

Stormwater Coalition of Albany County Joint Annual Report

SPDES General Permit for Stormwater Discharges
from Municipal Separate Storm Sewer Systems (MS4s)
Permit No. GP-0-15-003

Reporting Period
March 10, 2016 to March 9, 2017

BACKGROUND

A requirement of all regulated “MS4” municipalities is the submission of an Annual Report to the New York State Department of Environmental Conservation (NYSDEC) due in FINAL form by June 1. As stated in SPDES General Permit No. GP-0-15-003, Part V. C. 2 and referenced in the MS4 Annual Report Form, “MS4s” may submit a Joint Annual Report provided they have a legally binding agreement with other regulated “MS4s”.

Each of the regulated “MS4s” included in this report are co-signatories of the necessary agreements, in particular the Stormwater Coalition of Albany County Inter-municipal Agreement, pursuant to Article 5-G of New York State General Municipal Law for Traditional MS4s and Memorandum Of Understanding for Non-Traditional MS4s.

The submission of a FINAL Joint Annual Report first involves the release of a DRAFT Joint Annual Report, followed by the collection of public comments, if any. These comments are included in the FINAL Joint Annual Report and used to help guide the implementation of program requirements. Comments regarding any aspect of stormwater program implementation, either for the Coalition or individual MS4 Programs are strongly encouraged and welcome throughout the year. To understand MS4 Permit requirements and related program activities, go to the NYSDEC website and/or the Coalition website:
www.albanycountystormwater.com

HOW TO SUBMIT COMMENTS

1. Electronically using the Stormwater Coalition website “Public Comment” interface, www.stormwateralbanycounty.org.
2. By contacting the Local Stormwater Public Contact listed in the Joint Annual Report for each permit holder (See MCC Form).
3. By contacting the individuals listed as Public Contacts on the Coalition website (see Member pages).
4. By e-mail; swcoalition@albanycounty.com or phone; 447-5645.

OTHER INFORMATION

1. Hard copies of this Joint Annual Report are located at the Stormwater Coalition office, 175 Green Street, Albany, NY 12202 and at local MS4/municipal offices (see Annual Report MCM 2 Page 4 of 6 for address information).
2. If you’d like to learn more or get involved with various stormwater volunteer projects, call 447-5645 or e-mail swcoalition@albanycounty.com.

JOINT ANNUAL REPORT FORMAT

The Annual Report document is a form developed by NYSDEC and as such provides a snapshot of program activities pertaining to individual member and collaborative Coalition activities. This Joint Annual Report includes individual Annual Reports organized by MS4 type, see order below with shared Coalition data inserted at the end of each individual report. The SPDES Permit No. of each MS4 is in parenthesis. Goals for the upcoming year are based on an updated Joint Stormwater Management Program Plan document completed in April, 2017 (SWMPv5 2015-2018). To view the SWMP Plan document, see Coalition website, Plan & Program tab.

Traditional Non Land Use Control MS4

1. Albany County (NYR20A359)

Non-Traditional MS4

2. University at Albany-SUNY (NYR20A234)

Traditional Land Use Control MS4s

3. City of Albany (NYR20A464)
4. Town of Bethlehem (NYR20A208)
5. City of Cohoes (NYR20A243)
6. Town of Colonie (NYR20A190)
7. Village of Colonie (NYR20A076)

8. Village of Green Island (NYR20A377)
9. Town of Guilderland (NYR20A211)
10. Village of Menands (NYR20A144)
11. Town of New Scotland (NYR20A463)
12. City of Watervliet (NYR20A087)



MS4 Annual Report Cover Page

MCC form for period ending March 9, 2017

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

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

SPDES ID

N Y R 2 0 A

MS4 Municipal Compliance Certification(MCC) FormMCC form for period ending March 9,

2	0	1	7
---	---	---	---

Name of MS4

A	L	B	A	N	Y	C	O	U	N	T	Y
---	---	---	---	---	---	---	---	---	---	---	---

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y
C	o	u	n	t	y																								

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2017

Name of MS4 | ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for each 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:

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

First Name

D	A	N	I	E	L								
---	---	---	---	---	---	--	--	--	--	--	--	--	--

MII

P

Last Name

M	C	C	O	Y									
---	---	---	---	---	--	--	--	--	--	--	--	--	--

Title

[illegible]

Address

[illegible]

City

[illegible]

State

N	
---	--

Zip

1	2	2	0	7	-			
---	---	---	---	---	---	--	--	--

eMail

D	A	N	I	E	L	.	M	C	C	O	Y	@	A	L	B	A	N	Y	C	O	U	N	T	Y	N	Y	.	G	O	V
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Phone

$$\begin{pmatrix} 5 & 1 & 8 \end{pmatrix} \begin{matrix} 4 & 4 & 7 \end{matrix} - \begin{matrix} 7 & 0 & 4 & 0 \end{matrix}$$

County

[illegible]

MS4 Municipal Compliance Certification(MCC) FormMCC form for period ending March 9,

2	0	1	7
---	---	---	---

Name of MS4

ALBANY COUNTY									
---------------	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for each 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:

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

First Name

S	C	O	T	T											
---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--

MI

D

Last Name

D	U	N	C	A	N										
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

Title

A	C	T	I	N	G		C	O	M	M	I	S	S	I	O	N	E	R	-		P	U	B	L	I	C		W	O	R	K	S
---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	--	---	---	---	---	---

Address

4	4	9		N	E	W		S	A	L	E	M		R	O	A	D														
---	---	---	--	---	---	---	--	---	---	---	---	---	--	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City

V	O	O	R	H	E	E	S	V	I	L	L	E							
---	---	---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--

State

N	Y
---	---

Zip

1	2	1	8	6	-				
---	---	---	---	---	---	--	--	--	--

eMail

S	C	O	T	T	.	D	U	N	C	A	N	@	A	L	B	A	N	Y	C	O	U	N	T	Y	N	Y	.	G	O	V		
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--

Phone

(	5	1	8	)	7	6	5	-	2	0	5	5
---	---	---	---	---	---	---	---	---	---	---	---	---

County

A	L	B	A	N	Y										
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 ALBANY COUNTY

SPDES ID

N Y R 2 0 A 3 5 9

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for each 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:

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

First Name

L A U R A

MI

R

Last Name

D E G A E T A N O

Title

S E N I O R N A T U R A L R E S O U R C E P L A N N E R

Address

1 1 2 S T A T E S T R E E T

City

A L B A N Y

State

N Y

Zip

1 2 2 0 7 -

eMail

L A U R A . D E G A E T A N O @ A L B A N Y C O U N T Y N Y . G O

Phone

(5 1 8) 4 4 7 - 5 6 7 0

County

A L B A N Y

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 ALBANY COUNTY

SPDES ID

N Y R 2 0 A 3 5 9

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for each 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:

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

First Name

D A V I D

MI

H

Last Name

K U B E K

Title

S T O R M W A T E R P R O G R A M T E C H N I C I A N

Address

4 4 7 N E W S A L E M R D

City

V O O R H E E S V I L L E

State

N Y

Zip

1 2 1 8 6 -

eMail

D A V I D . K U B E K @ A L B A N Y C O U N T Y N Y . G O V

Phone

(5 1 8) 6 5 5 - 7 9 2 4

County

A L B A N Y

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2017

Name of MS4 ALBANY COUNTY

SPDES ID

N Y R 2 0 A 3 5 9

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S T O R M W A T E R C O A L I T I O N O F A L B A N Y

Partner/Coalition Name (con't.)

C O U N T Y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 7 5 G R E E N S T - C O U N T Y H E A L T H B L D G

City

A L B A N Y

State

N Y

Zip

1 2 2 0 2 -

eMail

N a n c y . H e i n z e n @ a l b a n y c o u n t y n y . g o v

Phone

(5 1 8) 4 4 7 - 5 6 4 5

Legally Binding Agreement in accordance
with GP-0-08-002 Part IV.G.?

☐ Yes ☐ No

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

● MM1 P u b l i c a t i o n s - P r o g r a m s - W e b s i t e

● MM2 S W M P D o c u m e n t - W A V E - P u b l i c I n p u t

● MM3 S w I M W e b M a p p e r R e d e s i g n - O R I K i t s

● MM4 S w I M W e b M a p p e r - S W P P P R e v i e w L a y r s

● MM5 P o s t C o n s S M P s - M a p g P r e p - I n v n t o r y

● MM6 T r a i n g : D V D s C o u r s e s P r e s e n t r M t g s

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 ALBANY COUNTY

SPDES ID

N Y R 2 0 A 3 5 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

D A N I E L

MI

P

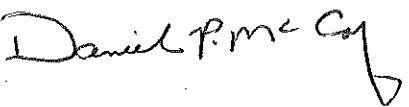
Last Name

M C C O Y

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

05 / 22 / 2017

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

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

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

☐ 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

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

2	0	1	7
---	---	---	---

Name of MS4/Coalition

ALBANY COUNTY

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

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

- How many MS4s contributed to this report?

		1
--	--	---

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

- Other:

[illegible]

2. Specific audiences targeted during this reporting period:

- Other:

[illegible]

MCM 1 Page 1 of 4

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☐ Construction Site Operators Trained

Trained

--	--	--	--	--

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				1
--	--	--	--	---

☐ List-Serves

In List

--	--	--	--	--

☐ Mailing List

In List

--	--	--	--	--

☒ Newspaper Ads or Articles

Days Run

		2	8
--	--	---	---

☐ Public Events/Presentations

Attendees

--	--	--	--	--

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☐ Printed Materials:

Total # Distributed

--	--	--	--	--

Locations (e.g. libraries, town offices, kiosks)

☐ Other:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

h	t	t	p	:	/	/	w	w	w	.	a	l	b	a	n	y	c	o	u	n	t	y	.	c	o	m	/	G	o	v	e
r	n	m	e	n	t	/	D	e	p	a	r	t	m	e	n	t	s	/	D	e	p	a	r	t	m	e	n	t	o	f	P
u	b	l	i	c	W	o	r	k	s	/	S	t	o	r	m	w	a	t	e	r	M	a	n	a	g	e	m	e	n	t	.

URL

a	s	p	x																												

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

3. Web Page con't.: Provide specific web addresses - not home page.

URL

h	t	t	p	:	/	/	w	w	w	.	a	l	b	a	n	y	c	o	u	n	t	y	.	c	o	m	/	G	o	v	e
r	n	m	e	n	t	/	D	e	p	a	r	t	m	e	n	t	s	/	D	e	p	t	-	E	c	o	n	o	m	i	c
D	e	v	e	l	o	p	m	e	n	t	C	o	n	s	e	r	v	a	t	i	o	n	a	n	d	P	l	a	n	i	n

URL

g	/	S	t	o	r	m	w	a	t	e	r	P	r	o	g	r	a	m	C	o	o	r	d	i	n	a	t	o	r	.	a
s	p	x																													

URL

h	t	t	p	:	/	/	w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t
y	.	o	r	g	/	s	t	o	r	m	w	a	t	e	r	-	c	o	a	l	i	t	i	o	n	/	m	u	n	i	c
i	p	a	l	i	t	i	e	s	/	a	l	b	a	n	y	-	c	o	u	n	t	y	/								

URL

URL

URL

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

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.

County maintains website with current information about its program, including information regarding stormwater hotline, which is answered 24 hours on a rotating basis by highway foremen. Link back to Coalition website maintained.

Develop an online training module to reach County personnel and contractors in irregular shifts.

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

DPW stormwater page updated to include 24-hour hotline information and link to Coalition website revised to ensure functionality (April 2017).

The feasibility of an online training module for Stormwater Pollution Prevention was discussed but requires further review with Information Services as it may be problematic to reliably administer. Goal may be dropped or revised depending on outcome.

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

			1
--	--	--	---

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this Measurable Goal during this reporting period?
☒ Yes ☐ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
☐ 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 maintain updated website, including ensuring that personnel and contact information changes are correctly reflected and new information about the program is added.

Pending determination of feasibility of online training module, continue to rely upon department management to disseminate information regarding stormwater program to subordinate staff.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

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.

By 3/9/17, complete Target Audience Analysis outreach activities based on revised Target Audience Analysis process recently updated by the Stormwater Coalition. An educational display will be developed for the Albany County Office Building highlighting water quality issue caused by stormwater runoff and ways to address, with brochures for distribution. At least 9 new stormwater catchbasins stencils will be installed on County roads or properties.

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

Storm drain markers were installed on 20 catchbasins in the Target Audience areas (Fuller, Albany Shaker, Osborne and Everett Roads in the Patroon and Krumkill Creek watersheds), particularly near restaurants, gas stations and dry cleaning businesses. An educational display was developed for the Albany County Office Building highlighting water quality issue caused by stormwater runoff and ways to address them, although brochure distribution was not practical due to space limitations.

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

			1
--	--	--	---

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this Measurable Goal during this reporting period?
☒ Yes ☐ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
☐ 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).

An additional 10 storm drain markers will be placed in the Target Audience area. Other tasks from the Target Audience Analysis have been dropped, as the County plans to focus resources on employees as its primary public, consistent with the permit. An additional four announcements or tips will appear quarterly in the County Executive weekly newsletter. Location of existing display will rotate between different County facilities to ensure that as many employees as possible view it.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g	/	s
t	o	r	m	w	a	t	e	r	-	c	o	a	l	i	t	i	o	n	/	a	n	n	u	a	l	-	r	e	p	o	r
t	/																														

URL

URL

URL

URL

URL

URL

2	0	1	7
---	---	---	---

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

ALBANY COUNTY

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

2. URL(s) con't.:

Please provide specific address(es) where notices can be accessed - not home page.

[illegible][illegible][illegible][illegible][illegible][illegible][illegible]

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

A	L	B	A	N	Y	C	O	U	N	T	Y
---	---	---	---	---	---	---	---	---	---	---	---

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

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

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

☒ MS4/Coalition Office

☒ Annual Report

☒ SWMP Plan

☒ Comments

Department

A	L	B	A	N	Y	C	O	U	N	T	Y	D	P	W	E	N	G	I	N	E	E	R	I	N	G
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Address

4	4	9	N	E	W	S	A	L	E	M	R	O	A	D
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

City

V	O	O	R	H	E	E	S	V	I	L	L	E
---	---	---	---	---	---	---	---	---	---	---	---	---

Zip

N	Y	1	2	1	8	6	-				
---	---	---	---	---	---	---	---	--	--	--	--

Phone

(	5	1	6	)	6	5	5	-	7	9	2	4
---	---	---	---	---	---	---	---	---	---	---	---	---

☐ Library

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Zip

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Phone

(				)																								
---	--	--	--	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

☐ Other

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Zip

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Phone

(				)																								
---	--	--	--	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

☐ Web Page URL:

☐ Annual Report

☐ SWMP Plan

☐ Comments

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please provide specific address of page where report can be accessed - not home page.

☒ eMail

☒ Comments

L	A	U	R	A	.	D	E	G	A	E	T	A	N	O	@	A	L	B	A	N	Y	C	O	U	N	T	Y	N	Y	.
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

D	A	V	I	D	.	K	U	B	E	K	@	A	L	B	A	N	Y	C	O	U	N	T	Y	N	Y	.	G	O	V
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5
---	---

 /

0	5
---	---

 /

2	0	1	7
---	---	---	---

4.b. For how many days was/will this report be posted?

	1	4
--	---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

☐ Yes ☒ No

If Yes, what was the date of the meeting?

--	--

 /

--	--

 /

--	--	--	--

If No, is one planned?

☐ Yes ☒ No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID.

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Stormwater Program Technician receives and responds to 100% of complaints. The Stormwater Committee will continue to meet (at least quarterly) and will persist with implementation of the green infrastructure policy, identification of new priority initiatives, and evaluation of the success of policy implementation. The Committee will review facility assessments performed in 2015 to identify trends and areas for possible improvement and identify strategies for program betterment.

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

Stormwater Program Tech. received complaint from a resident pertaining to catchbasin maintenance, responded by visiting the site and coordinating cleanout with foreman. Also responded to three complaints of illicit discharges. The Stormwater Committee met three times during the reporting year, and an impromptu meeting with part of the Committee was also held in January advance of the program audit. IDDE procedures and regulations were discussed, along with the draft new permit.

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

			1
--	--	--	---

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
☒ Yes ☐ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
☒ 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 Stormwater Committee will meet at least quarterly to review policy and procedure implementation and permit compliance matters. Also, the Stormwater Program Technician will attend meetings of the Infrastructure and Capital Committees to identify green infrastructure policy implementation opportunities. The County will commence tracking of trash removal through its Trail Ambassador program on the Rail Trail. Response will be made to 100% of complaints.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	ALBANY COUNTY
-----------------------	---------------

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report?	1
---	---

1. Enter the number and approx. percent of outfalls mapped:	3	4	1	#	9	8	%
---	---	---	---	---	---	---	---

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

- ☐ Auto Recyclers
- ☐ Building Maintenance
- ☐ Churches
- ☐ Commercial Carwashes
- ☐ Commercial Laundry/Dry Cleaners
- ☐ Construction Vehicle Washouts
- ☐ Cross-Connections
- ☐ Distribution Centers
- ☐ Food Processing Facilities
- ☐ Garbage Truck Washouts
- ☐ Hospitals
- ☐ Improper RV Waste Disposal
- ☐ Industrial Process Water
- ☐ Landscaping (Irrigation)
- ☐ Marinas
- ☐ Metal Plateing Operations
- ☐ Outdoor Fluid Storage
- ☒ Parking Lot Maintenance
- ☐ Printing
- ☐ Residential Carwashing
- ☒ Restaurants
- ☐ Schools and Universities
- ☒ Septic Maintenance
- ☐ Swimming Pools
- ☒ Vehicle Fueling
- ☒ Vehicle Maint./Repair Shops

● Other:

☐ None

C	o	n	s	t	r	u	c	t	i	o	n
s	i	t	e	s							

○ Sewersheds:

[illegible]

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

3.b. What types of illicit discharges have been found during this reporting period?

