWMP) Plan provided?	Stormwater Mana	gement Yes ONo
O List-Serve	# In List	
O Newspaper Advertising	# Days Run	
○ TV/Radio Notices	# Days Run	
Other:		

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

MCM 2 Page 1 of 6

This report is being submitted for the reporting period ending March 9, 2011

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This report is being submitted for the reporting period ending March 9, 2011

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

This report is being submitted for the reporting period ending March 9, 2011

	SPDES ID
Name of MS4/Coalition	NYR20
3. Where can the public access copies of this annual report,	. Stormwater Management
Program SWMP) Plan and submit comments on those do	
Enter address/contact info and select radio button to indicate	which document is available and
whether comments may be submitted at that location. Subm	
MS4/Coalition Office O Annual	
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Address	
City	Zip
Phone	
(
Library O Annual Address	Report O SWMP Plan O Comments
City	Zip
Phone	
Other OAnnual Address	Report O SWMP Plan O Comments
City	Zip
Phone	
Web Page URL: Annual	Report OSWMP Plan OComments
Please provide specific address of page where report can b	
○ eMail	© Comments

This report is being submitted for the reporting period ending March 9, 2011

	SPDES ID	
Name of MS4/Coalition	NYR20	
4.a. If this report was made available on the internet, what date	te was it posted?	
Leave blank if this report was not posted on the internet.		
4.b. For how many days was/will this report be posted?		365
If submitting a report for single MS4, answer 5.a If submitti	ing a joint report, answer 5	.b
5.a. Was an Annual Report public meeting held in this reporti	ing period? OY	es O No
If Yes, what was the date of the meeting?		
If No, is one planned?	© Y	es ONo
5.b. Was an Annual Report public meeting held for all MS4s of	•	
this reporting period?	◎ Y	es O No
If No, is one planned for each?	© Y	es O No
6. Were comments received during this reporting period?	⊚ Y	es N o
If Yes, attach comments, responses and changes made to		
SWMP in response to comments to this report.		

This report is being submitted for the reporting period ending March 9, 20|11|

	SPDES ID
Name of MS4/Coalition	NYR20
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward achi identified in your Stormwater Management Program Plan (SWMPP), III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWM	IPP in this reporting period.
Cleanup events held in the Oriskany Creek Watershed and the Sauquo	oit Creek Watershed.
B. Briefly summarize the observations that indicated the overall ϵ Goal.	effectiveness of this Measurable
C. How many times was this observation measured or evaluated i	n this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal dur	ring this reporting period? Yes ONo
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 next reporting cycle (including an implementation schedule	

This report is being submitted for the reporting period ending March 9, 2011

T 63.50.4/G 11.1	SPDES ID NYR20
Name of MS4/Coalition	
Minimum Control Measure	3. Illicit Discharge Detection and Elimination
The information in this section is being report	ted (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. perce	ent of outfalls mapped: #
•	en screened for dry weather discharges during this
reporting period (outfall reconnaissa	ance inventory)?
3.a. What types of generating sites/sewer reporting period?	rsheds were targeted for inspection during this
O Auto Recyclers	○ Landscaping (Irrigation)
O Building Maintenance	○ Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
Commercial CarwashesCommercial Laundry/Dry Cleaners	Outdoor Fluid StorageParking Lot Maintenance
	· ·
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
Commercial Laundry/Dry CleanersConstruction Vehicle Washouts	○ Parking Lot Maintenance○ Printing
Commercial Laundry/Dry CleanersConstruction Vehicle WashoutsCross-Connections	Parking Lot MaintenancePrintingResidential Carwashing
 Commercial Laundry/Dry Cleaners Construction Vehicle Washouts Cross-Connections Distribution Centers 	 Parking Lot Maintenance Printing Residential Carwashing Restaurants
 Commercial Laundry/Dry Cleaners Construction Vehicle Washouts Cross-Connections Distribution Centers Food Processing Facilities 	 Parking Lot Maintenance Printing Residential Carwashing Restaurants Schools and Universities
 Commercial Laundry/Dry Cleaners Construction Vehicle Washouts Cross-Connections Distribution Centers Food Processing Facilities Garbage Truck Washouts 	 Parking Lot Maintenance Printing Residential Carwashing Restaurants Schools and Universities Septic Maintenance
 Commercial Laundry/Dry Cleaners Construction Vehicle Washouts Cross-Connections Distribution Centers Food Processing Facilities Garbage Truck Washouts Hospitals 	 Parking Lot Maintenance Printing Residential Carwashing Restaurants Schools and Universities Septic Maintenance Swimming Pools
 Commercial Laundry/Dry Cleaners Construction Vehicle Washouts Cross-Connections Distribution Centers Food Processing Facilities Garbage Truck Washouts Hospitals Improper RV Waste Disposal 	 Parking Lot Maintenance Printing Residential Carwashing Restaurants Schools and Universities Septic Maintenance Swimming Pools Vehicle Fueling

