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**MS4 Annual Report Cover Page****MCC form for period ending March 9,**

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

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## MCC form for period ending March 9,

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## Important Instructions - Please Read

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).

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

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

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

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**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

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

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Name of MS4 

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**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

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

☐ Yes      ☒ No

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

If No, proceed to Section 4 - Certification Statement.

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SPDES Partner ID - If applicable

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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)?

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### 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 2 0

Name of MS4 Village of Colonie

SPDES ID

N Y R 2 0 A 0 7 6

**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

E d w a r d

MI

F

Last Name

S i m

Title (Clearly print title of individual signing report)

M a y o r

Signature



Date

0 5 / 1 1 / 2 0 2 0

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



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

Village of Colonie

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| How many MS4s are contributed to this report? |  |  |
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☐ Yes    ☒ No

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

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### **Minimum Control Measure 1. Public Education and Outreach**

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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**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

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☒ Direct Mailings

# Mailings

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☒ Kiosks or Other Displays

# Locations

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☐ List-Serves

# In List

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☒ Mailing List

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☐ Newspaper Ads or Articles

# Days Run

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☐ Public Events/Presentations

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☐ School Program

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☐ TV Spot/Program

# Days Run

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☒ Printed Materials:

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

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☒ Other:

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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## MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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### 4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

The SMO will place an ad in the Villager Newsletter. Utility bill mailings will include educational inserts. Pamphlets will be posted on bulletin boards, and stocked at informational kiosks. A revised MS4 Organizational flow chart will be posted to the Village's Stormwater website. The Village will post the Draft Annual Report to the Villages website, The Annual Report will be presented at to the Village Board, and opened for comments.

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

An ad was placed in the Villager Newsletter informing the public of the Village's storm water website (1), Utility bill mailings included educational materials (3100). Five locations were stocked with printed materials (5) with 61 items distributed (61). A revised organizational chart was posted to the Village's Webpage(1). The Draft report was posted to the Villages website(1), the Annual report was presented to the Village board (1), no public comments were received (1)

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

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*(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 SMO will place an ad in the Villager Newsletter. Utility bill mailings will include educational inserts. Pamphlets will be posted on bulletin boards, and stocked at informational kiosks. A revised MS4 Organizational flow chart will be posted to the Village's Stormwater website. The Village will post the Draft Annual Report to the Villages website, The Annual Report will be presented at to the Village Board, and opened for comments.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Colonie

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**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? 

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**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

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☒ Comments on SWMP Received

# Comments

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☒ Community Hotlines

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☒ Community Meetings

# Attendees

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☐ Plantings

Sq. Ft.

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☐ Storm Drain Markings

# Drains

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☐ Stakeholder Meetings

# Attendees

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☐ Volunteer Monitoring

# Events

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☒ Other:

P e t W a s t e P i c k u p P r o g r a m

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

☒ Yes ☐ No

☐ List-Serve

# In List

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☐ Newspaper Advertising

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☐ TV/Radio Notices

# Days Run

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☒ Other:

K I O S K S A N D B U L L E T I N B O A R D S

☒ 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,**

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Name of MS4/Coalition 

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

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

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

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

☒ MS4/Coalition Office

☒ Annual Report   ☐ SWMP Plan   ☐ Comments

Department

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☐ Library

☐ Annual Report   ☐ SWMP Plan   ☐ Comments

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☐ Other

☐ Annual Report   ☐ SWMP Plan   ☐ Comments

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☒ Web Page URL:

☒ Annual Report   ☒ SWMP Plan   ☐ Comments

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

☒ eMail

☒ Comments

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

|                    |
|--------------------|
| Village of Colonie |
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SPDES ID

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**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.

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

|   |   |   |
|---|---|---|
| 3 | 6 | 5 |
|---|---|---|

If submitting a report for single MS4, answer 5.a.. If submitting a 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?

|   |   |   |   |   |   |   |   |   |   |
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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, 

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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**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.**

The SMO will review and update the Annual Reort MCC Pages as necessary. The draft of the Annual Report will be prepared, posted and presented to the Village Board.