- ☐ Broken Lines From Sanitary Sewer ☐ Industrial Connections
☐ Cross Connections ☐ Inflow/Infiltration
☒ Failing Septic Systems ☐ Pump Station Failure
☐ Floor Drains Connected To Storm Sewers ☐ Sanitary Sewer Overflows
☒ Illegal Dumping ☐ Straight Pipe Sewer Discharges
☒ Other: ☐ None

T	U	R	B	I	D	I	T	Y		F	R	O	M		C	O	N	S	T	R	U	C	T	I	O	N						
---	---	---	---	---	---	---	---	---	--	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

		5
--	--	---

5. How many illicit discharges have been confirmed during this reporting period?

		5
--	--	---

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

		2
--	--	---

7. Has the storm sewershed mapping been completed in this reporting period? ☐ Yes ☒ No

If No, approximately what percent was completed in this reporting period?

		5
--	--	---

 %
8. Is the above information available in GIS?☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

P	a	s	s	w	o	r	d		P	r	o	t	e	c	t	e	d		R	e	s	t	r	i	c	t	e	d			
h	t	t	p	s	:	/	/	a	c	v	a	r	c	g	i	s	.	a	l	b	a	n	y	c	o	u	n	t	y	.	c
o	m	/	w	e	b	m	a	p	/																						

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

8. URL(s) con't.:

Please provide specific address of page where map(s) can be accessed - not home page

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? ☒ Yes ☐ No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? ☒ Yes ☐ No ☐ NT

- 11. What percent of staff in relevant positions and departments has received IDDE training?**

	9	5	%
--	---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

Process will be developed to better characterize County Health Department complaint investigations relative to stormwater infrastructure locations. Routine method will be developed for tracking complaints from different types of sources (Health, Field Crews and complaints). Information will be organized into a summary spreadsheet.

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

A summary spreadsheet and complaint standardization form were both completed and are presently in use.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

Additional review of IDDE procedures will take place alongside County Health Department officials to identify overlap in responsibilities and streamline identification of violations and enforcement both within and outside the urbanized area.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

Completion of system mapping will allow for completion of sewershed maps with mapping grant project. System mapping will be completed for New Karner Rd (CR 157) and Cherry/Elm Ave (CR 52). Follow-up on previously assessed outfalls with potential indicators of illicit discharges or elevated nonpoint source pollutants.

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

Progress made on outfall reconnaissance; despite addition/discovery of new outfalls in this reporting year, 14 outfalls have not been inspected within the last 5 years due to access problems. Eleven previously "potential" outfalls revisited. System mapping was completed for CR 157 and CR 52 and is in the process of being digitized in GIS. Areas straddling watershed boundaries along county roads assessed to determine whether drainage conveyances redirect flow to neighboring sewersheds.

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

			1
--	--	--	---

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
☒ Yes ☐ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
☐ 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).

Completion of digitizing for field-mapped sections of County Route 157 and 52. Checks and corrections to mapping of County Routes 203, 306 and 204 are planned. The 14 remaining outfalls will be evaluated to determine if access can be reasonably attained. ORI will be completed on remaining outfalls if access is feasible.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

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?

		1
--	--	---

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 Analysis Workbook? ☐ Yes ☐ No ☐ 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 ☐ No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

		2
--	--	---

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	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☒ No Authority
☐ Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☒ No Authority
☐ Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☒ No Authority
☒ Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	☐ No Authority
				0				
☐ Administrative Fines	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☒ No Authority
☐ Civil Penalties	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☒ No Authority
☒ Administrative Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	☐ No Authority
				0				
☒ Enforcement Actions or Sanctions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	
				0				
☒ Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	☐ No Authority
				1				

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

		1
--	--	---

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

		0
--	--	---

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

		8
--	--	---

3. What percent of active construction sites were inspected during this reporting period? ☐ NT

1	0	0
---	---	---

 %

4. What percent of active construction sites were inspected more than once?

☐ NT

1	0	0
---	---	---

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?

☐ Yes ☒ No ☐ 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?

☒ Yes ☐ No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	ALBANY COUNTY
-----------------------	---------------

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

[illegible]

Address

[illegible]

City

V	O	O	R	H	E	E	S	V	I	L	L	E					N	Y
---	---	---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	---	---

Zip

1	2	1	8	6
---	---	---	---	---

=

--	--	--	--

Phone

$$\begin{pmatrix} 5 & 1 & 8 \end{pmatrix} \begin{bmatrix} 6 & 5 & 5 \end{bmatrix} - \begin{bmatrix} 7 & 9 & 2 & 4 \end{bmatrix}$$

○ Library

Address

[illegible]

City

[illegible]

Zip

[illegible]

Phone

$$\left(\begin{array}{|c|} \hline \\ \hline \end{array} \begin{array}{|c|} \hline \\ \hline \end{array} \begin{array}{|c|} \hline \\ \hline \end{array} \right) \begin{array}{|c|} \hline \\ \hline \end{array} \begin{array}{|c|} \hline \\ \hline \end{array} \begin{array}{|c|} \hline \\ \hline \end{array} - \begin{array}{|c|} \hline \\ \hline \end{array} \begin{array}{|c|} \hline \\ \hline \end{array} \begin{array}{|c|} \hline \\ \hline \end{array} \begin{array}{|c|} \hline \\ \hline \end{array}$$

☐ Other

Address

[illegible]

City

[illegible]Zip

				-				
--	--	--	--	---	--	--	--	--

Phone

$$\left(\begin{array}{|c|} \hline \\ \hline \end{array} \right) \begin{array}{|c|} \hline \\ \hline \end{array} - \begin{array}{|c|} \hline \\ \hline \end{array}$$

☐ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL[illegible][illegible][illegible]

URL

[illegible][illegible][illegible]

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	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.

At least four active or temporarily shut down project sites will receive permanent stabilization and permit closure.

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

This goal was accomplished as permit coverage was terminated with final stabilization and (where applicable) post-construction stormwater management practices on four sites that had been either active or inactive with stabilization at the end of the last reporting period. The County also sent four of its foremen to the NYSDEC-endorsed 4-hour Erosion & Sediment Control training.

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

			1
--	--	--	---

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
☒ Yes ☐ 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).

Albany County will incorporate new language into its contract documents ensuring that no contractor or inspector will receive final payment for any job requiring coverage under GP-0-15-002 without the site attaining status at which a NOT can be successfully filed.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

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
--	--	---

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

	# Inventoried	# Inspections	# Times Maintained									
☒ Alternative Practices	<table><tr><td></td><td></td><td>2</td></tr></table>			2	<table><tr><td></td><td></td><td>2</td></tr></table>			2	<table><tr><td></td><td></td><td>2</td></tr></table>			2
		2										
		2										
		2										
☐ Filter Systems	<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>			
☐ Infiltration Basins	<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>			
☒ Open Channels	<table><tr><td></td><td>1</td><td>2</td></tr></table>		1	2	<table><tr><td></td><td>1</td><td>2</td></tr></table>		1	2	<table><tr><td></td><td></td><td>6</td></tr></table>			6
	1	2										
	1	2										
		6										
☒ Ponds	<table><tr><td></td><td></td><td>1</td></tr></table>			1	<table><tr><td></td><td></td><td>1</td></tr></table>			1	<table><tr><td></td><td></td><td>1</td></tr></table>			1
		1										
		1										
		1										
☐ Wetlands	<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>				<table><tr><td></td><td></td><td></td></tr></table>			
☒ Other	<table><tr><td></td><td></td><td>5</td></tr></table>			5	<table><tr><td></td><td></td><td>5</td></tr></table>			5	<table><tr><td></td><td></td><td>1</td></tr></table>			1
		5										
		5										
		1										

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?

☒ Yes ☐ No

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

- ☐ Building Codes ☐ Municipal Comprehensive Plans
☐ Overlay Districts ☐ Open Space Preservation Program
☐ Zoning ☐ Local Law or Ordinance
☐ None ☐ Land Use Regulation/Zoning
☐ Watershed Plans ☐ Other Comprehensive Plan

Other:

G	r	e	e	n		I	n	f	r	a	s	t	r	u	c	t	u	r	e		P	o	l	i	c	y			
---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	--	--	--

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☐ Yes ☒ No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

☐ Yes ☒ No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

☐ Yes ☒ No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		0
--	--	---

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

	3	3
--	---	---

 %

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

Perform maintenance on 9 additional high-priority post-construction stormwater management practices by March 9, 2017. Re-evaluate maintenance frequencies and procedures for existing practices to develop a more effective plan ensuring that practices receive regular maintenance on a needs-based rotating schedule. For properties owned by County within Ann Lee and Stump Pond watersheds, ensure No Net Increase in P from land use changes for which the County is responsible

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

Maintenance for repair or erosion control (other than routine mowing) was completed on five post-construction stormwater management practices that had not received maintenance within the last reporting period (2 proprietary, 2 open channel, 1 rain garden); five other practices received mowing or other general regular upkeep maintenance. Albany County coordinates with Town of Colonie to ensure designers evaluate P loading in all proposed projects that drain to or through County system.

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

			4
--	--	--	---

(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).

Albany County will commence implementation of the NYSDEC guidance document for post-construction stormwater management practice inspection and maintenance and will ensure that Level 1 inspections are up-to-date for all of its facilities. At least three practices that have not received full maintenance within the last three years will be maintained to ensure continued optimal function during this reporting year. 75% of all practices will be inspected for maintenance needs.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY									
---------------	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

		1
--	--	---

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

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment</u> <u>Operation/Activity/Facility</u> <u>performed within the past 3</u>	
			<u>years?</u>	
Street Maintenance.....	☒ Yes	☐ No	☒ Yes	☐ No
Bridge Maintenance.....	☒ Yes	☐ No	☐ Yes	☒ No
Winter Road Maintenance.....	☒ Yes	☐ No	☒ Yes	☐ No
Salt Storage.....	☒ Yes	☐ No	☒ Yes	☐ No
Solid Waste Management.....	☒ Yes	☐ No	☒ Yes	☐ No
New Municipal Construction and Land Disturbance..	☒ Yes	☐ No	☒ Yes	☐ No
Right of Way Maintenance.....	☒ Yes	☐ No	☒ Yes	☐ No
Marine Operations.....	☐ Yes	☒ No	☐ Yes	☒ No
Hydrologic Habitat Modification.....	☒ Yes	☐ No	☒ Yes	☐ No
Parks and Open Space.....	☒ Yes	☐ No	☒ Yes	☐ No
Municipal Building.....	☒ Yes	☐ No	☒ Yes	☐ No
Stormwater System Maintenance.....	☒ Yes	☐ No	☒ Yes	☐ No
Vehicle and Fleet Maintenance.....	☒ Yes	☐ No	☒ Yes	☐ No
Other.....	☐ Yes	☒ No	☐ Yes	☒ No

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

				9
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles

			4	7
--	--	--	---	---
- Catch Basins Inspected and Cleaned Where Necessary #

			9	7
--	--	--	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

			1	0
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs.

				0
--	--	--	--	---
- Nitrogen Applied In Chemical Fertilizer # Lbs.

				0
--	--	--	--	---
- 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 to municipal employees during this reporting period?

				2
--	--	--	--	---

4. What was the date of the last training?

0	7	/	2	0	/	2	0	1	6
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	6	2
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

	9	5	%
--	---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

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.

Facility self-audits will be completed for any remaining County properties in the urbanized area of Albany County that have not been assessed within the preceding three years. County DPW is updating its pollution prevention procedures for all aspects of its operations and will finalize and institute the revised procedures by March 2017. Responsibility for County parking lot sweeping will be assessed and a plan to improve sweeping frequency will be developed.

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

Facility assessments were completed for two facilities in the urbanized area that had not been assessed to date, and follow-up visits were completed at facilities assessed during the 2013-2014 reporting year. Five satellite highway garages in the non-urbanized portion of the county were also assessed. Development of pollution prevention procedures for DPW operations has been completed, full implementation pending. Sweeping responsibility was determined and assessed for 3 facilities.

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

			1
--	--	--	---

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
☒ Yes ☐ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
☐ 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).

Follow-up reassessments are planned for the three facilities that were self-audited in 2014-2015 reporting year. County will finalize and utilize a municipal operations assessment form for activities such as winter road maintenance, street sweeping, catchbasin and ditch cleaning, and other activities that are not explicitly tied to fixed facility but have the potential to generate pollution. Implement new BMP to control discharge from salt loading area to a catchbasin at DPW New Scotland facility.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

ALBANY COUNTY

SPDES ID

N	Y	R	2	0	A	3	5	9
---	---	---	---	---	---	---	---	---

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.

Determine how many mapped catchbasins are present in urbanized area, estimate number of unmapped catchbasins, prioritize zones for cleanout.

Develop standardized procedures for 3rd party certification statements to be incorporated into future contracts, and secure signed agreements from vendors whose activities present risk to water quality.

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

Estimated total of 1500-1600 catchbasins in urbanized area. Cleanout zones have been inventoried and tabulated with attention to impaired watersheds, awaiting new permit to complete prioritization process. All requests for bids and proposals are reviewed by purchasing to determine applicability of stormwater language, including General provisions as well as construction-related provisions, and where applicable language is added along with certification statement to be completed by bidder.

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 ☐ 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).

Finalize priority of catchbasin cleanout zones and begin implementation with highest priority roadways. Update exact number of catchbasins based on planned revisions to mapping.

Continue to be diligent in ensuring that required language is incorporated into all contracts and requests for proposals/bids where appropriate, along with third party certification statements.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

Minimum Control Measure 1. Public Education and Outreach

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

☐ On behalf of an individual MS4

☒ On behalf of a coalition

How many MS4s contributed to this report?

	1	2
--	---	---

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

☒ General Stormwater Management Information

☐ Household Hazardous Waste Disposal

☐ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☒ Smart Growth

☐ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☐ Recycling

☒ Riparian Corridor Protection/Restoration

☐ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	--	---	---	---	--	---	---

Other

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☒ Contractors

☒ Residential ☐ Developers

☒ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

G	e	n	e	r	a	l	P	u	b	l	i	c	-	C	l	e	a	n	W	a	t	e	r	A	c	t	I	n	f	o		
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--

Other

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☒ Construction Site Operators Trained

Trained

			7	0
--	--	--	---	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				8
--	--	--	--	---

☒ List-Serves

In List

		2	5	0
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		1	1	9
--	--	---	---	---

☐ School Program

Attendees

--	--	--	--	--

☒ TV Spot/Program

Days Run

				1
--	--	--	--	---

☒ Printed Materials:

Total # Distributed

		5	6	
--	--	---	---	--

Locations (e.g. libraries, town offices, kiosks)

C	W	P		W	e	b	c	a	s	t	s								
P	l	a	n	n	i	n	g		B	o	a	r	d		M	t	g	s	
T	r	a	i	n	i	n	g	s	-	P	u	b	l	i	c	P	r	o	g
W	A	V	E	V	o	l	R	e	c	r	u	i	t	m	e	n	t		

☒ Other:

H	o	s	t		2		C	W	P		W	e	b	c	a	s	t	s	
---	---	---	---	--	---	--	---	---	---	--	---	---	---	---	---	---	---	---	--

☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

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.

From SWMPv4 document (May, 2016): BMP 1-1 Target Audience Analysis Wksheet - support MS4 efforts to update their TAAW; id target audience, draft & implement goals; BMP 1-3 Website-post routine Coalition events, update text of Home Page. BMP 1-7 List Serve - update contacts (newly elected, Plan'g Bd, MS4 staff, consultants, webcast audience). BMP 1-6 Public Program-Guest Spker-present Clean Water Act Basics & Green Infrastructure Program to MS4 Electeds/Plan'g Bd.

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

BMP 1-1 Target Audience Analysis Worksheet (TAAW): not completed. BMP 1-3 Website: completed. BMP 1-7 List Serve: partially completed; drop/adds and updated emails provided by Coalition members; not entered into ACCESS database. BMP 1-6 Public Program-Guest Speaker: completed-1 CWA Presentation; not completed-Green Infrastructure Program to MS4 Electeds; no time to develop program and staff person organizing program left MS4.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

SWMPv5 (April, 2017) BMP 1-3 Website: continue to maintain Coalition website (post mandated documents; post educational material; post meeting announcements; pay invoice). BMP 1-7 List Serve: update ACCESS database; BMP 1-4 Publications: update door hanger publication; BMP 1-14 Public Programs-Organized By Coalition-host 1 CWP webcast.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	Stormwater Coalition of Albany County
-----------------------	---------------------------------------

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?	1	2
---	---	---

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

- | | | | | | |
|---|--------------|-----------|-------|---|---------|
| ☐ Cleanup Events | # Events | | | | |
| ☒ Comments on SWMP Received | # Comments | | | | 0 |
| ☒ Community Hotlines | Phone # | (5 1 8) | 4 4 7 | - | 5 6 4 5 |
| Phone # | () | | - | | |
| Phone # | () | | - | | |
| Phone # | () | | - | | |
| Phone # | () | | - | | |
| Phone # | () | | - | | |
| ☐ Community Meetings | # Attendees | | | | |
| ☐ Plantings | Sq. Ft. | | | | |
| ☐ Storm Drain Markings | # Drains | | | | |
| ☐ Stakeholder Meetings | # Attendees | | | | |
| ☒ Volunteer Monitoring | # Events | | | | 7 |
| ☒ Other: C o a l i t i o n C o m m e n t s - D R A F T M S 4 P m t | | | | | |

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

- [illegible]

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID

N Y R 2 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

S t o r m w a t e r C o a l i t i o n - A l b a n y C n t y

Address

1 7 5 G r e e n S t r e e t - C n t y H e a l t h B l d g

City

A l b a n y

N Y

Zip

1 2 2 0 2 -

Phone

(5 1 8) 4 4 7 - 5 6 4 5

☐ Library

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

City

Zip

-

Phone

() -

☐ Other

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

City

Zip

-

Phone

() -

☒ Web Page URL:

☒ Annual Report

☒ SWMP Plan

☒ Comments

w w w . s t o r m w a t e r a l b a n y c o u n t y . o r g

Please provide specific address of page where report can be accessed - not home page.