This report is being submitted for the reporting period ending March 9, 2011

Name	of M	S4/Coa	ılitic	on																	NY								
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○ Flo	S O Sanitary Sewer Overflows																												
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	How many illicit discharges/potential illegal connections have been detected during this reporting period?																												
	. How many illicit discharges have been confirmed during this reporting period?															[$\overline{}$										
5. H	5. How many illicit discharges have been confirmed during this reporti														rtin	g p	eri	iod'	?	l									
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This report is being submitted for the reporting period ending March 9, 2011

	SPDES ID
Name of MS4/Coalition	NYR20
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
SWCD provided training to MS4 communities on IDDE with the the day teaching MS4 representatives in the classroom and out in	
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
C. How many times was this observation measured or evaluat	
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events) during this reporting period?
v - 1 8	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 me the next reporting cycle (including an implementation sche	9

This report is being submitted for the reporting period ending March 9, |20|11If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20 Name of MS4/Coalition Minimum Control Measures 4 and 5. **Construction Site and Post-Construction Control** The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for **Stormwater Discharges from Construction Activities?** Yes No 1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap OYes ONO ONT **Analysis Workbook?** If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. © 09/2004 © 03/2006 2. Does your MS4/Coalition have a SWPPP review procedure in place? **○** Yes 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?

SWPPP process?

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

Yes No

ONT

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:

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

This report is being submitted for the reporting period ending March 9, 2011

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if submitting this form as part of a joint report on behalf of	of a coantion leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition	NYR20
Minimum Control Measure 4. Construction Si	ite Stormwater Runoff Control
The information in this section is being reported (check one):	
On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1. How many construction projects have been authorized a during this reporting period?	for disturbances of one acre or more
2. How many construction projects disturbing at least one during this reporting period?	acre were active in your jurisdiction
3. What percent of active construction sites were inspected	d during this reporting period? ONT
4. What percent of active construction sites were inspected	d more than once? ONT 100 %
5. Do all inspectors working on behalf of the MS4s contril Construction Stormwater Inspection Manual?	buting to this report use the NYS Yes No NT
6. Does your MS4/Coalition provide public access to Stori (SWPPPs) of construction projects that are subject to M	
If your MS4 is Non-Traditional, are SWPPPs of construpublic review?	
If Yes, use the following page to identify location(s) where	e SWPPPs can be accessed.