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

The draft report was posted (1), presented to the Village board (1), no public comments were received(1), no other stormwater complaints received (1), 540 pet waste bags removed (540), 75 Roadside bags picked up (75)

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

|  |   |   |   |
|--|---|---|---|
|  | 6 | 1 | 9 |
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(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 SMO will review and update the annual report MCC pages. The draft of the annual report will be prepared and posted to the Village website prior to 5/1/2020.  
By 5/20/2020, the draft annual report will be presented to the Village Board of Trustees and opened for public comment.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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**Minimum Control Measure 3. Illicit Discharge Detection and Elimination**

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report? 

|  |  |  |
|--|--|--|
|  |  |  |
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1. Enter the number and approx. percent of outfalls mapped: 

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

|  |   |   |
|--|---|---|
|  | 2 | 7 |
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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 Plateing 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

|   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |   |   |   |   |  |
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☐ Sewersheds:

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

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- ☐ 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]

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☒ Yes      ☐ No  
☐ Yes      ☒ No

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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**12. Evaluating Progress Toward Measurable Goals MCM 3**

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

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

The Village DPW will perform ORI reporting for the additional twenty seven (27) mapped outfalls which resulted from the Albany Stormwater Coalition's efforts to complete storm system mapping.

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

The Village DPW completed inspections for the 27 additional mapped outfalls. (27)

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

|  |  |   |   |
|--|--|---|---|
|  |  | 2 | 7 |
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(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 Village DPW will continue to perform outfall inspections on a 5 year rotating basis.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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**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? 

|  |  |  |
|--|--|--|
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**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?**

|  |  |   |
|--|--|---|
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**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?

|  |  |  |
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**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:**

|                                                        |   |  |  |  |   |   |                                    |
|--------------------------------------------------------|---|--|--|--|---|---|------------------------------------|
| <input checked="" type="radio"/> Notices of Violation  | # |  |  |  | 1 | 0 | <input type="radio"/> No Authority |
| <input type="radio"/> Stop Work Orders                 | # |  |  |  |   |   | <input type="radio"/> No Authority |
| <input type="radio"/> Criminal Actions                 | # |  |  |  |   |   | <input type="radio"/> No Authority |
| <input type="radio"/> Termination of Contracts         | # |  |  |  |   |   | <input type="radio"/> No Authority |
| <input type="radio"/> Administrative Fines             | # |  |  |  |   |   | <input type="radio"/> No Authority |
| <input type="radio"/> Civil Penalties                  | # |  |  |  |   |   | <input type="radio"/> No Authority |
| <input type="radio"/> Administrative Orders            | # |  |  |  |   |   | <input type="radio"/> No Authority |
| <input type="radio"/> Enforcement Actions or Sanctions | # |  |  |  |   |   |                                    |
| <input type="radio"/> Other                            | # |  |  |  |   |   | <input type="radio"/> No Authority |

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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**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? 

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

|  |  |   |
|--|--|---|
|  |  | 1 |
|--|--|---|

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

|  |  |   |
|--|--|---|
|  |  | 1 |
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3. What percent of active construction sites were inspected during this reporting period? ☐ NT 

|   |   |   |
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| 1 | 0 | 0 |
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 %

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

|   |   |   |
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 %

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,**

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

Name of MS4/Coalition 

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**6. con't.:**

Submit additional pages as needed.

**● MS4/Coalition Office**

Department

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Address

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City

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Zip

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**○ Library**

Address

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**○ Web Page URL(s):** Please provide specific address where SWPPP's can be accessed - not home page.

URL

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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**7. Evaluating Progress Toward Measurable Goals MCM 4**

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

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

The SMO with the assistance of the Village Designated Engineer (VDE) will hold pre-construction meetings with the Operator/Contractors/SWPPP Inspectors for construction sites with pending earth disturbing activities. The SMO will obtain copies of the Trained Contractor certification cards at the pre-construction meetings. VDE will at the direction of the SMO perform SWPPP inspections. Select Village staff will obtain NYSDEC 4-hr. E&SC Certifications.

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

The Village had no new construction projects which required a pre-construction meeting, therefore no pre-construction meetings were held (1), No new Contractor certification cards were required (1), SWPPP Inspections were performed monthly (12)

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

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(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 SMO with the assistance of the Village Designated Engineer (VDE) will hold pre-construction meetings with the Operator/Contractors/SWPPP Inspectors for construction sites with pending earth disturbing activities. The SMO will obtain copies of the Trained Contractor certification cards at the pre-construction meetings. VDE will at the direction of the SMO perform SWPPP inspections. Select Village staff will obtain NYSDEC 4-hr. E&SC Certifications.