☒ eMail

☒ Comments

s w c o a l i t i o n @ a l b a n y c o u n t y . c o m

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5
---	---

 /

0	5
---	---

 /

2	0	1	7
---	---	---	---

4.b. For how many days was/will this report be posted?

	1	4
--	---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

☐ Yes ☐ No

If Yes, what was the date of the meeting?

--	--

 /

--	--

 /

--	--	--	--

If No, is one planned?

☐ Yes ☐ No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

From SWMPv4 document (May, 2016): BMP 2-2 Annual Report-combine Joint SWMP document update (BMPs/Goals) with prep of Annual Report, meet w/all members, post AR & SWMP on website. BMP 2-8 Student Water Quality Projects-coordinate with U Albany mapping projects named in WQIP Rnd 12 grant workplan, secure professor/student support, start projects, \$/credits. BMP 2-11 WAVE-monitor 4 sites w/volunteers.

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

BMP 2-2 Annual Report: completed. BMP 2-8 Student Water Quality Projects: partially completed; contract between UAlbany and County-Coalition completed; recruitment flyer for professors and students 85% completed. BMP 2-11 WAVE-8 sites monitored.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

SWMPv5 (April, 2017) BMP 2-2 Annual Report: Coalition staff prepare for and guide possible transition to "new" MS4 Permit likely to include changes in Annual Report format and annual program evaluation process-no particular goals named in SWMP document. BMP 2-11 WAVE-monitor 4 sites with volunteers.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0			
---	---	---	---	---	--	--	--

3.b. What types of illicit discharges have been found during this reporting period?

- ☐ Broken Lines From Sanitary Sewer
 - ☐ Cross Connections
 - ☐ Failing Septic Systems
 - ☐ Floor Drains Connected To Storm Sewers
 - ☐ Illegal Dumping
 - ☐ Other:
 - ☐ Industrial Connections
 - ☐ Inflow/Infiltration
 - ☐ Pump Station Failure
 - ☐ Sanitary Sewer Overflows
 - ☐ Straight Pipe Sewer Discharges
 - ☐ None

[illegible]

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

--	--	--

5. How many illicit discharges have been confirmed during this reporting period?

--	--	--

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

--	--	--

7. Has the storm sewershed mapping been completed in this reporting period?

☐ Yes ☐ No

If No, approximately what percent was completed in this reporting period?

			%
--	--	--	---

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - support mapper redesign as guided by consultant, organize 2 to 3 design wkshops for members, integrate mapper redesign with other MS4 program needs (grant funded mobile app field inspection forms for ORI, MS4 construction site inspections, post construction sw practices inspections, facility self audits), prep mapper layers, launch mapper. BMP 3-5 Dry Weather (ORI)-manage ORI kits, restock.

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

BMP 3-2 Coalition Stormwater Program Mapper: completed; re-design includes "Form" considerations; one design workshop, not 3; more complex redesign to include "Forms" pending development of RFP for consultant services. BMP 3-5 Dry Weather (ORI) -completed; kits re-stocked.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

SWMPv5 (April, 2017) BMP 3-4 Storm Sys-CSO-Sewershed Map'g/BMP 5-8 Inventory Post Const SMPs/BMP 6-1 Inventory MuniFac: continue to implement mapping goals detailed in SWMPv5 (see MCM3, MCM 5, and MCM6); continue to implement objectives and tasks listed in the NYSDEC grant contract C00081GG work plan. See respective documents for details (SWMPv5 and grant work plan). Both explain what is being mapped where, when, and how for all Coalition members.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

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.

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Procedures-review paper MS4 Construction Inspection Form for conversion to mobile device. BMP 7-7 Procedures & Forms Compendium-develop Coalition wide strategy for using MS4 Oversight/Construction Permit Guidance Document, discuss training in purpose/use for MS4s/consultants, incorporate into existing/future procedures (3 MS4s); note edits for future updates.

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

BMP 4-5 Construction Site Enf & Inspection Procedures: not completed; DRAFT MS4 Permit points to mandated MS4 Construction Inspection Forms, need to know status of DEC forms before proceeding further.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

SWMPv5 (April, 2017): BMP 4-7 Construction Site Operator Training-4hr: co-host one 4 hr training with ACSWCD.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): BMP 5-5 SWPPP Review Procedures - for Coalition Stormwater Program Mapper update/load map layers named in Construction Activity Permit/ NYSDEC SW Mgmt Design Manual. BMP 5-8 Inventory Post Construction Practices - with grant funding implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - with grant funding develop inspection forms for use with mobile devices

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

.BMP 5-5 SWPPP Review Procedures: partially completed, pre-existing layers uploaded, additional layers more difficult to obtain. BMP 5-8 Inventory Post Construction Practices: mapping of post-construction practices implemented as detailed in grant work plan. MP 5-9 Post Construction Practices: not completed.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

From SWMPv5 document (April, 2017): BMP 5-8 Inventory Post Construction Practices - continue to map post construction practices as detailed in grant work plan and various SWMPv5 goals. BMP 5-9 Post Construction Practices-Maintenance: complete RFP for consultant services to develop GIS friendly post-construction stormwater management practice (PC SMPs) inspection forms (mobile devices).

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

2. Provide the following information about municipal operations good housekeeping programs:

- ☐ Parking Lots Swept (Number of acres X Number of times swept) # Acres

--	--	--	--	--
- ☐ Streets Swept (Number of miles X Number of times swept) # Miles

--	--	--	--	--
- ☐ Catch Basins Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Pesticide/Herbicide Applied # Acres

					.	
--	--	--	--	--	---	--

 (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?

				4
--	--	--	--	---

4. What was the date of the last training?

0	9	/	2	2	/	2	0	1	6
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	4	9
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

1	0	0	%
---	---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): MCM 8 Train'g BMP 8-1 Clean Water Act Basics-Coalition program to 2 MS4 govern'g boards; 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards-1 MS4 Plan'g Board; BMP 8-4/8-5/8-6 replace as needed EXCAL visual DVDs (Spills & Skills, Rain Check, IDDE-A Grate Concern)/circulate to MS4s; BMP 8-17 On-line Training-assist Albany County SW Prog Tech.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

			0
--	--	--	---

(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).

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

MS4 Municipal Compliance Certification(MCC) FormMCC form for period ending March 9,

2	0	1	7
---	---	---	---

Name of MS4

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for ***each*** 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:

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

First Name

J a m e s

MI

R

Last Name

S t e e l l a r

Title

A c t i n g P r e s i d e n t

Address

1 4 0 0 W a s h i n g t o n A v e .

City

A l b a n y

State

N Y

Zip

1 2 2 2 2 -

eMail

p r e s m a i l @ a l b a n y . e d u

Phone

(5 1 8) 9 5 6 - 8 0 1 0

County

A l b a n y

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 6

Name of MS4 University at Albany (SUNY Uptown Campus)

SPDES ID

N Y R 2 0 A 2 3 4

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

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

First Name	MI	Last Name
K a r l		K i l t s
Title		
D i r e c t o r C o d e A d m i n i s t r a t i o n		
Address		
1 4 0 0 W a s h i n g t o n A v e .		
City	State	Zip
A l b a n y	N Y	1 2 2 2 2 -
eMail		
k k i l t s @ a l b a n y . e d u		
Phone	County	
(5 1 8) 4 4 2 - 3 4 0 0	A l b a n y	

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 6

Name of MS4 University at Albany (SUNY Uptown Campus)

SPDES ID

N Y R 2 0 A 2 3 4

Section 2 - Contact Information**Important Instructions - Please Read**Contact information must be provided for each 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:

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

First Name

F r a n k

MI

S

Last Name

F a z i o

Title

S t o r m w a t e r M g m t . C o o r d i n a t o r

Address

1 4 0 0 W a s h i n g t o n A v e .

City

A l b a n y

State

N Y

Zip

1 2 2 2 2 -

eMail

f f a z i o @ a l b a n y . e d u

Phone

(5 1 8) 4 4 2 - 3 4 0 0

County

A l b a n y

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S t o r m w a t e r C o a l i t i o n o f A l b a n y

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 7 5 G r e e n S t .

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

N a n c y . H e i n z e n @ a l b a n y c o u n t y n y . c o m

Phone

(5 1 8) 4 4 7 - 5 6 4 5

Legally Binding Agreement in accordance
with GP-0-08-002 Part IV.G.?

☒ Yes ☐ No

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

☒ MM1 P u b l i c a t i o n s - P r o g r a m s - W e b s i t e

☒ MM2 S W M P D o c u m e n t - W A V E - P u b l i c I n p u t

☒ MM3 S w I M W e b M a p p e r R e d e s i g n - O R I K i t s

☒ MM4 S w I M W e b M a p p e r - S W P P P R e v i e w L a y r s

☒ MM5 P o s t C o n s S M P s - M a p P r e p g - I n v n t o r y

☒ MM6 T r a i n g : D V D s C o u r s e s P r e s e n t r M t g s

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 6

Name of MS4 University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A

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 a r l

MI

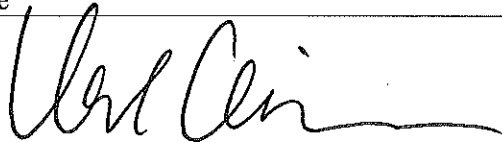
Last Name

K i l t s

Title (Clearly print title of individual signing report)

D i r e c t o r C o d e A d m i n i s t r a t i o n

Signature



Date

0 5 / 2 2 / 2 0 1 7

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

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

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	2
--	---	---

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

☐ 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

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	University at Albany (SUNY) Uptown Campus
-----------------------	---

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

1. Targeted Public Education and Outreach Best Management Practices

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

- ☒ Construction Sites
 - ☒ General Stormwater Management Information
 - ☐ Household Hazardous Waste Disposal
 - ☒ Illicit Discharge Detection and Elimination
 - ☒ Infrastructure Maintenance
 - ☐ Smart Growth
 - ☐ Storm Drain Marking
 - ☒ Green Infrastructure/Better Site Design/Low Impact Development
 - ☐ Other:
 - ☐ Pesticide and Fertilizer Application
 - ☐ Pet Waste Management
 - ☐ Recycling
 - ☐ Riparian Corridor Protection/Restoration
 - ☐ Trash Management
 - ☒ Vehicle Washing
 - ☐ Water Conservation
 - ☐ Wetland Protection
 - ☐ None

[illegible]

Other

2. Specific audiences targeted during this reporting period:

- ☒ Public Employees ☐ Contractors
☐ Residential ☐ Developers
☐ Businesses ☐ General Public
☐ Restaurants ☐ Industries
☐ Other: ☐ Agricultural

[illegible]

Other

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☐ Construction Site Operators Trained

Trained

--	--	--	--	--

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

			1	
--	--	--	---	--

☐ List-Serves

In List

--	--	--	--	--

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		5	0	
--	--	---	---	--

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☐ Printed Materials:

Total # Distributed

--	--	--	--	--

Locations (e.g. libraries, town offices, kiosks)

S	e	r	v	i	c	e		B	u	i	l	d	i	n	g		A		
F	a	c	i	l	i	t	i	e	s										
M	a	n	a	g	e	m	e	n	t										

☐ Other:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	a	l	b	a	n	y	.	e	d	u	/	f	a	c	i	l	i	t	i	e	s	/				
s	t	o	r	m	w	a	t	e	r																				

URI

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	University at Albany (SUNY) Uptown Campus
-----------------------	---

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

3. Web Page con't.: Provide specific web addresses - not home page.

URI

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

- 1) Complete Target Audience Analysis Worksheet.
- 2) Monitor website and update when required.
- 3) Install more drain markers on the campus.

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

- 1) Target Audience Analysis Worksheet not completed.
- 2) Website was updated when required.
- 3) Drain markers not installed due to area under construction.
- 4) Educational tours of Indian Pond as it's function relates to stormwater management for the Campus conducted.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

- 1) Review/adopt stormwater signage for treatment practices
- 2) Monitor website and update when required.
- 3) Install more drain markers on the campus.
- 4) Conduct educational tour of Indian Pond if incoming freshman orientation program continues.
- 5) Continue use of water quality message in webcast for campus cleanup activity.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report? **1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:**

☒ Cleanup Events	# Events				
☐ Comments on SWMP Received	# Comments				
☐ Community Hotlines	Phone # () -				
Phone # () -	Phone # () -				
Phone # () -	Phone # () -				
Phone # () -	Phone # () -				
Phone # () -	Phone # () -				
☐ Community Meetings	# Attendees				
☐ Plantings	Sq. Ft.				
☐ Storm Drain Markings	# Drains				
☐ Stakeholder Meetings	# Attendees				
☐ Volunteer Monitoring	# Events				
☐ Other:					

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?☒ Yes ☐ No

☒ List-Serve	# In List	1	8	0	0	0
☐ Newspaper Advertising	# Days Run					
☐ TV/Radio Notices	# Days Run					
☐ Other:						
☐ Web Page URL: Enter URL(s) on the following two pages.						

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	University at Albany (SUNY) Uptown Campus
-----------------------	---

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

[illegible]

URL

[illegible]

URI

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	University at Albany (SUNY) Uptown Campus
-----------------------	---

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

2. URL(s) con't.:

Please provide specific address(es) where notices can be accessed - not home page.

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

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

C o d e A d m i n i s t r a t i o n S e r v B l d g A

Address

1 4 0 0 W a s h i n g t o n A v e

City

A l b a n y N Y

Zip

1 2 2 2 2 -

Phone

() -

☐ Library

☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

City

Zip

-

Phone

() -

☐ Other

☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

City

Zip

-

Phone

() -

☒ Web Page URL:

☒ Annual Report ☒ SWMP Plan ☒ Comments

w w w . a l b a n y . e d u / f a c i l i t i e s /

s t o r m w a t e r

Please provide specific address of page where report can be accessed - not home page.

☒ eMail

☐ Comments

f f a z i o @ a l b a n y . e d u

s w c o a l i t i o n @ a l b a n y c o u n t y . c o m

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5	/	0	5	/	2	0	1	7
---	---	---	---	---	---	---	---	---	---

4.b. For how many days was/will this report be posted?

1	4
---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

☐ Yes ☒ No

If Yes, what was the date of the meeting?

		/			/				
--	--	---	--	--	---	--	--	--	--

If No, is one planned?

☐ Yes ☒ No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

- 1) Continue engagement of students for research within the coalition community.
- 2) Review public contact information and modify as required.
- 3) Continue notification to volunteers of benefits of campus cleanup on storm system and receiving waters.

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

- 1) Students are in the process of performing mapping and information gathering work for the Coalition.
- 2) Public contact information reviewed with no changes made.
- 3) Volunteers were notified of benefits of campus clean up on the stormwater facilities by campus cleanup posting on website.

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

			1
--	--	--	---

(ex: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

- 1) Continue engagement of students for research within the coalition community.
- 2) Review public contact and complaint information and modify as required.
- 3) Continue notification to volunteers of benefits of campus cleanup on storm system and receiving waters.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

1. Enter the number and approx. percent of outfalls mapped: 13 # 100 %

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? 0

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

☐ Auto Recyclers

☐ Landscaping (Irrigation)

☐ Building Maintenance

☐ Marinas

☐ Churches

☐ Metal Plating Operations

☐ Commercial Carwashes

☐ Outdoor Fluid Storage

☐ Commercial Laundry/Dry Cleaners

☒ Parking Lot Maintenance

☐ Construction Vehicle Washouts

☐ Printing

☐ Cross-Connections

☐ Residential Carwashing

☐ Distribution Centers

☐ Restaurants

☐ Food Processing Facilities

☒ Schools and Universities

☐ Garbage Truck Washouts

☐ Septic Maintenance

☐ Hospitals

☐ Swimming Pools

☐ Improper RV Waste Disposal

☐ Vehicle Fueling

☐ Industrial Process Water

☐ Vehicle Maint./Repair Shops

☐ Other:

☐ None

☐ Sewersheds:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

3.b. What types of illicit discharges have been found during this reporting period?

- ☐ Broken Lines From Sanitary Sewer ☐ Industrial Connections
☐ Cross Connections ☐ Inflow/Infiltration
☐ Failing Septic Systems ☐ Pump Station Failure
☐ Floor Drains Connected To Storm Sewers ☐ Sanitary Sewer Overflows
☐ Illegal Dumping ☐ Straight Pipe Sewer Discharges
☐ Other: ☒ None

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

		0
--	--	---

5. How many illicit discharges have been confirmed during this reporting period?

		0
--	--	---

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 ☐ No

If No, approximately what percent was completed in this reporting period?

			%
--	--	--	---

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☐ Yes ☒ No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

P	a	s	s	w	o	r	d	P	r	o	t	e	c	t	e	d	R	e	s	t	r	i	c	t	e	d					
h	t	t	p	s	:	/	/	a	c	v	a	r	c	g	i	s	.	a	l	b	a	n	y	c	o	u	n	t	y	.	c
o	m	/	w	e	b	m	a	p	/																						

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

8. URL(s) con't.:

Please provide specific address of page where map(s) can be accessed - not home page

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

URL

[illegible]

9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? ☒ Yes ☐ No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? ☐ Yes ☐ No ☒ NT

11. What percent of staff in relevant positions and departments has received IDDE training?

	1	0	%
--	---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	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.

- 1) Continue IDDE training and convey to staff the importance of observation and quickly reporting incidents.
- 2) Revise and up-date IDDE Policy as needed
- 3) Update GIS mapping with new outfalls.
- 4) Perform dry weather flow monitoring of outfalls to detect for illicit discharge. (ORI)

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

- 1) IDDE training provided to staff.
- 2) IDDE policy reviewed and no updates required.
- 3) No new outfalls installed that required mapping.
- 4) Dry weather flow monitoring not performed.