This report is being submitted for the reporting period ending March 9, 2011

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	NYR20
6. con't.:	
Submit additional pages as needed.	
○ MS4/Coalition Office	
Department	
Address	
City	Zip
Phone	
(
○ Library	
Address	
City	Zip
Phone	
()	
○ Other	
Address	
City	Zip
Phone	
(
O Web Page URL(s): Please provide specific address where SWPPPs	can be accessed - not home page.
URL	1 6
URL	

This report is being submitted for the reporting period ending March 9, 2011

If submitting this form as part of a joint report on behalf of a	
in submitting this form as part of a joint report on benaif of a	SPDES ID
	NYR20
Name of MS4/Coalition	
. 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.	e e
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
SWCD's CPESC reviews all SWPPPs that are presented to the M SWPPP Acceptance Form. Contractors working in Oneida Coun opportunities to attend 4 hour DEC Erosion and Sediment Control	ty and vicinity have had multiple
	11 66 4. 641. M. 11
	rall effectiveness of this Measurable
Goal.	ted in this reporting period?
B. Briefly summarize the observations that indicated the over Goal. C. How many times was this observation measured or evaluate D. Has your MS4 made progress toward this measurable goals.	ted in this reporting period?
C. How many times was this observation measured or evaluate D. Has your MS4 made progress toward this measurable goal	ced in this reporting period? (ex.: samples/participants.) during this reporting period? Yes O No the SWMPP?
Goal. C. How many times was this observation measured or evaluate	during this reporting period? (ex.: samples/participants, during this reporting period? Yes ONo the SWMPP? Yes ONo the goals of this MCM during

Other:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2011

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20 Name of MS4/Coalition Minimum Control Measure 5. Post-Construction Stormwater Management The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period? # Times **Inventoried Inspections** Maintained O Alternative Practices O Filter Systems ○ Infiltration Basins Open Channels O Ponds O Wetlands Other 2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance? O Yes No 3. What types of non-structural practices have been used to implement Low Impact **Development/Better Site Design/Green Infrastructure principles?** O Building Codes O Municipal Comprehensive Plans Overlay Districts Open Space Preservation Program O Local Law or Ordinance ○ Zoning O Land Use Regulation/Zoning ○ None O Watershed Plans Other Comprehensive Plan

This report is being submitted for the reporting period ending March 9, 20

9,20)11		
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		SPDES ID		
Na	me of MS4/Coalition	NYR20		
4a	. Are the MS4s contributing to this report involved in a regional/water	rshed wide plan	_	
4h	o. Does the MS4 have a banking and credit system for stormwater man	eagament practi		◎ No
TU	. Does the M54 have a banking and credit system for stormwater man	agement practi	© Yes	◎ No
4c	. Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormward of the stormward o	_	nt practic	
4 d	l. How many stormwater management practices have been implemented reporting period?	ed as part of thi	s system i	n this
5.	What percent of municipal officials/MS4 staff responsible for progratraining on Low Impace Development (LID), Better Site Design (BSI Infrastructure principles in this reporting period?	-		led

period.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, |20|11

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20 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. Green Infrastructure training provided to MS4s on January 19th and February 18th of reporting period. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. 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? O Yes E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? O Yes O No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during

Planning Boards will receive training on Green Infrastructure regulations during the next reporting

the next reporting cycle (including an implementation schedule).

This report is being submitted for the reporting period ending March 9, 2011

If submitting this form as part of a joint report on behalf of a coalit	ion leave SPDES ID blank.
Name of MS4/Coalition	SPDES ID NYR20
Minimum Control Measure 6. Stormwater Management	t 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 Pollutants of Concern to the MS4 system. For each operation/facility has been addressed in the MS4's/Coalition's S	acility indicate whether the
Program(SWMP) Plan and whether a self-assessment has been	performed during the

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? **○** No **○** Yes O No Bridge Maintenance.....

Yes O No O Yes O No **○** No **○** Yes O No Winter Road Maintenance..... • Yes Salt Storage..... • Yes O No O Yes O No ○ No ○ Yes O No Solid Waste Management..... • Yes O No Yes O No New Municipal Construction and Land Disturbance.. • Yes Right of Way Maintenance..... © Yes O No Yes O No Marine Operations..... O Yes No Ves No No Yes No Hydrologic Habitat Modification...... O Yes Parks and Open Space..... Yes O No Yes O No O No **○** No **○** Yes O No Stormwater System Maintenance......