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

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| How many MS4s contributed to this report? |  |
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| #<br>Inventoried | #<br>Inspections | # Times<br>Maintained |
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- ☒ Yes      ☐ No

● Other:

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## MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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**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?**

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**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?**

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## MS4 Annual Report Form

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

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Name of MS4/Coalition

Village of Colonie

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### 6. Evaluating Progress Toward Measurable Goals MCM 5

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

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

The SWMFs will be inspected for operation and maintenance and the results indicated in the facility tracking worksheet. Notices will be sent to owners with the results of findings indicating the need for corrective actions, if any.

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

Stormwater management facilities were inspected for operation and maintenance, and notification provided to owners indicating the results of the inspection (30). SWMF tracking sheet was updated (1). Owners whose facilities received an unsatisfactory report were notified of the need for corrective actions (8). The number of first time satisfactory inspections was 22 (22) indicating facility Owners are responsive to Village Oversight efforts.

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

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*(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 SWMFs will be inspected for operation and maintenance and the results indicated in the facility tracking worksheet. Notices will be sent to owners with the results of findings indicating the need for corrective actions, if any.

## MS4 Annual Report Form

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

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Name of MS4/Coalition

Village of Colone

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### 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? 

|  |  |  |
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- 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<br/>Operation/Activity/Facility<br/>performed within the past 3<br/>years?</u> |
|---------------------------------------------------|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| Street Maintenance.....                           | <input checked="" type="radio"/> Yes <input type="radio"/> No ..... | <input checked="" type="radio"/> Yes <input type="radio"/> No                                     |
| Bridge Maintenance.....                           | <input type="radio"/> Yes <input type="radio"/> No .....            | <input type="radio"/> Yes <input type="radio"/> No                                                |
| Winter Road Maintenance.....                      | <input checked="" type="radio"/> Yes <input type="radio"/> No ..... | <input checked="" type="radio"/> Yes <input type="radio"/> No                                     |
| Salt Storage.....                                 | <input checked="" type="radio"/> Yes <input type="radio"/> No ..... | <input checked="" type="radio"/> Yes <input type="radio"/> No                                     |
| Solid Waste Management.....                       | <input checked="" type="radio"/> Yes <input type="radio"/> No ..... | <input checked="" type="radio"/> Yes <input type="radio"/> No                                     |
| New Municipal Construction and Land Disturbance.. | <input type="radio"/> Yes <input type="radio"/> No .....            | <input type="radio"/> Yes <input type="radio"/> No                                                |
| Right of Way Maintenance.....                     | <input type="radio"/> Yes <input type="radio"/> No .....            | <input type="radio"/> Yes <input type="radio"/> No                                                |
| Marine Operations.....                            | <input type="radio"/> Yes <input type="radio"/> No .....            | <input type="radio"/> Yes <input type="radio"/> No                                                |
| Hydrologic Habitat Modification.....              | <input type="radio"/> Yes <input type="radio"/> No .....            | <input type="radio"/> Yes <input type="radio"/> No                                                |
| Parks and Open Space.....                         | <input checked="" type="radio"/> Yes <input type="radio"/> No ..... | <input checked="" type="radio"/> Yes <input type="radio"/> No                                     |
| Municipal Building.....                           | <input checked="" type="radio"/> Yes <input type="radio"/> No ..... | <input checked="" type="radio"/> Yes <input type="radio"/> No                                     |
| Stormwater System Maintenance.....                | <input checked="" type="radio"/> Yes <input type="radio"/> No ..... | <input checked="" type="radio"/> Yes <input type="radio"/> No                                     |
| Vehicle and Fleet Maintenance.....                | <input checked="" type="radio"/> Yes <input type="radio"/> No ..... | <input checked="" type="radio"/> Yes <input type="radio"/> No                                     |
| Other.....                                        | <input type="radio"/> Yes <input type="radio"/> No .....            | <input type="radio"/> Yes <input type="radio"/> No                                                |



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

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

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

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

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- ☒ Catch Basins Inspected and Cleaned Where Necessary # 

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

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- ☐ Phosphorus Applied In Chemical Fertilizer # Lbs. 