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

			1
--	--	--	---

(ex: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

- 1) Continue IDDE training and convey to staff the importance of observation and quickly reporting incidents.
- 2) Revise and up-date IDDE Policy as needed
- 3) Update GIS mapping with new outfalls.
- 4) Perform dry weather flow monitoring of outfalls to detect for illicit discharge. (ORI)

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

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 Analysis Workbook? ☐ Yes ☐ No ☒ 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 ☐ No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period? 2

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	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>2</td></tr></table>					2	☐ No Authority
				2				
☐ Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Administrative Fines	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Civil Penalties	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Administrative Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Enforcement Actions or Sanctions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						
☐ Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

--	--	--

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

		2
--	--	---

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

		5
--	--	---

3. What percent of active construction sites were inspected during this reporting period? ☐ NT

1	0	0	%
---	---	---	---

4. What percent of active construction sites were inspected more than once? ☐ NT

1	0	0	%
---	---	---	---

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?

☒ Yes ☐ No ☐ 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?

☒ Yes ☐ No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

6. con't.:

Submit additional pages as needed.

☒ MS4/Coalition Office

Department

C o d e A d m i n i s t r a t i o n

Address

S B A 1 4 0 0 W a s h i n g t o n A v e

City

A l b a n y N Y 1 2 2 2 2 -

Phone

(5 1 7) 4 4 2 - 3 4 0 0

☐ Library

Address

City

Phone

() -

☐ Other

Address

City

Phone

() -

☐ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

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.

- 1) Adopt use of new SWPPP review checklist for project review.
- 2) Review compliance and complaint procedures.
- 3) Continue insertion of Stormwater Policy in construction documents.
- 4) Maintain SWPPP Project Summary Sheets.

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

- 1) SWPPP review checklist used to review projects.
- 2) Compliance and complaint procedures reviewed with no changes.
- 3) Stormwater Policy is included in construction documents.
- 4) SWPPP Summary Sheets are current.

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

1

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

- 1) Continue use of SWPPP Checklist and examine procedures, and modify as necessary.
- 2) Review SWPPP Inspection Reports from consultants.
- 3) Perform site visits at construction sites as needed.
- 4) Confirm insertion of Stormwater Policy in contract documents.
- 5) Examine new methods of erosion control.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

Minimum Control Measure 5. Post-Construction Stormwater Management

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

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

How many MS4s contributed to this report?

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

	# Inventoried	# Inspections	# Times Maintained
☒ Alternative Practices	1 9	7	0
☐ Filter Systems			
☒ Infiltration Basins	6	0	0
☐ Open Channels			
☒ Ponds	8	0	0
☐ Wetlands			
☒ Other	4	0	0

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

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

- ☐ Building Codes ☐ Municipal Comprehensive Plans
☐ Overlay Districts ☐ Open Space Preservation Program
☐ Zoning ☐ Local Law or Ordinance
☐ None ☐ Land Use Regulation/Zoning
☐ Watershed Plans ☐ Other Comprehensive Plan

- ☒ Other:

U n i v e r s i t y s t o r m w a t e r p o l i c y

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☒ Yes ☐ No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

☐ Yes ☒ No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

☐ Yes ☒ No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		4
--	--	---

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

		0
--	--	---

 %

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus																			
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

- 1) Review Stormwater Management Policy procedures for post- construction practices, revise if necessary.
- 2) Review Green Infrastructure design guidelines, modify if needed.
- 3) Inventory new post-construction practices.
- 4) Inspect all post-construction practices.

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

- 1) Stormwater Management Policy reviewed with no changes.
- 2) Green Infrastructure Guidelines reviewed with no changes.
- 3) New Post-Construction practices added to inventory.
- 4) Inspected 7 post-construction practices.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

- 1) Review Stormwater Management Policy procedures for post- construction practices, revise if necessary.
- 2) Review Green Infrastructure design guidelines, modify if needed.
- 3) Inventory new post-construction practices.
- 4) Inspect post-construction practices not examines in last reporting year.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus																			
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

☒ On behalf of an individual 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.

<u>Operation/Activity/Facility</u>	<u>Self-Assessment</u> <u>Operation/Activity/Facility</u> <u>performed within the past 3</u> <u>years?</u>				
<u>Addressed in SWMP?</u>					
Street Maintenance.....	☒ Yes	☐ No		☐ Yes	☒ No
Bridge Maintenance.....	☐ Yes	☐ No		☐ Yes	☐ No
Winter Road Maintenance.....	☒ Yes	☐ No		☐ Yes	☐ No
Salt Storage.....	☒ Yes	☐ No		☐ Yes	☐ No
Solid Waste Management.....	☒ Yes	☐ No		☐ Yes	☐ No
New Municipal Construction and Land Disturbance..	☐ Yes	☐ No		☐ Yes	☐ No
Right of Way Maintenance.....	☐ Yes	☐ No		☐ Yes	☐ No
Marine Operations.....	☐ Yes	☐ No		☐ Yes	☐ No
Hydrologic Habitat Modification.....	☐ Yes	☐ No		☐ Yes	☐ No
Parks and Open Space.....	☐ Yes	☐ No		☐ Yes	☐ No
Municipal Building.....	☐ Yes	☐ No		☐ Yes	☐ No
Stormwater System Maintenance.....	☒ Yes	☐ No		☐ Yes	☐ No
Vehicle and Fleet Maintenance.....	☒ Yes	☐ No		☐ Yes	☐ No
Other.....	☐ Yes	☐ No		☐ Yes	☐ No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition University at Albany (SUNY) Uptown Campus

SPDES ID

N Y R 2 0 A 2 3 4

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

			6	6
--	--	--	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles

		1	9	5
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary #

		2	5	8
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

				7
--	--	--	--	---
- Phosphorus Applied In Chemical Fertilizer # Lbs.

			3	8
--	--	--	---	---
- Nitrogen Applied In Chemical Fertilizer # Lbs.

	3	8	0	0
--	---	---	---	---
- Pesticide/Herbicide Applied # Acres

		2	5	.4
--	--	---	---	----

(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?

				2
--	--	--	--	---

4. What was the date of the last training?

0	2	/	2	7	/	2	0	1	7
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	4	6
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

	1	0	%
--	---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

University at Albany (SUNY) Uptown Campus

SPDES ID

N	Y	R	2	0	A	2	3	4
---	---	---	---	---	---	---	---	---

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.

- 1) Conduct facility self-audit.
- 2) Continue use of AiMS for facility maintenance including sweeping and CB cleaning.
- 3) Continue use of utilizing GIS for improvements and new facilities.
- 4) Develop summary records for use in preparation of Annual report.

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

- 1) Facility self-audit not performed
- 2) Use of AiMS system has assisted in tracking the work performed and also helped with scheduling and monitoring.
- 3) GIS mapping has been updated and base maps improved.
- 4) Summary records have been prepared and assist in completing the annual report.

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

			1
--	--	--	---

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?
☒ Yes ☐ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
☒ 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).

- 1) Conduct facility self-audit.
- 2) Continue use of AiMS for facility maintenance including sweeping and CB cleaning.
- 3) Continue use of utilizing GIS for improvements and new facilities.
- 4) Provide stormwater management training.
- 5) Examine additional methods for maintenance monitoring.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

Minimum Control Measure 1. Public Education and Outreach

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

☐ On behalf of an individual MS4

☒ On behalf of a coalition

How many MS4s contributed to this report?

	1	2
--	---	---

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

☒ General Stormwater Management Information

☐ Household Hazardous Waste Disposal

☐ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☒ Smart Growth

☐ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☐ Recycling

☒ Riparian Corridor Protection/Restoration

☐ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	--	---	---	---	--	---	---

Other

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☒ Contractors

☒ Residential ☐ Developers

☒ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

G	e	n	e	r	a	l	P	u	b	l	i	c	-	C	l	e	a	n	W	a	t	e	r	A	c	t	I	n	f	o		
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--

Other

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☒ Construction Site Operators Trained

Trained

			7	0
--	--	--	---	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				8
--	--	--	--	---

☒ List-Serves

In List

		2	5	0
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		1	1	9
--	--	---	---	---

☐ School Program

Attendees

--	--	--	--	--

☒ TV Spot/Program

Days Run

				1
--	--	--	--	---

☒ Printed Materials:

Total # Distributed

			5	6
--	--	--	---	---

Locations (e.g. libraries, town offices, kiosks)

C	W	P		W	e	b	c	a	s	t	s								
P	l	a	n	n	i	n	g		B	o	a	r	d		M	t	g	s	
T	r	a	i	n	i	n	g	s	-	P	u	b	l	i	c	P	r	o	g
W	A	V	E	V	o	l	R	e	c	r	u	i	t	m	e	n	t		

☒ Other:

H	o	s	t		2		C	W	P		W	e	b	c	a	s	t	s	
---	---	---	---	--	---	--	---	---	---	--	---	---	---	---	---	---	---	---	--

☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

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.

From SWMPv4 document (May, 2016): BMP 1-1 Target Audience Analysis Wksheet - support MS4 efforts to update their TAAW; id target audience, draft & implement goals; BMP 1-3 Website-post routine Coalition events, update text of Home Page. BMP 1-7 List Serve - update contacts (newly elected, Plan'g Bd, MS4 staff, consultants, webcast audience). BMP 1-6 Public Program-Guest Spker-present Clean Water Act Basics & Green Infrastructure Program to MS4 Electeds/Plan'g Bd.

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

BMP 1-1 Target Audience Analysis Worksheet (TAAW): not completed. BMP 1-3 Website: completed. BMP 1-7 List Serve: partially completed; drop/adds and updated emails provided by Coalition members; not entered into ACCESS database. BMP 1-6 Public Program-Guest Speaker: completed-1 CWA Presentation; not completed-Green Infrastructure Program to MS4 Electeds; no time to develop program and staff person organizing program left MS4.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

SWMPv5 (April, 2017) BMP 1-3 Website: continue to maintain Coalition website (post mandated documents; post educational material; post meeting announcements; pay invoice). BMP 1-7 List Serve: update ACCESS database; BMP 1-4 Publications: update door hanger publication; BMP 1-14 Public Programs-Organized By Coalition-host 1 CWP webcast.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?	1	2
---	---	---

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

- | | | | | | | |
|---|-------------|-----------|-------|---|---------|---|
| ☐ Cleanup Events | # Events | | | | | |
| ☒ Comments on SWMP Received | # Comments | | | | | 0 |
| ☒ Community Hotlines | Phone # | (5 1 8) | 4 4 7 | - | 5 6 4 5 | |
| Phone # | () | | | - | | |
| Phone # | () | | | - | | |
| Phone # | () | | | - | | |
| Phone # | () | | | - | | |
| Phone # | () | | | - | | |
| ☐ Community Meetings | # Attendees | | | | | |
| ☐ Plantings | Sq. Ft. | | | | | |
| ☐ Storm Drain Markings | # Drains | | | | | |
| ☐ Stakeholder Meetings | # Attendees | | | | | |
| ☒ Volunteer Monitoring | # Events | | | | | 7 |
| ☒ Other: C o a l i t i o n C o m m e n t s - D R A F T M S 4 P m t | | | | | | |

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

- | | | | | | | |
|---|------------|--|--|---|---|---|
| ☒ List-Serve | # In List | | | 1 | 9 | 1 |
| ☐ Newspaper Advertising | # Days Run | | | | | |
| ☐ TV/Radio Notices | # Days Run | | | | | |
| ☐ Other: | | | | | | |

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

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

SPDES ID

N	Y	R	2	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

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n	-	A	l	b	a	n	y	C	n	t	y
---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Address

1	7	5		G	r	e	e	n		S	t	r	e	e	t	-	C	n	t	y	H	e	a	l	t	h	B	l	d	g
---	---	---	--	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

City

A	l	b	a	n	y										
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

N	Y
---	---

Zip

1	2	2	0	2	-				
---	---	---	---	---	---	--	--	--	--

Phone

(	5	1	8	)	4	4	7	-	5	6	4	5
---	---	---	---	---	---	---	---	---	---	---	---	---

☐ Library

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--

Zip

					-				
--	--	--	--	--	---	--	--	--	--

Phone

(				)				-				
---	--	--	--	---	--	--	--	---	--	--	--	--

☐ Other

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--

Zip

					-				
--	--	--	--	--	---	--	--	--	--

Phone

(				)				-				
---	--	--	--	---	--	--	--	---	--	--	--	--

☒ Web Page URL:

☒ Annual Report

☒ SWMP Plan

☒ Comments

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please provide specific address of page where report can be accessed - not home page.

☒ eMail

☒ Comments

s	w	c	o	a	l	i	t	i	o	n	@	a	l	b	a	n	y	c	o	u	n	t	y	.	c	o	m
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5
---	---

 /

0	5
---	---

 /

2	0	1	7
---	---	---	---

4.b. For how many days was/will this report be posted?

	1	4
--	---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

☐ Yes ☐ No

If Yes, what was the date of the meeting?

--	--

 /

--	--

 /

--	--	--	--

If No, is one planned?

☐ Yes ☐ No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

From SWMPv4 document (May, 2016): BMP 2-2 Annual Report-combine Joint SWMP document update (BMPs/Goals) with prep of Annual Report, meet w/all members, post AR & SWMP on website. BMP 2-8 Student Water Quality Projects-coordinate with U Albany mapping projects named in WQIP Rnd 12 grant workplan, secure professor/student support, start projects, \$/credits. BMP 2-11 WAVE-monitor 4 sites w/volunteers.

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

BMP 2-2 Annual Report: completed. BMP 2-8 Student Water Quality Projects: partially completed; contract between UAlbany and County-Coalition completed; recruitment flyer for professors and students 85% completed. BMP 2-11 WAVE-8 sites monitored.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

SWMPv5 (April, 2017) BMP 2-2 Annual Report: Coalition staff prepare for and guide possible transition to "new" MS4 Permit likely to include changes in Annual Report format and annual program evaluation process-no particular goals named in SWMP document. BMP 2-11 WAVE-monitor 4 sites with volunteers.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0			
---	---	---	---	---	--	--	--

3.b. What types of illicit discharges have been found during this reporting period?

- ☐ Broken Lines From Sanitary Sewer
 - ☐ Cross Connections
 - ☐ Failing Septic Systems
 - ☐ Floor Drains Connected To Storm Sewers
 - ☐ Illegal Dumping
 - ☐ Other:
 - ☐ Industrial Connections
 - ☐ Inflow/Infiltration
 - ☐ Pump Station Failure
 - ☐ Sanitary Sewer Overflows
 - ☐ Straight Pipe Sewer Discharges
 - ☐ None

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

--	--	--

5. How many illicit discharges have been confirmed during this reporting period?

--	--	--	--

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

--	--	--	--

7. Has the storm sewershed mapping been completed in this reporting period?

☐ Yes ☐ No

If No, approximately what percent was completed in this reporting period?

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

[illegible]

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - support mapper redesign as guided by consultant, organize 2 to 3 design wkshops for members, integrate mapper redesign with other MS4 program needs (grant funded mobile app field inspection forms for ORI, MS4 construction site inspections, post construction sw practices inspections, facility self audits), prep mapper layers, launch mapper. BMP 3-5 Dry Weather (ORI)-manage ORI kits, restock.

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

BMP 3-2 Coalition Stormwater Program Mapper: completed; re-design includes "Form" considerations; one design workshop, not 3; more complex redesign to include "Forms" pending development of RFP for consultant services. BMP 3-5 Dry Weather (ORI) -completed; kits re-stocked.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

SWMPv5 (April, 2017) BMP 3-4 Storm Sys-CSO-Sewershed Map'g/BMP 5-8 Inventory Post Const SMPs/BMP 6-1 Inventory MuniFac: continue to implement mapping goals detailed in SWMPv5 (see MCM3, MCM 5, and MCM6); continue to implement objectives and tasks listed in the NYSDEC grant contract C00081GG work plan. See respective documents for details (SWMPv5 and grant work plan). Both explain what is being mapped where, when, and how for all Coalition members.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

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.

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Procedures-review paper MS4 Construction Inspection Form for conversion to mobile device. BMP 7-7 Procedures & Forms Compendium-develop Coalition wide strategy for using MS4 Oversight/Construction Permit Guidance Document, discuss training in purpose/use for MS4s/consultants, incorporate into existing/future procedures (3 MS4s); note edits for future updates.

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

BMP 4-5 Construction Site Enf & Inspection Procedures: not completed; DRAFT MS4 Permit points to mandated MS4 Construction Inspection Forms, need to know status of DEC forms before proceeding further.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

SWMPv5 (April, 2017): BMP 4-7 Construction Site Operator Training-4hr: co-host one 4 hr training with ACSWCD.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): BMP 5-5 SWPPP Review Procedures - for Coalition Stormwater Program Mapper update/load map layers named in Construction Activity Permit/ NYSDEC SW Mgmt Design Manual. BMP 5-8 Inventory Post Construction Practices - with grant funding implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - with grant funding develop inspection forms for use with mobile devices

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

.BMP 5-5 SWPPP Review Procedures: partially completed, pre-existing layers uploaded, additional layers more difficult to obtain. BMP 5-8 Inventory Post Construction Practices: mapping of post-construction practices implemented as detailed in grant work plan. MP 5-9 Post Construction Practices: not completed.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

From SWMPv5 document (April, 2017): BMP 5-8 Inventory Post Construction Practices - continue to map post construction practices as detailed in grant work plan and various SWMPv5 goals. BMP 5-9 Post Construction Practices-Maintenance: complete RFP for consultant services to develop GIS friendly post-construction stormwater management practice (PC SMPs) inspection forms (mobile devices).