Yes O No Yes O No Vehicle and Fleet Maintenance..... Yes O No

This report is being submitted for the reporting period ending March 9, $\boxed{20 |11}$

	SPDES ID	
Name of MS4/Coalition	NYR20	
2. Provide the following information about municipal operations g	good housekeep	oing programs:
O Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
O Streets Swept (Number of miles X Number of times swept)	# Miles	
O Catch Basins Inspected and Cleaned Where Necessary	#	
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)	# Acres [-
3. How many stormwater management trainings have been provided during this reporting period?	led to municipa	al employees
4. What was the date of the last training?	02 / 18	/ 2011
5. How many municipal employees have been trained in this report	rting period?	
6. What percent of municipal employees in relevant positions and stormwater management training?	departments r	eceive

This report is being submitted for the reporting period ending March 9, 2011

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20 Name of MS4/Coalition 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. Highway personnel within MS4 areas received training on September 29th and February 18th. The September training dealt with erosion and sediment control during ditching operations, as presented by Richard Coriale of the NYSDEC. The February training dealt with Green Infrastructure and Spill management in highway facilities. Highway personnel worked with SWCD to complete annual assessment and identify potential pollution hotspots within the municipality. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal. 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? O Yes E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

the next reporting cycle (including an implementation schedule).

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during

O Yes O No

-	1 3 1	it on ochan or a coantion	leave SPDES ID blank.
			SPDES ID
CMCA/C 1:4:			NYR20
e of MS4/Coalition			
Additional Wate	ershed Improvemen	nt Strategy Best Ma	nagement Practices
Traditional * * dec	Isrica Impi ovemen	it Believes, Dest ivia	ingement i inches
information in this section	n is being reported (check	cone):	
n behalf of an individual	MS4		
n behalf of a coalition	4s contributed to this re	enort?	
now many MS	48 continuited to this re	sport:	
4s must answer the qu	estions or check NA a	s indicated in the table	e below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	1224567- 10-010	- 10.11.12	- Dll
aditional Land Use aditional Non-Land Use	1,2,3,4,5,6,7a-d,8a,8b,9 1,2,3,4,7a-d,8a,8b,9	10,11,12 5,10,11,12	Phosphorus Phosphorus
on-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	-	-	-
aditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
aditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
on-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	-	-	-
aditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
aditional Non-Land Use	1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
on-Traditional Oyster Bay	1,4,0,7a-0,8a,9	2,3,5,8b,10,11,12	Phosphorus
aditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
aditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
on-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary	-	-	-
aditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
aditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
on-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	-		- DI 1
aditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
aditional Non Land II	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
aditional Non-Land Use	1 4 6 72 4 82 0		Phoenhorus
on-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
on-Traditional LI 27 Embayments	-	2,3,5,8b,10,11,12 -	-
on-Traditional	1,4,6,7a-d,8a,9 1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9,10,11,12		Phosphorus - Pathogens Pathogens

This report is being submitted for the reporting period ending March 9, If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR20 Name of MS4/Coalition 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? OYes ONo ON/A 4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period? % 5. Has your MS4/Coalition developed a program that provides protection equivalent to the **NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities** (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? OYes ONo ON/A 6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal OYes ONo ON/A **Standards?** 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? OYes ONO ON/A 7b. How many projects have been sited in this reporting period? 7c. What percent of the projects included in 7b have been completed in this reporting period? % 7d. What percent of projects planned in previous years have been completed? No Projects Planned 8a.Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? OYes ONO ON/A 8b.Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? OYes ONO ON/A

populations?

MS4 Annual Report Form

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

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SPDES ID

Name of MS4/Coalition

9. Has your MS4/Coalition developed and implemented a program of native planting?

Yes No N/A

10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?

Yes No N/A

11. Does your MS4/Coalition have a pet waste bag program?

Yes No N/A

OYes ONO ON/A