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- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs. 

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- ☐ Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

|  |  |  |  |  |   |  |
|--|--|--|--|--|---|--|
|  |  |  |  |  | . |  |
|--|--|--|--|--|---|--|

**3. How many stormwater management trainings have been provided to municipal employees during this reporting period?**

|  |  |  |  |   |
|--|--|--|--|---|
|  |  |  |  | 3 |
|--|--|--|--|---|

**4. What was the date of the last training?**

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 1 | / | 1 | 3 | / | 2 | 0 | 1 | 9 |
|---|---|---|---|---|---|---|---|---|---|

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

|  |   |   |
|--|---|---|
|  | 2 | 1 |
|--|---|---|

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

|  |   |   |   |
|--|---|---|---|
|  | 8 | 1 | % |
|--|---|---|---|

**MS4 Annual Report Form**

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

|   |   |   |   |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

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

Name of MS4/Coalition

Village of Colone

SPDES ID

|   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 7 | 6 |
|---|---|---|---|---|---|---|---|---|

**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.**

A self-assessment of Municipal operations will be conducted. DPW will clean catch basins and sweep streets of accumulated sediment, logging quantities collected. The SMO will offer a showing of stormwater related videos dealing with the duties of the MS4 community or related videos to the Municipal Officials. Standard operating procedures for routine Municipal operations that could impact stormwater quality providing best management practice procedures will be finalized.

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

A self-assessment of Municipal operations was conducted (1), DPW cleaned catch basins, removing 45 CY of sediment (45), Standard Operation Procedures have been finalized (1), Staff training was completed 3 times, for a total number of 55 trainings (55)

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

|  |   |   |   |
|--|---|---|---|
|  | 1 | 0 | 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).**

DPW will clean catch basins and sweep streets of accumulated sediment, logging quantities collected. The SMO will offer a showing of stormwater related videos dealing with the duties of the MS4 community or related videos to the Municipal Officials.

## MS4 Annual Report Form

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|   |   |   |   |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

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Name of MS4/Coalition

Village of Colonie

SPDES ID

|   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 7 | 6 |
|---|---|---|---|---|---|---|---|---|

### 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? 

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

**MS4s must answer the questions or check NA as indicated in the table below.**

| MS4 Description                 | Answer                   | Check NA               | (POC)                  |
|---------------------------------|--------------------------|------------------------|------------------------|
| <b>NYC EOH Watershed</b>        | -                        | -                      | -                      |
| 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             |
| <b>Onondaga Lake Watershed</b>  | -                        | -                      | -                      |
| 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             |
| <b>Greenwood Lake Watershed</b> | -                        | -                      | -                      |
| 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             |
| <b>Oyster Bay</b>               | -                        | -                      | -                      |
| 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              |
| <b>Peconic Estuary</b>          | -                        | -                      | -                      |
| 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 |
| <b>Oscawana Lake Watershed</b>  | -                        | -                      | -                      |
| 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             |
| <b>LI 27 Embayments</b>         | -                        | -                      | -                      |
| 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

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|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

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

Name of MS4/Coalition

Village of Colonie

SPDES ID

|   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 7 | 6 |
|---|---|---|---|---|---|---|---|---|

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? 

|  |  |   |
|--|--|---|
|  |  | 0 |
|--|--|---|

 %

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? 

|  |  |   |
|--|--|---|
|  |  | 0 |
|--|--|---|

7c. What percent of the projects included in 7b have been completed in this reporting period? 

|  |  |   |
|--|--|---|
|  |  | 0 |
|--|--|---|

 %

7d. What percent of projects planned in previous years have been completed? 

|  |  |   |
|--|--|---|
|  |  | 0 |
|--|--|---|

 %

☐ 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**

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|   |   |   |   |
|---|---|---|---|
| 2 | 0 | 2 | 0 |
|---|---|---|---|

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Name of MS4/Coalition

Village of Colonie

SPDES ID

|   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 0 | 7 | 6 |
|---|---|---|---|---|---|---|---|---|

**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