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

2. Provide the following information about municipal operations good housekeeping programs:

- ☐ Parking Lots Swept (Number of acres X Number of times swept) # Acres

--	--	--	--	--
- ☐ Streets Swept (Number of miles X Number of times swept) # Miles

--	--	--	--	--
- ☐ Catch Basins Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Pesticide/Herbicide Applied # Acres

					.	
--	--	--	--	--	---	--

 (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?

				4
--	--	--	--	---

4. What was the date of the last training?

0	9	/	2	2	/	2	0	1	6
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	4	9
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

1	0	0	%
---	---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): MCM 8 Train'g BMP 8-1 Clean Water Act Basics-Coalition program to 2 MS4 govern'g boards; 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards-1 MS4 Plan'g Board; BMP 8-4/8-5/8-6 replace as needed EXCAL visual DVDs (Spills & Skills, Rain Check, IDDE-A Grate Concern)/circulate to MS4s; BMP 8-17 On-line Training-assist Albany County SW Prog Tech.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

			0
--	--	--	---

(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).

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

MS4 Municipal Compliance Certification(MCC) FormMCC form for period ending March 9,

2	0	1	7
---	---	---	---

Name of MS4

City of Albany

SPDES ID

N	Y	R	2	0	A	4	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:

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

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y
C	o	u	n	t	y																								

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 City of Albany

SPDES ID

N Y R 2 0 A 4 6 4

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for each 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:

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

First Name

J o s e p h

MI

E

Last Name

C o f f e y

Title

C o m m i s s i o n e r

Address

1 0 N E n t e r p r i s e D r i v e

City

A l b a n y

State

N Y

Zip

1 2 2 0 4 -

eMail

j c o f f e y @ a l b a n y n y . g o v

Phone

(5 1 8) 4 3 4 - 5 3 0 0

County

A l b a n y

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 City of Albany

SPDES ID

N Y R 2 0 A 4 6 4

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for each 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:

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

First Name

P e t e r

MI

W

Last Name

B e c k

Title

S t o r m w a t e r P r o g r a m M a n a g e r

Address

1 0 N . E n t e r p r i s e D r i v e

City

A l b a n y

State

N Y

Zip

1 2 2 0 4 -

eMail

p b e c k @ a l b a n y n y . g o v

Phone

(5 1 8) 4 3 4 - 5 3 0 0

County

A l b a n y

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2017

Name of MS4 City of Albany

SPDES ID

N Y R 2 0 A 4 6 4

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S t o r m w a t e r C o a l i t i o n o f A l b a n y

Partner/Coalition Name (con't.)

C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 7 5 G r e e n S t r e e t

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

s w c o a l i t i o n @ a l b a n y c o u n t y . c o m

Phone

(5 1 8) 4 4 7 - 5 6 4 5

Legally Binding Agreement in accordance
with GP-0-08-002 Part IV.G.?

☒ Yes ☐ No

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

● MM1 P u b l i c a t i o n - P r o g r a m s - W e b s i t e s

● MM2 S W M P D o c u m e n t - W A V E - P u b l i c I n p u t

● MM3 S w I M W e b M a p p e r R e d e s i g n - O R I K i t s

● MM4 S w I M W e b M a p p e r - S W P P P r e v i e w L a y e r s

● MM5 P o s t C o n s S M P s - M a p g P r e p - I n v n t o r y

● MM6 T r a i n g : D V D s C o u r s e s P r e s e n t r M t g s

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 City of Albany

SPDES ID

N Y R 2 0 A 4 6 4

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

J o s e p h

MI

E

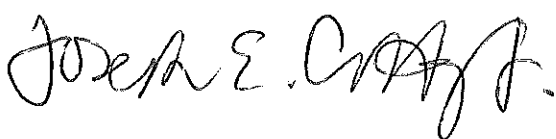
Last Name

C o f f e y , P . E .

Title (Clearly print title of individual signing report)

C o m m i s s i o n e r

Signature



Date

0 5 / 2 4 / 2 0 1 7

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

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

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

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

--	--	--

1. Targeted Public Education and Outreach Best Management Practices

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

- ☒ Construction Sites
 - ☒ General Stormwater Management Information
 - ☒ Household Hazardous Waste Disposal
 - ☐ Illicit Discharge Detection and Elimination
 - ☐ Infrastructure Maintenance
 - ☐ Smart Growth
 - ☒ Storm Drain Marking
 - ☒ Green Infrastructure/Better Site Design/Low Impact Development
 - ☒ Other:
 - ☒ Pesticide and Fertilizer Application
 - ☒ Pet Waste Management
 - ☒ Recycling
 - ☐ Riparian Corridor Protection/Restoration
 - ☒ Trash Management
 - ☐ Vehicle Washing
 - ☐ Water Conservation
 - ☐ Wetland Protection
 - ☐ None

Other

2. Specific audiences targeted during this reporting period:

- ☒ Public Employees ☒ Contractors
☒ Residential ☒ Developers
☐ Businesses ☒ General Public
☐ Restaurants ☐ Industries
☐ Other: ☐ Agricultural

Other

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany																			
----------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☐ Construction Site Operators Trained

Trained

--	--	--	--	--

☒ Direct Mailings

Mailings

2	4	7	7	9
---	---	---	---	---

☒ Kiosks or Other Displays

Locations

				1
--	--	--	--	---

☒ List-Serves

In List

			4	5
--	--	--	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

	1	1	2	5
--	---	---	---	---

☒ School Program

Attendees

		1	0	5
--	--	---	---	---

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		2	5	3
--	--	---	---	---

Locations (e.g. libraries, town offices, kiosks)

A	l	b	a	n	y		W	a	t	e	r		D	e	p	t	.		

☐ Other:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	a	l	b	a	n	y	n	y	.	o	r	g	/	s	t	o	r	m	w	a	t	e	r	.	a	s	p	x

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	City of Albany
-----------------------	----------------

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

3. Web Page con't.: Provide specific web addresses - not home page.

URL

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

1. Stormwater coordinator (SWC)/staff to continue stenciling of catch basins in Hungerkill and Normanskill Watersheds. 2. SWC/staff will maintain 2 brochure racks at AWD and 1 new brochure rack at City Hall. 3. Drop Goal # 3 and focus time & resources to Radix Center with signage and brochure development work with graphic designer.

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

1. Staff stenciled 13 catch basins within the Krumkill watershed. 2. SWC/staff maintained 2 brochure racks at AWD and researched the location of a new brochure rack at City Hall. 3. Radix signage has been developed.

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

		1	6
--	--	---	---

(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).

1. Stormwater coordinator (SWC)/staff will continue the stenciling of catch basins within the local watersheds. 2. SWC/staff will maintain 2 brochure racks at AWD and research possible new locations. 3. SWC will continue to participate in school programs and tabling events. 4. SWC/staff will update the city stormwater website with additional stormwater material. 5. SWC/staff will continue to provide stormwater literature through direct mailings.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

4. SWC will participate in school program and tabling events.

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

4. COA participated in 5 tabling events entitled Earth Day on 4/17/16 and City Hall On The Road on 7/20/16, 8/23/16, 9/13/16 and 9/27/16. COA participated in 2 school programs entitled Future City Competition on 1/21/17 and the School 19 Program on 11/15/16. COA participated in 1 school presentation at the Mainonides Hebrew Day School on 9/9/16. COA participated in one community neighborhood meeting at the Hanson Ryckman homeowners association on 8/29/16.

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).

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g

URL

w	w	w	.	a	l	b	a	n	y	n	y	.	o	r	g	/	s	t	o	r	m	w	a	t	e	r	.	a	s	p	x

URL

URL

URL

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	City of Albany
-----------------------	----------------

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

2. URL(s) con't.:

Please provide specific address(es) where notices can be accessed - not home page.

URL

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	City of Albany
-----------------------	----------------

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

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

Department of Water & Water Sup

Address

City

Phone

$$\begin{pmatrix} 5 & 1 & 8 \end{pmatrix} \begin{pmatrix} 4 & 3 & 4 \end{pmatrix} - \begin{pmatrix} 5 & 3 & 0 & 0 \end{pmatrix}$$

○ Library

☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

City

Phone

Phone (

--	--	--

)

--	--	--

 -

--	--	--	--

☐ Other

● Annual Report ● SWMP Plan ● Comments

Address

City

City											NY	12202	-		
	A	l	b	a	n	y									

Phone

$$(\begin{array}{|c|c|c|} \hline 5 & 1 & 8 \\ \hline \end{array}) \begin{array}{|c|c|c|} \hline 4 & 4 & 7 \\ \hline \end{array} - \begin{array}{|c|c|c|c|} \hline 5 & 6 & 4 & 6 \\ \hline \end{array}$$

○ Web Page URL:

☐ Annual Report
 ☐ SWMP Plan
 ☐ Comments

www.albanyny.org/stormwater.as

☐ eMail

○ Comments

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5
---	---

 /

0	5
---	---

 /

2	0	1	7
---	---	---	---

4.b. For how many days was/will this report be posted?

	1	4
--	---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?
☐ Yes ☒ No

If Yes, what was the date of the meeting?

--	--

 /

--	--

 /

--	--	--	--

If No, is one planned?

☐ Yes ☒ No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?
☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No
6. Were comments received during this reporting period?
☐ Yes ☒ No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

1. City of Albany (COA) will update public contact annually. 2. COA will post Final Joint Report on website (stormwater page). 3. SWC will develop procedures which clarify how queries & complaints are routed and monitored across all relevant Departments and new procedures will be developed as necessary.

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

1. SWC has updated the public contact. 2. The 2016 Final Joint Report was posted on the Albany County Stormwater Coalition website. 3. SWC reviewed with the Commissioner how queries & complaints are handled.

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

			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 SWMP?
☒ 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).

1. City of Albany (COA) will update the public contact annually. 2. COA will post a 2017 Final Joint Report on website (stormwater page). 3. AWD will continue to lend support in the way of education and operational guidance information to community groups. 4. COA will coordinate with community and activist groups to plan and initiate public events.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report?

--	--	--

1. Enter the number and approx. percent of outfalls mapped:

		1	0	5	#
--	--	---	---	---	---

1	0	0	%
---	---	---	---

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?

	2	0
--	---	---

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

- ☐ Auto Recyclers
- ☐ Building Maintenance
- ☐ Churches
- ☐ Commercial Carwashes
- ☐ Commercial Laundry/Dry Cleaners
- ☐ Construction Vehicle Washouts
- ☒ Cross-Connections
- ☐ Distribution Centers
- ☐ Food Processing Facilities
- ☐ Garbage Truck Washouts
- ☐ Hospitals
- ☐ Improper RV Waste Disposal
- ☐ Industrial Process Water
- ☐ Other:
- ☐ Landscaping (Irrigation)
- ☐ Marinas
- ☐ Metal Plateing Operations
- ☐ Outdoor Fluid Storage
- ☐ Parking Lot Maintenance
- ☐ Printing
- ☐ Residential Carwashing
- ☐ Restaurants
- ☐ Schools and Universities
- ☐ Septic Maintenance
- ☐ Swimming Pools
- ☐ Vehicle Fueling
- ☐ Vehicle Maint./Repair Shops
- ☐ None

☐ Other:

○ Sewersheds:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

3.b. What types of illicit discharges have been found during this reporting period?

- ☒ Broken Lines From Sanitary Sewer
☐ Cross Connections
☐ Failing Septic Systems
☐ Floor Drains Connected To Storm Sewers
☒ Illegal Dumping
☐ Other:
- ☐ Industrial Connections
☐ Inflow/Infiltration
☐ Pump Station Failure
☐ Sanitary Sewer Overflows
☐ Straight Pipe Sewer Discharges
☐ None

Other:																			
--------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

		4
--	--	---

5. How many illicit discharges have been confirmed during this reporting period?

		3
--	--	---

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

		3
--	--	---

7. Has the storm sewershed mapping been completed in this reporting period?

☒ Yes ☐ No

If No, approximately what percent was completed in this reporting period?

			%
--	--	--	---

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☐ Yes ☒ No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

[illegible]

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

8. URL(s) con't.:

Please provide specific address of page where map(s) can be accessed - not home page

URL

URL

URL

URL

URL

9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? ☒ Yes ☐ No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? ☒ Yes ☐ No ☐ NT

11. What percent of staff in relevant positions and departments has received IDDE training?

		5
--	--	---

 %

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany									
----------------	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0	A	4	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.

1. Stormwater staff will review completed construction projects for potential outfalls and map using GIS. 2. Stormwater staff following the ORI Inspection Schedule Map will complete ORI on approximately 20 percent of the mapped Outfalls. 3. Stormwater staff will review and update as needed existing procedures for the IDDE program. 4. Stormwater staff will collect data and map any illicit discharges in the GIS system.

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

1. Stormwater staff has reviewed completed construction projects for potential outfalls. No new outfalls were identified or mapped. 2. Stormwater staff followed the ORI Inspection Schedule Map and completed ORI on 20 outfalls. 3. Stormwater staff reviewed existing procedures for the IDDE program, no updates were performed. 4. Stormwater staff has collected data and mapped 2 illegal dumping illicit discharges in the GIS system.

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

			4
--	--	--	---

(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).

1. Stormwater staff will review all completed construction projects for potential outfalls and map utilizing GPS/GIS technologies. 2. Stormwater staff following the ORI Inspection Schedule Map will complete ORI on approximately 20 percent of the mapped outfalls. 3. Stormwater staff will review and update as needed existing procedures for the IDDE program. 4. Stormwater staff will collect data and map any illicit discharges in the GIS system.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

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 Analysis Workbook? ☒ Yes ☐ No ☐ 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 ☐ No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

		5
--	--	---

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?

		0
--	--	---

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	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	☐ No Authority
				1				
☒ Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	☐ No Authority
				1				
☐ Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☒ No Authority
☐ Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☒ No Authority
☒ Administrative Fines	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	☐ No Authority
				0				
☐ Civil Penalties	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☒ No Authority
☒ Administrative Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	☐ No Authority
				0				
☐ Enforcement Actions or Sanctions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						
☐ Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

--	--	--

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

		5
--	--	---

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

		6
--	--	---

3. What percent of active construction sites were inspected during this reporting period? ☐ NT

1	0	0
---	---	---

 %

4. What percent of active construction sites were inspected more than once? ☐ NT

1	0	0
---	---	---

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? ☒ Yes ☐ No ☐ 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? ☒ Yes ☐ No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany																			
----------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

D	e	p	t	.		o	f		W	a	t	e	r		&		W	a	t	e	r		S	u	p	p	l	y		
---	---	---	---	---	--	---	---	--	---	---	---	---	---	--	---	--	---	---	---	---	---	--	---	---	---	---	---	---	--	--

Address

1	0		N	o	r	t	h		E	n	t	e	r	p	r	i	s	e		D	r	i	v	e						
---	---	--	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	--	--	--	--	--	--

City

A	l	b	a	n	y										
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

NY

Zip

1	2	2	0	4	-				
---	---	---	---	---	---	--	--	--	--

Phone

(	5	1	8	)		4	3	4	-	5	3	0	0
---	---	---	---	---	--	---	---	---	---	---	---	---	---

○ Library

Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Zip

					-				
--	--	--	--	--	---	--	--	--	--

Phone

(				)					-				
---	--	--	--	---	--	--	--	--	---	--	--	--	--

○ Other

Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Zip

					-				
--	--	--	--	--	---	--	--	--	--

Phone

(				)					-				
---	--	--	--	---	--	--	--	--	---	--	--	--	--

○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

URL

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

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.

1. City of Albany Stormwater staff will continue to e-mail contractors about the availability of 4-hr E-SC Training Courses. 2. The SWC will take the forms created by the Albany County Stormwater Coalition Forms Committee and modify them for best and implementation in the City of Albany.

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

1. City of Albany Stormwater staff e-mailed 45 contractors about the availability of 4-hr E-SC Training Courses on February 27, 2017. 2. The SWC reviewed the forms created by the Albany County Stormwater Coalition. However, the SWC has not implemented any of the information into the City of Albany forms.

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

		1	4
--	--	---	---

(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).

1. Stormwater staff will continue to e-mail contractors about the availability of 4-hr E-SC Training Courses. 2. The SWC will take the forms created by the Albany County Stormwater Coalition Forms Committee and modify them for best implementation for the City of Albany. 3. SWC will provide erosion and sediment training material during pre-construction meetings. 4. COA will review all SWPPP's on proposed projects and provide monthly inspections on active construction sites.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

Minimum Control Measure 5. Post-Construction Stormwater Management

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

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

How many MS4s contributed to this report?

--	--	--

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

	# Inventoried	# Inspections	# Times Maintained
☐ Alternative Practices			
☐ Filter Systems			
☒ Infiltration Basins		2	2
☐ Open Channels			
☒ Ponds		1	1
☐ Wetlands			
☒ Other		4	4

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

☒ Yes ☐ No

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

- ☒ Building Codes ☒ Municipal Comprehensive Plans
☐ Overlay Districts ☐ Open Space Preservation Program
☒ Zoning ☒ Local Law or Ordinance
☐ None ☐ Land Use Regulation/Zoning
☐ Watershed Plans ☐ Other Comprehensive Plan

☐ Other:

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☐ Yes ☒ No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

☐ Yes ☒ No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

☐ Yes ☒ No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		0
--	--	---

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

	1	8
--	---	---

 %

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

1. Stormwater staff will monitor and participate as needed in the City Re-Zone Albany Initiative, so that code language consider the model local law language developed as part of the "GILLAC" grant. 2. SWC will continue to update inventory of built stormwater practices since 2003 and record in annual report. 3. Stormwater staff will GPS existing practices as discovered and 100 percent of new post construction practices in the Departments GIS.

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

1. Several Albany Water Department staff have been involved in the code review and City Re-Zone Initiative so the code language will consider the model local law language developed in the GILLAC grant work. 2. The SWC researched old developments and projects to update the inventory of practices, stormwater practices were GPS and inspection & O&M letters were sent, inventory changes are reflected in the annual report. 3. SWC GPS 100 % all newly discovered/built practices.

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

		2	1
--	--	---	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

1. SWC/staff will participate as needed in the City Re-Zone Albany Initiative, so that code language considers the model local law language developed as part of the "GILLAC" grant. 2. SWC/staff will continue to update the inventory of built stormwater practices since 2003 and record them in the annual report.

MS4 Annual Report Form

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

--	--	--	--

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

Name of MS4/Coalition

--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.**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?

☐ 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).

3. SWC/staff will GPS existing practices as discovered and 100 percent of new post construction practices in the Departments GIS. 4. SWC/staff will continue to request Operation and Maintenance records for all post construction facilities on an annual basis.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

☒ On behalf of an individual 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

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>	<u>years?</u>
Street Maintenance.....	☒ Yes ☐ No	☒ Yes ☐ No
Bridge Maintenance.....	☒ Yes ☐ No	☒ Yes ☐ No
Winter Road Maintenance.....	☒ Yes ☐ No	☒ Yes ☐ No
Salt Storage.....	☒ Yes ☐ No	☒ Yes ☐ No
Solid Waste Management.....	☒ Yes ☐ No	☒ Yes ☐ No
New Municipal Construction and Land Disturbance..	☒ Yes ☐ No	☒ Yes ☐ No
Right of Way Maintenance.....	☒ Yes ☐ No	☒ Yes ☐ No
Marine Operations.....	☐ Yes ☒ No	☐ Yes ☒ No
Hydrologic Habitat Modification.....	☐ Yes ☒ No	☐ Yes ☒ No
Parks and Open Space.....	☒ Yes ☐ No	☒ Yes ☐ No
Municipal Building.....	☒ Yes ☐ No	☒ Yes ☐ No
Stormwater System Maintenance.....	☒ Yes ☐ No	☒ Yes ☐ No
Vehicle and Fleet Maintenance.....	☒ Yes ☐ No	☒ Yes ☐ No
Other.....	☐ Yes ☐ No	☐ Yes ☐ No

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

2. Provide the following information about municipal operations good housekeeping programs:

- ☒ Parking Lots Swept (Number of acres X Number of times swept) # Acres

		2	5	0
--	--	---	---	---
- ☒ Streets Swept (Number of miles X Number of times swept) # Miles

2	4	0	0	0
---	---	---	---	---
- ☒ Catch Basins Inspected and Cleaned Where Necessary #

		3	2	6
--	--	---	---	---
- ☒ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

				8
--	--	--	--	---
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

				0
--	--	--	--	---
- ☒ Nitrogen Applied In Chemical Fertilizer # Lbs.

	6	1	4	7
--	---	---	---	---
- ☒ Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

	3	8	7	.	1
--	---	---	---	---	---

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

				2
--	--	--	--	---

4. What was the date of the last training?

0	3	/	0	2	/	2	0	1	7
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	1	3
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

	1	0	%
--	---	---	---

Note: The number of catch basin inspection and cleaned is the total of both MS4 and CSO catch basin cleanings.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

City of Albany

SPDES ID

N	Y	R	2	0	A	4	6	4
---	---	---	---	---	---	---	---	---

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.

1. Stormwater staff will reassess one third of the revised facility audit inventory based on the three-year plan map. 2. Staff will review catch basin inspection and cleaning schedule and inspections, clean-outs and repairs will be documented.

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

1. SWC reassessed 19 facilities identified in Year 2/3 based on the three-year plan map, approximately one third of the revised facility audit inventory. 2. Staff reviewed catch basin inspection and cleaning schedule and records : 160 repairs, 200 cleaned in the SS and 126 cleaned in the MS4 areas with 560.6 tons debris removed.

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

		1	0
--	--	---	---

(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).

1. Stormwater staff will reassess one third of the revised facility audit inventory based on the three-year plan map. 2. Staff will review catch basin inspection and cleaning schedule and inspections, clean-outs and repairs will be documented. 3. Stormwater staff will collect and maintain data on miles and acres swept, fertilizer, pesticide, herbicide, and other chemicals used, road salt applied, and household hazardous waste collected.

MS4 Annual Report Form

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

--	--	--	--

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

Name of MS4/Coalition

--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

3. Stormwater staff will collect and maintain data on miles and acres swept, fertilizer, pesticide, herbicide, and other chemicals use, road salt applied, and household hazardous waste collected.

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

3. Stormwater staff collect and reported data on miles and acres swept, fertilizer, pesticide, herbicide, and other chemicals used, road salt applied, and household hazardous waste collected.

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).

4. SWC/staff will host at least two inter-department meetings. 5. SWC/staff will provide training to at least 25% of municipal staff.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

Minimum Control Measure 1. Public Education and Outreach

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

☐ On behalf of an individual MS4

☒ On behalf of a coalition

How many MS4s contributed to this report?

	1	2
--	---	---

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

☒ General Stormwater Management Information

☐ Household Hazardous Waste Disposal

☐ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☒ Smart Growth

☐ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☐ Recycling

☒ Riparian Corridor Protection/Restoration

☐ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	--	---	---	---	--	---	---

Other

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☒ Contractors

☒ Residential ☐ Developers

☒ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

G	e	n	e	r	a	l	P	u	b	l	i	c	-	C	l	e	a	n	W	a	t	e	r	A	c	t	I	n	f	o		
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--

Other

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☒ Construction Site Operators Trained

Trained

			7	0
--	--	--	---	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				8
--	--	--	--	---

☒ List-Serves

In List

		2	5	0
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		1	1	9
--	--	---	---	---

☐ School Program

Attendees

--	--	--	--	--

☒ TV Spot/Program

Days Run

				1
--	--	--	--	---

☒ Printed Materials:

Total # Distributed

			5	6
--	--	--	---	---

Locations (e.g. libraries, town offices, kiosks)

C	W	P		W	e	b	c	a	s	t	s								
P	l	a	n	n	i	n	g		B	o	a	r	d		M	t	g	s	
T	r	a	i	n	i	n	g	s	-	P	u	b	l	i	c	P	r	o	g
W	A	V	E	V	o	l	R	e	c	r	u	i	t	m	e	n	t		

☒ Other:

H	o	s	t		2		C	W	P		W	e	b	c	a	s	t	s	
---	---	---	---	--	---	--	---	---	---	--	---	---	---	---	---	---	---	---	--

☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

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.

From SWMPv4 document (May, 2016): BMP 1-1 Target Audience Analysis Wksheet - support MS4 efforts to update their TAAW; id target audience, draft & implement goals; BMP 1-3 Website-post routine Coalition events, update text of Home Page. BMP 1-7 List Serve - update contacts (newly elected, Plan'g Bd, MS4 staff, consultants, webcast audience). BMP 1-6 Public Program-Guest Spker-present Clean Water Act Basics & Green Infrastructure Program to MS4 Electeds/Plan'g Bd.

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

BMP 1-1 Target Audience Analysis Worksheet (TAAW): not completed. BMP 1-3 Website: completed. BMP 1-7 List Serve: partially completed; drop/adds and updated emails provided by Coalition members; not entered into ACCESS database. BMP 1-6 Public Program-Guest Speaker: completed-1 CWA Presentation; not completed-Green Infrastructure Program to MS4 Electeds; no time to develop program and staff person organizing program left MS4.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

SWMPv5 (April, 2017) BMP 1-3 Website: continue to maintain Coalition website (post mandated documents; post educational material; post meeting announcements; pay invoice). BMP 1-7 List Serve: update ACCESS database; BMP 1-4 Publications: update door hanger publication; BMP 1-14 Public Programs-Organized By Coalition-host 1 CWP webcast.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0			
---	---	---	---	---	--	--	--

Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?	1	2
---	---	---

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

- | | | | | | |
|--|--|--|--|--|---|
| ☐ Cleanup Events | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| ☒ Comments on SWMP Received | # Comments | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="0"/> |
| ☒ Community Hotlines | Phone # | (<input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="8"/>) | <input type="text" value="4"/> <input type="text" value="4"/> <input type="text" value="7"/> | - | <input type="text" value="5"/> <input type="text" value="6"/> <input type="text" value="4"/> <input type="text" value="5"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> |
| Phone # | (<input type="text"/> <input type="text"/> <input type="text"/>) | <input type="text"/> <input type="text"/> <input type="text"/> | - | <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> |
| ☐ Community Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| ☐ Plantings | Sq. Ft. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| ☐ Storm Drain Markings | # Drains | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| ☐ Stakeholder Meetings | # Attendees | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| ☒ Volunteer Monitoring | # Events | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="7"/> |
| ☒ Other: | C o a l i t i o n C o m m e n t s - D R A F T M S 4 P m t | | | | |

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

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																													
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

SPDES ID
N Y R 2 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

S t o r m w a t e r C o a l i t i o n - A l b a n y C n t y

Address

1 7 5 G r e e n S t r e e t - C n t y H e a l t h B l d g

City

A l b a n y

N Y

Zip

1 2 2 0 2 -

Phone

(5 1 8) 4 4 7 - 5 6 4 5

☐ Library ☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

City

Zip

-

Phone

() -

☐ Other ☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

City

Zip

-

Phone

() -

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

w w w . s t o r m w a t e r a l b a n y c o u n t y . o r g

Please provide specific address of page where report can be accessed - not home page.

☒ eMail ☒ Comments

s w c o a l i t i o n @ a l b a n y c o u n t y . c o m

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5	/	0	5	/	2	0	1	7
---	---	---	---	---	---	---	---	---	---

4.b. For how many days was/will this report be posted?

	1	4
--	---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

☐ Yes ☐ No

If Yes, what was the date of the meeting?

		/			/				
--	--	---	--	--	---	--	--	--	--

If No, is one planned?

☐ Yes ☐ No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

From SWMPv4 document (May, 2016): BMP 2-2 Annual Report-combine Joint SWMP document update (BMPs/Goals) with prep of Annual Report, meet w/all members, post AR & SWMP on website. BMP 2-8 Student Water Quality Projects-coordinate with U Albany mapping projects named in WQIP Rnd 12 grant workplan, secure professor/student support, start projects, \$/credits. BMP 2-11 WAVE-monitor 4 sites w/volunteers.

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

BMP 2-2 Annual Report: completed. BMP 2-8 Student Water Quality Projects: partially completed; contract between UAlbany and County-Coalition completed; recruitment flyer for professors and students 85% completed. BMP 2-11 WAVE-8 sites monitored.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

SWMPv5 (April, 2017) BMP 2-2 Annual Report: Coalition staff prepare for and guide possible transition to "new" MS4 Permit likely to include changes in Annual Report format and annual program evaluation process-no particular goals named in SWMP document. BMP 2-11 WAVE-monitor 4 sites with volunteers.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0			
---	---	---	---	---	--	--	--

3.b. What types of illicit discharges have been found during this reporting period?

- ☐ Broken Lines From Sanitary Sewer
 - ☐ Cross Connections
 - ☐ Failing Septic Systems
 - ☐ Floor Drains Connected To Storm Sewers
 - ☐ Illegal Dumping
 - ☐ Other:
 - ☐ Industrial Connections
 - ☐ Inflow/Infiltration
 - ☐ Pump Station Failure
 - ☐ Sanitary Sewer Overflows
 - ☐ Straight Pipe Sewer Discharges
 - ☐ None

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

--	--	--

5. How many illicit discharges have been confirmed during this reporting period?

--	--	--	--

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

--	--	--	--

7. Has the storm sewershed mapping been completed in this reporting period?

☐ Yes ☐ No

If No, approximately what percent was completed in this reporting period?

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

[illegible]

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - support mapper redesign as guided by consultant, organize 2 to 3 design wkshops for members, integrate mapper redesign with other MS4 program needs (grant funded mobile app field inspection forms for ORI, MS4 construction site inspections, post construction sw practices inspections, facility self audits), prep mapper layers, launch mapper. BMP 3-5 Dry Weather (ORI)-manage ORI kits, restock.

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

BMP 3-2 Coalition Stormwater Program Mapper: completed; re-design includes "Form" considerations; one design workshop, not 3; more complex redesign to include "Forms" pending development of RFP for consultant services. BMP 3-5 Dry Weather (ORI) -completed; kits re-stocked.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

SWMPv5 (April, 2017) BMP 3-4 Storm Sys-CSO-Sewershed Map'g/BMP 5-8 Inventory Post Const SMPs/BMP 6-1 Inventory MuniFac: continue to implement mapping goals detailed in SWMPv5 (see MCM3, MCM 5, and MCM6); continue to implement objectives and tasks listed in the NYSDEC grant contract C00081GG work plan. See respective documents for details (SWMPv5 and grant work plan). Both explain what is being mapped where, when, and how for all Coalition members.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

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.

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Procedures-review paper MS4 Construction Inspection Form for conversion to mobile device. BMP 7-7 Procedures & Forms Compendium-develop Coalition wide strategy for using MS4 Oversight/Construction Permit Guidance Document, discuss training in purpose/use for MS4s/consultants, incorporate into existing/future procedures (3 MS4s); note edits for future updates.

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

BMP 4-5 Construction Site Enf & Inspection Procedures: not completed; DRAFT MS4 Permit points to mandated MS4 Construction Inspection Forms, need to know status of DEC forms before proceeding further.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

SWMPv5 (April, 2017): BMP 4-7 Construction Site Operator Training-4hr: co-host one 4 hr training with ACSWCD.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): BMP 5-5 SWPPP Review Procedures - for Coalition Stormwater Program Mapper update/load map layers named in Construction Activity Permit/ NYSDEC SW Mgmt Design Manual. BMP 5-8 Inventory Post Construction Practices - with grant funding implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - with grant funding develop inspection forms for use with mobile devices

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

.BMP 5-5 SWPPP Review Procedures: partially completed, pre-existing layers uploaded, additional layers more difficult to obtain. BMP 5-8 Inventory Post Construction Practices: mapping of post-construction practices implemented as detailed in grant work plan. MP 5-9 Post Construction Practices: not completed.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

From SWMPv5 document (April, 2017): BMP 5-8 Inventory Post Construction Practices - continue to map post construction practices as detailed in grant work plan and various SWMPv5 goals. BMP 5-9 Post Construction Practices-Maintenance: complete RFP for consultant services to develop GIS friendly post-construction stormwater management practice (PC SMPs) inspection forms (mobile devices).

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

2. Provide the following information about municipal operations good housekeeping programs:

- ☐ Parking Lots Swept (Number of acres X Number of times swept) # Acres

--	--	--	--	--
- ☐ Streets Swept (Number of miles X Number of times swept) # Miles

--	--	--	--	--
- ☐ Catch Basins Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Pesticide/Herbicide Applied # Acres

					.	
--	--	--	--	--	---	--

 (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?

				4
--	--	--	--	---

4. What was the date of the last training?

0	9	/	2	2	/	2	0	1	6
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	4	9
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

1	0	0	%
---	---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): MCM 8 Train'g BMP 8-1 Clean Water Act Basics-Coalition program to 2 MS4 govern'g boards; 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards-1 MS4 Plan'g Board; BMP 8-4/8-5/8-6 replace as needed EXCAL visual DVDs (Spills & Skills, Rain Check, IDDE-A Grate Concern)/circulate to MS4s; BMP 8-17 On-line Training-assist Albany County SW Prog Tech.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

			0
--	--	--	---

(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).

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 TOWN OF BETHLEHEM

SPDES ID

N Y R 2 0 A 2 0 8

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

S	t	o	r	m	w	a	t	e	r		C	o	a	l	i	t	i	o	n		o	f		A	l	b	a	n	y	
C	o	u	n	t	y																									

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 TOWN OF BETHLEHEM

SPDES ID

N Y R 2 0 A 2 0 8

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for each 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:

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

First Name

B r e n t

MI

Last Name

M e r e d i t h

Title

S u p e r i n t e n d e n t o f H i g h w a y s

Address

4 4 5 D e l a w a r e A v e

City

D e l m a r

State

N Y

Zip

1 2 0 5 4 -

eMail

b m e r e d i t h @ t o w n o f b e t h l e h e m . o r g

Phone

(5 1 8) 4 3 9 - 4 9 5 5

County

A l b a n y

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 7

Name of MS4 TOWN OF BETHLEHEM

SPDES ID

N Y R 2 0 A 2 0 8

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for each 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:

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

First Name

P A U L

MI

Last Name

P E N M A N

Title

D P W D E P U T Y C O M M I S I O N E R / T O W N E N G .

Address

4 4 5 D E L A W A R E A V E N U E

City

D E L M A R

State

N Y

Zip

1 2 0 5 4 -

eMail

P P E N M A N @ T O W N O F B E T H L E H E M . O R G

Phone

(5 1 8) 4 3 9 - 4 9 5 5

County

A L B A N Y

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2017

Name of MS4

TOWN OF BETHLEHEM

SPDES ID

N Y R 2 0 A 2 0 8

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

☒ Yes ☐ No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

S t o r m w a t e r C o a l i t i o n o f

Partner/Coalition Name (con't.)

A l b a n y C o u n t y

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 7 5 G r e e n S t r e e t - C o u n t y H e a l t h B l d g

City

A l b a n y

State

N Y

Zip

1 2 2 0 2 -

eMail

N a n c y . H e i n z e n @ a l b a n y c o u n t y n y . g o v

Phone

(5 1 8) 4 4 7 - 5 6 4 5

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?

☒ Yes ☐ No

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

● MM1 P u b l i c a t i o n s - P r o g r a m s - W e b s i t e

● MM2 S W M P D o c u m e n t - W A V E - P u b l i c I n p u t

● MM3 S w I M W e b M a p p e r R e d e s i g n - O R I K i t s

● MM4 S w I M W e b M a p p e r - S W P P R e v i e w L a y r s

● MM5 P o s t C o n s S M P s - M a p g P r e p - I n v n t o r y

● MM6 T r a i n g : D V D s C o u r s e s P r e s e n t r M t g s

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) FormMCC form for period ending March 9,

2	0	1	7
---	---	---	---

Name of MS4

Town of Bethlehem

SPDES ID

N	Y	R	2	0	A			
---	---	---	---	---	---	--	--	--

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

B	r	e	n	t										
---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

MI

--

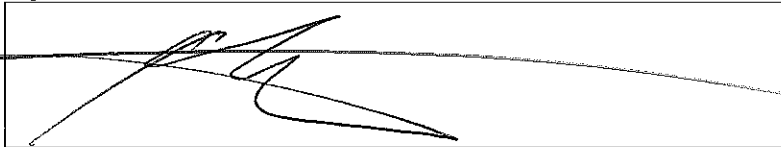
Last Name

M	e	r	e	d	i	t	h							
---	---	---	---	---	---	---	---	--	--	--	--	--	--	--

Title (Clearly print title of individual signing report)

H	i	g	h	w	a	y		S	u	p	e	r	i	n	t	e	n	d	e	n	t										
---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

Signature



Date

	5	/	2	2	/	2	0	1	7
--	---	---	---	---	---	---	---	---	---

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

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

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

T	O	W	N	O	F	B	E	T	H	L	E	H	E	M
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

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?

0	1	2
---	---	---

- 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

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHELEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

	1	2
--	---	---

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
 - ☒ General Stormwater Management Information
 - ☒ Household Hazardous Waste Disposal
 - ☐ Illicit Discharge Detection and Elimination
 - ☐ Infrastructure Maintenance
 - ☐ Smart Growth
 - ☐ Storm Drain Marking
 - ☒ Green Infrastructure/Better Site Design/Low Impact Development
 - ☐ Other:
 - ☒ Pesticide and Fertilizer Application
 - ☒ Pet Waste Management
 - ☐ Recycling
 - ☐ Riparian Corridor Protection/Restoration
 - ☐ Trash Management
 - ☒ Vehicle Washing
 - ☐ Water Conservation
 - ☐ Wetland Protection
 - ☐ None

Other

2. Specific audiences targeted during this reporting period:

- ☒ Public Employees ☒ Contractors
☐ Residential ☒ Developers
☐ Businesses ☒ General Public
☐ Restaurants ☐ Industries
☐ Other: ☐ Agricultural

Other

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

T	O	W	N	O	F	B	E	T	H	L	E	H	E	M
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☒ Construction Site Operators Trained

Trained

				7
--	--	--	--	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				3
--	--	--	--	---

☒ List-Serves

In List

	1	9	3	2
--	---	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☐ Public Events/Presentations

Attendees

--	--	--	--	--

☐ School Program

Attendees

--	--	--	--	--

☐ TV Spot/Program

Days Run

--	--	--	--	--

☒ Printed Materials:

Total # Distributed

		1	4	9
--	--	---	---	---

Locations (e.g. libraries, town offices, kiosks)

B	u	i	l	d	i	n	g		D	e	p	t	.					
---	---	---	---	---	---	---	---	--	---	---	---	---	---	--	--	--	--	--

E	n	g	i	n	e	e	r	i	n	g		D	e	p	t	.		
---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

☐ Other:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

h	t	t	p	:	/	/	w	w	w	.	t	o	w	n	o	f	b	e	t	h	l	e	h	e	m	.	o	r	g	/
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

1	7	2	/	s	t	o	r	m	w	a	t	e	r	-	M	a	n	a	g	e	m	e	n	t						
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g	
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

3. Web Page con't.: Provide specific web addresses - not home page.

URL

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

(1-1)Finalize Target Audience Maps for posting;(1-3)Review and reposition stormwater program web content; (1-9)Promote publications in email and hard copy formats; (1-11)Ensure new SMP have required signage. (1-16)Post WQ message on website; (1-17) Update Town Hall brochures; (1-18) Advance stormdrain markers; handouts etc.(1-20)Respond and track HOA/private owner education of permanent practices O&M.

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

Town completed analysis of Target Area Maps, identifying areas/types of concern. Maps have not been posted to website yet, but analysis results served to guide additional SWMP plan efforts.

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 ☐ 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).

(1-3)Review and reposition stormwater program web content; (1-9)Promote publications in email and hard copy formats; (1-11)Ensure new SMP have required signage. (1-16)Post WQ message on website; (1-17) Update Town Hall brochures; (1-18) Advance stormdrain markers; handouts etc.(1-20)Respond and track HOA/private owner education of permanent practices O&M.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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 BETHLEHEM

SPDES ID

N Y R 2 0 A 2 0 8

Minimum Control Measure 2. Public Involvement/Participation

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

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

☒ Cleanup Events

Events

 3

☐ Comments on SWMP Received

Comments

☒ Community Hotlines

Phone #

(5 1 8) 4 3 9 - 4 9 5 5

Phone #

Phone #

Phone #

Phone #

Phone #

Phone #

Phone #

Phone #

Phone #

Phone #

☐ Community Meetings

Attendees

☒ Plantings

Sq. Ft.

 1 3 0

☐ Storm Drain Markings

Drains

☐ Stakeholder Meetings

Attendees

☐ Volunteer Monitoring

Events

☐ Other:

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

☒ Yes ☐ No

☒ List-Serve

In List

☐ Newspaper Advertising

Days Run

☐ TV/Radio Notices

Days Run

☒ Other:

P o s t e d i n T o w n H a l l

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

SPDES ID

N Y R 2 0 A 2 0 8

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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 BETHLEHEM
-----------------------	-------------------

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

2. URL(s) con't.:

Please provide specific address(es) where notices can be accessed - not home page.

URL

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

T	O	W	N	O	F	B	E	T	H	L	E	H	E	M
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 SPDES ID

N	Y	R	2	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

D	P	W		-		E	n	g	i	n	e	e	r	i	n	g		D	i	v	i	s	i	o	n				
---	---	---	--	---	--	---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	--	--	--	--

Address

4	4	5		D	e	l	a	w	a	r	e		A	v	e	n	u	e											
---	---	---	--	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--

City

D	e	l	m	a	r																								
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

N	Y
---	---

 Zip

Phone

(	5	1	8	)		4	3	9		-		4	9	5	5	
---	---	---	---	---	--	---	---	---	--	---	--	---	---	---	---	--

☐ Library ☐ Annual Report ☐ SWMP Plan ☐ Comments

Address

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--

 Zip

Phone

(				)						-						
---	--	--	--	---	--	--	--	--	--	---	--	--	--	--	--	--

☒ Other ☒ Annual Report ☒ SWMP Plan ☒ Comments

Address

C	o	a	i	t	i	o	n		O	f	c	e		1	7	5		G	r	e	e	n		S	t	r	e	e	t
---	---	---	---	---	---	---	---	--	---	---	---	---	--	---	---	---	--	---	---	---	---	---	--	---	---	---	---	---	---

City

A	l	b	a	n	y																								
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

N	Y
---	---

 Zip

Phone

(	5	1	8	)		4	4	7		-		5	6	4	5	
---	---	---	---	---	--	---	---	---	--	---	--	---	---	---	---	--

☒ Web Page URL: ☒ Annual Report ☒ SWMP Plan ☐ Comments

w	w	w	.	t	o	w	n	o	f	b	e	t	h	l	e	h	e	m	.	o	r	g	/	1	7	5	/			
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--	--

O	u	r	-	s	t	o	r	m	w	a	t	e	r	-	m	a	n	a	g	e	m	e	n	t	-	p	r	o	g	r
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

a	m																													
---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please provide specific address of page where report can be accessed - not home page.

☒ eMail ☒ Comments

s	w	c	o	a	i	t	i	o	n	@	a	l	b	a	n	y	c	o	u	n	t	y	.	c	o	m			
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

T	O	W	N	O	F	B	E	T	H	L	E	H	E	M
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5
---	---

 /

0	5
---	---

 /

2	0	1	7
---	---	---	---

4.b. For how many days was/will this report be posted?

1	4
---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

☐ Yes ☐ No

If Yes, what was the date of the meeting?

--	--

 /

--	--

 /

--	--	--	--

If No, is one planned?

☐ Yes ☐ No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

(2-1) Update stormwater contact information and post Joint Annual Report to Town's website; (2-5) Continue and enhance "Track a Concern" tracking system for stormwater issues, complaints and mitigation approaches; (2-6) Conduct at least 3 community cleanup days. (2-n) Install 5-10 street trees with stormwater educational awareness FAQ sheet for owners.

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

The Town successfully continued the community clean up events (3): 4/16 5/14, 5/21

The Town installed 13 street trees to improve water quality during this reporting period.

"Track a Concern" was implemented and received/responded to 12 submitted concerns.

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?

☒ 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).

(2-1) Update stormwater contact information and post Joint Annual Report to Town's website; (2-5) Continue and enhance, as necessary, "Track a Concern" tracking system for stormwater issues, complaints and mitigation approaches; (2-6) Conduct at least 3 community cleanup days. (2-n) Install 5-10 street trees with stormwater educational awareness FAQ sheet for owners.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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 BETHELEHEM

SPDES ID

N	Y	R	2	0	A	2	0	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 this report?

1. Enter the number and approx. percent of outfalls mapped:

		3	9	9	#	1	0	0	%
--	--	---	---	---	---	---	---	---	---

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?

3	9	9
---	---	---

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

- ☐ Auto Recyclers
- ☐ Building Maintenance
- ☐ Churches
- ☐ Commercial Carwashes
- ☐ Commercial Laundry/Dry Cleaners
- ☐ Construction Vehicle Washouts
- ☐ Cross-Connections
- ☐ Distribution Centers
- ☐ Food Processing Facilities
- ☐ Garbage Truck Washouts
- ☐ Hospitals
- ☐ Improper RV Waste Disposal
- ☐ Industrial Process Water
- ☒ Other:
- ☐ Landscaping (Irrigation)
- ☐ Marinas
- ☐ Metal Plateing Operations
- ☐ Outdoor Fluid Storage
- ☐ Parking Lot Maintenance
- ☐ Printing
- ☐ Residential Carwashing
- ☐ Restaurants
- ☐ Schools and Universities
- ☐ Septic Maintenance
- ☐ Swimming Pools
- ☐ Vehicle Fueling
- ☐ Vehicle Maint./Repair Shops
- ☐ None

O	R	I		b	a	s	e	d		o	n		r	o	t	a	t	i	n	g		s	c	h	e	d	u	l	e
---	---	---	--	---	---	---	---	---	--	---	---	--	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---

○ Sewersheds:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

3.b. What types of illicit discharges have been found during this reporting period?

- ☐ Broken Lines From Sanitary Sewer
☐ Cross Connections
☐ Failing Septic Systems
☐ Floor Drains Connected To Storm Sewers
☒ Illegal Dumping
☒ Other:
- ☐ Industrial Connections
☐ Inflow/Infiltration
☐ Pump Station Failure
☐ Sanitary Sewer Overflows
☐ Straight Pipe Sewer Discharges
☐ None

i n n e f e c t i v e s e d i m e n t c o n t a i n m e n t

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

	2
--	---

5. How many illicit discharges have been confirmed during this reporting period?

	2
--	---

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

		2
--	--	---

7. Has the storm sewershed mapping been completed in this reporting period?

☐ Yes ☒ No

If No, approximately what percent was completed in this reporting period?

8	5	%
---	---	---

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☐ Yes ☒ No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

8. URL(s) con't.:

Please provide specific address of page where map(s) can be accessed - not home page

URL

URL

URL

URL

URL

9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? ☒ Yes ☐ No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? ☒ Yes ☐ No ☐ NT

11. What percent of staff in relevant positions and departments has received IDDE training?

9	0	%
---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	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.

(3-1) Utilize Target Area Maps to prioritize mapping additional outfalls and attempt 15% additional collection areas ; (3-5) Attempt to screen all newly identified outfalls and 20% of previously identified; (3-8) Review and update IDDE procedures; (3-8) Use GIS to locate and track all approved SWPPPs; (3-9) Develop GIS/Sharepoint system for tracking IDDE issues and status.

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

The Town was able to inspect all known outfalls last year. Ongoing effort was made to identify and locate stormwater collection systems and outfall locations. Outfall inspection app for mobile data collection designed, tested and implemented.

Significantly improved tracking for documents and status of SPDES permitted sites/applications.

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?

☒ 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).

(3-1) Utilize Target Area Maps to prioritize mapping additional outfalls and attempt 15% additional collection areas ; (3-5) Attempt to screen all newly identified outfalls and 20% of previously identified; (3-8) Continue to develop IDDE procedures; (3-8) Expand use of GIS and Sharepoint to locate and track all approved SWPPPs; (3-9) Develop GIS/Sharepoint system for tracking IDDE issues and status.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

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 Analysis Workbook?

☒ Yes ☐ No ☐ 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 ☐ No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

	1	0
--	---	---

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?

		0
--	--	---

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	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	☐ No Authority
				1				
☒ Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	☐ No Authority
				1				
☐ Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Administrative Fines	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Civil Penalties	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☐ Administrative Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority
☒ Enforcement Actions or Sanctions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table>					1	
				1				
☐ Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						☐ No Authority

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

--	--	--

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

	1	2
--	---	---

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

	1	7
--	---	---

3. What percent of active construction sites were inspected during this reporting period? ☐ NT

1	0	0
---	---	---

 %

4. What percent of active construction sites were inspected more than once? ☐ NT

1	0	0
---	---	---

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? ☒ Yes ☐ No ☐ 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? ☐ Yes ☐ No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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 BETHLEHEM
-----------------------	-------------------

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

6. con't.:

Submit additional pages as needed.

☐ MS4/Coalition Office

Department

[illegible]

Address

[illegible]

City

[illegible]

Zip

--	--	--	--

-

--	--	--	--

Phone

$$\left(\begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} \right) \begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} - \begin{array}{|c|c|c|c|} \hline & & & \\ \hline \end{array}$$

○ Library

Address

[illegible]

City

[illegible]

Zip

--	--	--	--	--

-

--	--	--	--

Phone

$$\left(\begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} \right) \begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} - \begin{array}{|c|c|c|c|} \hline & & & \\ \hline \end{array}$$

☐ Other

Address

[illegible]

City

[illegible]

Zip

--	--	--	--

-

--	--	--	--

Phone

$$\left(\begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} \right) \begin{array}{|c|c|} \hline & \\ \hline \end{array} - \begin{array}{|c|c|c|c|} \hline & & & \\ \hline \end{array}$$

○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

[illegible][illegible][illegible]

URL

[illegible][illegible][illegible]

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

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.

(4-2)Review and update SWPPP review written procedures; (4-4)Review and update written complaint procedures;(4-5)Review and update construction inspection and enforcement procedures; (4-7)Review and update Pre-Construction written procedures; (4-8)Utilize GIS/Sharepoint systems to track newly approved SWPPP's, back-load old SWPPP's as time permits.

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

- The Town conducted formal, routine inspections of active construction sites.
- All SWPPPs, active and completed, are mapped. All active and 50% of closed permit documents located and transferred to Town's Sharepoint site.
- No advancement to Standard written procedures advanced during this reporting period.

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

	4
--	---

(i.e., 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).

(4-2)Review and update SWPPP review written procedures; (4-4)Review and update written complaint procedures;(4-5)Review and update construction inspection and enforcement procedures; (4-7)Review and update Pre-Construction written procedures; (4-8)Utilize GIS/Sharepoint systems to track newly approved SWPPP's, back-load old SWPPP's as time permits.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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 BETHLEHEM
-----------------------	-------------------

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

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. The first part of the paper is a review of the literature on the effects of the 1996 welfare reform on the labor market outcomes of low-income women. The review is organized into three sections: (a) the effects of the reform on the labor market outcomes of low-income women, (b) the effects of the reform on the labor market outcomes of low-income women with children, and (c) the effects of the reform on the labor market outcomes of low-income women with children who are also in the labor force.	2. The second part of the paper is a review of the literature on the effects of the 1996 welfare reform on the labor market outcomes of low-income women with children. The review is organized into three sections: (a) the effects of the reform on the labor market outcomes of low-income women with children, (b) the effects of the reform on the labor market outcomes of low-income women with children who are also in the labor force, and (c) the effects of the reform on the labor market outcomes of low-income women with children who are also in the labor force.
--	---

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

[illegible]

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

● Yes ○ No

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

- ☐ Building Codes ☒ Municipal Comprehensive Plans
☐ Overlay Districts ☐ Open Space Preservation Program
☒ Zoning ☐ Local Law or Ordinance
☐ None ☒ Land Use Regulation/Zoning
☐ Watershed Plans ☐ Other Comprehensive Plan

☐ Other:

[illegible]

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☒ Yes ☐ No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

☐ Yes ☒ No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

☐ Yes ☒ No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

	1	4
--	---	---

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impacc Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

		0
--	--	---

 %

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	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.

(5-5)Review and update SWPPP review written procedures; (5-12)Utilize Town GIS/Sharepoint to track and inventory all post-construction practices within MS4; (5-12)Utilize Town GIS/Sharepoint to track all inspections/maintenance for Town owned stormwater practices.

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

The Town developed a layer with the Town's GIS program to show the location of post-construction practices. (Carryover from last year).

The Town did not conduct inspection of private post-construction practices and did not develop a tracking method for Town owned stormwater practices.

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?

☒ 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).

(5-5)Review and update SWPPP review written procedures; (5-12)Utilize Town GIS/Sharepoint to track and inventory all post-construction practices within MS4; (5-12)Utilize Town GIS/Sharepoint to track all inspections/maintenance for Town owned stormwater practices.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHLEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report?

--	--	--

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

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment</u>	
			<u>Operation/Activity/Facility performed within the past 3 years?</u>	
Street Maintenance.....	☒ Yes	☐ No	☒ Yes	☐ No
Bridge Maintenance.....	☐ Yes	☒ No	☐ Yes	☒ No
Winter Road Maintenance.....	☒ Yes	☐ No	☐ Yes	☒ No
Salt Storage.....	☒ Yes	☐ No	☐ Yes	☒ No
Solid Waste Management.....	☒ Yes	☐ No	☐ Yes	☒ No
New Municipal Construction and Land Disturbance..	☒ Yes	☐ No	☐ Yes	☒ No
Right of Way Maintenance.....	☒ Yes	☐ No	☐ Yes	☒ No
Marine Operations.....	☐ Yes	☒ No	☐ Yes	☒ No
Hydrologic Habitat Modification.....	☐ Yes	☒ No	☐ Yes	☒ No
Parks and Open Space.....	☒ Yes	☐ No	☐ Yes	☒ No
Municipal Building.....	☒ Yes	☐ No	☐ Yes	☒ No
Stormwater System Maintenance.....	☒ Yes	☐ No	☐ Yes	☒ No
Vehicle and Fleet Maintenance.....	☒ Yes	☐ No	☐ Yes	☒ No
Other.....	☐ Yes	☒ No	☐ Yes	☒ No

MS4 Annual Report Form

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

2	0	1	6
---	---	---	---

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

Name of MS4/Coalition

T	O	W	N	O	F	B	E	T	H	L	E	H	E	M
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

2. Provide the following information about municipal operations good housekeeping programs:

- ☒ Parking Lots Swept (Number of acres X Number of times swept) # Acres

				7
--	--	--	--	---
- ☒ Streets Swept (Number of miles X Number of times swept) # Miles

		3	5	0
--	--	---	---	---
- ☐ Catch Basins Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☒ Nitrogen Applied In Chemical Fertilizer # Lbs.

	3	0	0	0
--	---	---	---	---
- ☒ Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

		1	.	7
--	--	---	---	---

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?

	3
--	---

 /

	1
--	---

 /

2	0	1	6
---	---	---	---

5. How many municipal employees have been trained in this reporting period?

		0
--	--	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

1	0	0
---	---	---

 %

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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 BETHELEHEM

SPDES ID

N	Y	R	2	0	A	2	0	8
---	---	---	---	---	---	---	---	---

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.

(6-1)Review and update current list of Town owned facilities; (6-2)Establish dates of past facility audits and schedule to reinspect; (6-3,4)Coordinate with Highway Dept. regarding catchbasin and street cleaning operations (6-8)Coordinate with Highway Dept regarding Hazardous Waste Day. (6-25)Establish and oversee Third-Party Contracted Entity Certification Statements.

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

The Town has developed a GIS layer showing the location of all municipal facility locations. No facility audits were conducted. No coordination with Highway Department for CB cleaning progressed.

No progress made on Third-Party Contracted Entity Certification Statements.

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 ☐ 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).

(6-1)Review and update current list of Town owned facilities; (6-2)Establish dates of past facility audits and schedule to reinspect; (6-3,4)Coordinate with Highway Dept. regarding catchbasin and street cleaning operations (6-8)Coordinate with Highway Dept regarding Hazardous Waste Day. (6-25)Establish and oversee Third-Party Contracted Entity Certification Statements.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

Minimum Control Measure 1. Public Education and Outreach

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

☐ On behalf of an individual MS4

☒ On behalf of a coalition

How many MS4s contributed to this report?

	1	2
--	---	---

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

☒ General Stormwater Management Information

☐ Household Hazardous Waste Disposal

☐ Illicit Discharge Detection and Elimination

☒ Infrastructure Maintenance

☒ Smart Growth

☐ Storm Drain Marking

☐ Green Infrastructure/Better Site Design/Low Impact Development

☒ Other:

☒ Pesticide and Fertilizer Application

☒ Pet Waste Management

☐ Recycling

☒ Riparian Corridor Protection/Restoration

☐ Trash Management

☒ Vehicle Washing

☐ Water Conservation

☐ Wetland Protection

☐ None

C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e	-	W	h	a	t		Y	o	u		C	a	n		D	o
---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	--	---	---	---	--	---	---

Other

2. Specific audiences targeted during this reporting period:

☒ Public Employees ☒ Contractors

☒ Residential ☐ Developers

☒ Businesses ☒ General Public

☐ Restaurants ☐ Industries

☒ Other: ☐ Agricultural

G	e	n	e	r	a	l	P	u	b	l	i	c	-	C	l	e	a	n	W	a	t	e	r	A	c	t	I	n	f	o		
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--

Other

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

☒ Construction Site Operators Trained

Trained

			7	0
--	--	--	---	---

☐ Direct Mailings

Mailings

--	--	--	--	--

☒ Kiosks or Other Displays

Locations

				8
--	--	--	--	---

☒ List-Serves

In List

		2	5	0
--	--	---	---	---

☐ Mailing List

In List

--	--	--	--	--

☐ Newspaper Ads or Articles

Days Run

--	--	--	--	--

☒ Public Events/Presentations

Attendees

		1	1	9
--	--	---	---	---

☐ School Program

Attendees

--	--	--	--	--

☒ TV Spot/Program

Days Run

				1
--	--	--	--	---

☒ Printed Materials:

Total # Distributed

			5	6
--	--	--	---	---

Locations (e.g. libraries, town offices, kiosks)

C	W	P		W	e	b	c	a	s	t	s								
P	l	a	n	n	i	n	g		B	o	a	r	d		M	t	g	s	
T	r	a	i	n	i	n	g	s	-	P	u	b	l	i	c	P	r	o	g
W	A	V	E	V	o	l	R	e	c	r	u	i	t	m	e	n	t		

☒ Other:

H	o	s	t		2		C	W	P		W	e	b	c	a	s	t	s	
---	---	---	---	--	---	--	---	---	---	--	---	---	---	---	---	---	---	---	--

☒ Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

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.

From SWMPv4 document (May, 2016): BMP 1-1 Target Audience Analysis Wksheet - support MS4 efforts to update their TAAW; id target audience, draft & implement goals; BMP 1-3 Website-post routine Coalition events, update text of Home Page. BMP 1-7 List Serve - update contacts (newly elected, Plan'g Bd, MS4 staff, consultants, webcast audience). BMP 1-6 Public Program-Guest Spker-present Clean Water Act Basics & Green Infrastructure Program to MS4 Electeds/Plan'g Bd.

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

BMP 1-1 Target Audience Analysis Worksheet (TAAW): not completed. BMP 1-3 Website: completed. BMP 1-7 List Serve: partially completed; drop/adds and updated emails provided by Coalition members; not entered into ACCESS database. BMP 1-6 Public Program-Guest Speaker: completed-1 CWA Presentation; not completed-Green Infrastructure Program to MS4 Electeds; no time to develop program and staff person organizing program left MS4.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

SWMPv5 (April, 2017) BMP 1-3 Website: continue to maintain Coalition website (post mandated documents; post educational material; post meeting announcements; pay invoice). BMP 1-7 List Serve: update ACCESS database; BMP 1-4 Publications: update door hanger publication; BMP 1-14 Public Programs-Organized By Coalition-host 1 CWP webcast.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?	1	2
---	---	---

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

- | | | | | | | |
|--|---|-----------|-------|---|---------|---|
| ☐ Cleanup Events | # Events | | | | | |
| ☒ Comments on SWMP Received | # Comments | | | | | 0 |
| ☒ Community Hotlines | Phone # | (5 1 8) | 4 4 7 | - | 5 6 4 5 | |
| Phone # | () | | | - | | |
| Phone # | () | | | - | | |
| Phone # | () | | | - | | |
| Phone # | () | | | - | | |
| Phone # | () | | | - | | |
| ☐ Community Meetings | # Attendees | | | | | |
| ☐ Plantings | Sq. Ft. | | | | | |
| ☐ Storm Drain Markings | # Drains | | | | | |
| ☐ Stakeholder Meetings | # Attendees | | | | | |
| ☒ Volunteer Monitoring | # Events | | | | | 7 |
| ☒ Other: | C o a l i t i o n C o m m e n t s - D R A F T M S 4 P m t | | | | | |

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

- | | | | | | | |
|---|------------|--|--|---|---|---|
| ☒ List-Serve | # In List | | | 1 | 9 | 1 |
| ☐ Newspaper Advertising | # Days Run | | | | | |
| ☐ TV/Radio Notices | # Days Run | | | | | |
| ☐ Other: | | | | | | |

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

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																													
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

w	w	w	.	s	t	o	r	m	w	a	t	e	r	a	l	b	a	n	y	c	o	u	n	t	y	.	o	r	g		

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition

SPDES ID

N Y R 2 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

S t o r m w a t e r C o a l i t i o n - A l b a n y C n t y

Address

1 7 5 G r e e n S t r e e t - C n t y H e a l t h B l d g

City

A l b a n y

N Y

Zip

1 2 2 0 2 -

Phone

(5 1 8) 4 4 7 - 5 6 4 5

☐ Library

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

City

Zip

-

Phone

() -

☐ Other

☐ Annual Report

☐ SWMP Plan

☐ Comments

Address

City

Zip

-

Phone

() -

☒ Web Page URL:

☒ Annual Report

☒ SWMP Plan

☒ Comments

w w w . s t o r m w a t e r a l b a n y c o u n t y . o r g

Please provide specific address of page where report can be accessed - not home page.

☒ eMail

☒ Comments

s w c o a l i t i o n @ a l b a n y c o u n t y . c o m

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5
---	---

 /

0	5
---	---

 /

2	0	1	7
---	---	---	---

4.b. For how many days was/will this report be posted?

	1	4
--	---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

☐ Yes ☐ No

If Yes, what was the date of the meeting?

--	--

 /

--	--

 /

--	--	--	--

If No, is one planned?

☐ Yes ☐ No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

6. Were comments received during this reporting period?

☐ Yes ☒ No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

From SWMPv4 document (May, 2016): BMP 2-2 Annual Report-combine Joint SWMP document update (BMPs/Goals) with prep of Annual Report, meet w/all members, post AR & SWMP on website. BMP 2-8 Student Water Quality Projects-coordinate with U Albany mapping projects named in WQIP Rnd 12 grant workplan, secure professor/student support, start projects, \$/credits. BMP 2-11 WAVE-monitor 4 sites w/volunteers.

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

BMP 2-2 Annual Report: completed. BMP 2-8 Student Water Quality Projects: partially completed; contract between UAlbany and County-Coalition completed; recruitment flyer for professors and students 85% completed. BMP 2-11 WAVE-8 sites monitored.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

SWMPv5 (April, 2017) BMP 2-2 Annual Report: Coalition staff prepare for and guide possible transition to "new" MS4 Permit likely to include changes in Annual Report format and annual program evaluation process-no particular goals named in SWMP document. BMP 2-11 WAVE-monitor 4 sites with volunteers.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2017

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

Name of MS4/Coalition	Stormwater Coalition of Albany County
-----------------------	---------------------------------------

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

3.b. What types of illicit discharges have been found during this reporting period?

- | | |
|--|--|
| ☐ Broken Lines From Sanitary Sewer | ☐ Industrial Connections |
| ☐ Cross Connections | ☐ Inflow/Infiltration |
| ☐ Failing Septic Systems | ☐ Pump Station Failure |
| ☐ Floor Drains Connected To Storm Sewers | ☐ Sanitary Sewer Overflows |
| ☐ Illegal Dumping | ☐ Straight Pipe Sewer Discharges |
| ☐ Other: | ☐ None |

[illegible]

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

--	--	--

5. How many illicit discharges have been confirmed during this reporting period?

--	--	--

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

--	--

--	--	--	--

7. Has the storm sewershed mapping been completed in this reporting period? ☐ Yes ☐ No
If No, approximately what percent was completed in this reporting period? %

--	--	--	--

8. Is the above information available in GIS?

☒ Yes ☐ No

Is this information available on the web?

☒ Yes ☐ No

If Yes, provide URL(s):

Please provide specific address of page where map(s) can be accessed - not home page.

URL

[illegible]

URL

[illegible]

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): BMP 3-2 Coalition Stormwater Program Mapper - support mapper redesign as guided by consultant, organize 2 to 3 design wkshops for members, integrate mapper redesign with other MS4 program needs (grant funded mobile app field inspection forms for ORI, MS4 construction site inspections, post construction sw practices inspections, facility self audits), prep mapper layers, launch mapper. BMP 3-5 Dry Weather (ORI)-manage ORI kits, restock.

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

BMP 3-2 Coalition Stormwater Program Mapper: completed; re-design includes "Form" considerations; one design workshop, not 3; more complex redesign to include "Forms" pending development of RFP for consultant services. BMP 3-5 Dry Weather (ORI) -completed; kits re-stocked.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ 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).

SWMPv5 (April, 2017) BMP 3-4 Storm Sys-CSO-Sewershed Map'g/BMP 5-8 Inventory Post Const SMPs/BMP 6-1 Inventory MuniFac: continue to implement mapping goals detailed in SWMPv5 (see MCM3, MCM 5, and MCM6); continue to implement objectives and tasks listed in the NYSDEC grant contract C00081GG work plan. See respective documents for details (SWMPv5 and grant work plan). Both explain what is being mapped where, when, and how for all Coalition members.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0					
---	---	---	---	---	--	--	--	--	--

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.

From SWMPv4 document (May, 2016): BMP 4-5 Construction Site Enf & Inspection Procedures-review paper MS4 Construction Inspection Form for conversion to mobile device. BMP 7-7 Procedures & Forms Compendium-develop Coalition wide strategy for using MS4 Oversight/Construction Permit Guidance Document, discuss training in purpose/use for MS4s/consultants, incorporate into existing/future procedures (3 MS4s); note edits for future updates.

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

BMP 4-5 Construction Site Enf & Inspection Procedures: not completed; DRAFT MS4 Permit points to mandated MS4 Construction Inspection Forms, need to know status of DEC forms before proceeding further.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

SWMPv5 (April, 2017): BMP 4-7 Construction Site Operator Training-4hr: co-host one 4 hr training with ACSWCD.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): BMP 5-5 SWPPP Review Procedures - for Coalition Stormwater Program Mapper update/load map layers named in Construction Activity Permit/ NYSDEC SW Mgmt Design Manual. BMP 5-8 Inventory Post Construction Practices - with grant funding implement work plan to map MS4 post construction practices. BMP 5-9 Post Construction Practices-Maintenance - with grant funding develop inspection forms for use with mobile devices

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

.BMP 5-5 SWPPP Review Procedures: partially completed, pre-existing layers uploaded, additional layers more difficult to obtain. BMP 5-8 Inventory Post Construction Practices: mapping of post-construction practices implemented as detailed in grant work plan. MP 5-9 Post Construction Practices: not completed.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☐ 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).

From SWMPv5 document (April, 2017): BMP 5-8 Inventory Post Construction Practices - continue to map post construction practices as detailed in grant work plan and various SWMPv5 goals. BMP 5-9 Post Construction Practices-Maintenance: complete RFP for consultant services to develop GIS friendly post-construction stormwater management practice (PC SMPs) inspection forms (mobile devices).

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

2. Provide the following information about municipal operations good housekeeping programs:

- ☐ Parking Lots Swept (Number of acres X Number of times swept) # Acres

--	--	--	--	--
- ☐ Streets Swept (Number of miles X Number of times swept) # Miles

--	--	--	--	--
- ☐ Catch Basins Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

--	--	--	--	--
- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- ☐ Pesticide/Herbicide Applied # Acres

					.	
--	--	--	--	--	---	--

 (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?

				4
--	--	--	--	---

4. What was the date of the last training?

0	9	/	2	2	/	2	0	1	6
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	4	9
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

1	0	0	%
---	---	---	---

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): MCM 8 Train'g BMP 8-1 Clean Water Act Basics-Coalition program to 2 MS4 govern'g boards; 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards-1 MS4 Plan'g Board; BMP 8-4/8-5/8-6 replace as needed EXCAL visual DVDs (Spills & Skills, Rain Check, IDDE-A Grate Concern)/circulate to MS4s; BMP 8-17 On-line Training-assist Albany County SW Prog Tech.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

			0
--	--	--	---

(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).

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County																			
---------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	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.

From SWMPv4 document (May, 2016): MCM 8 Train'g BMP 8-1 Clean Water Act Basics-Coalition program to 2 MS4 govern'g boards; 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards-1 MS4 Plan'g Board; BMP 8-4/8-5/8-6 replace as needed EXCAL visual DVDs (Spills & Skills, Rain Check, IDDE-A Grate Concern)/circulate to MS4s; BMP 8-17 On-line Training-assist Albany County SW Prog Tech.

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

MCM 8 Train'g BMP 8-1 Clean Water Act Basics: partially completed-1 program. 8-2 Green Infrastructure, BSD, LID, Site Design Elements for Muni/Plan'g/Zon'g Boards: not completed. BMP 8-4/8-5/8-6 EXCAL visual DVDs: completed; maintained and circulated. BMP 8-17 On-line Training: not completed.

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

			0
--	--	--	---

(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).

SWMPv5 (April, 2017). BMP 6-1 Inventory - Municipal Facility: complete municipal facility mapping as detailed in MCM 3 Page 4 of 4 F.

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

Additional Watershed Improvement Strategy Best Management Practices

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	2
---	---

MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	-	-	-
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	-	-	-
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	-	-	-
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay	-	-	-
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary	-	-	-
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	-	-	-
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments	-	-	-
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?

☐ Yes ☐ No ☒ N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?

☐ Yes ☐ No ☒ N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

--	--	--

 %

Estimate what percentage was mapped in this reporting period.

--	--	--

 %

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? ☐ Yes ☐ No ☒ N/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? ☐ Yes ☐ No ☒ N/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 Standards? ☐ Yes ☐ No ☒ N/A
- 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? ☐ Yes ☐ No ☒ N/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? ☐ Yes ☐ No ☒ N/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? ☐ Yes ☐ No ☒ N/A

MS4 Annual Report Form

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

2	0	1	7
---	---	---	---

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

Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
---	---	---	---	---	--	--	--	--

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

12. Does your MS4/Coalition have a program to manage goose populations?

☐ Yes ☐ No ☒ N/A