

MS4MunicipalComplianceCertification(MCC)Form

MCCformforperiodendingMarch9,

2014

NameofMS4

Town of Yorktown

SPDESID

NYR20A007

Section2-ContactInformation

ImportantInstructions-PleaseRead

Contactinformationmustbeprovidedfor**each**ofthefollowingpositionsasindicatedbelow:

1. PrincipalExecutiveOfficer,ChiefElectedOfficialorotherqualifiedindividual(per GP-0-08-002PartVI.J).
2. DulyAuthorizedRepresentative(InformationforthiscontactmustonlybesubmittedifaDuly AuthorizedRepresentativeissigningthisform)
3. TheLocalStormwaterPublicContact(requiredperGP-0-08-002PartVII.A.2.c&PartVIII.A.2.c).
4. TheStormwaterManagementProgram(SWMP)Coordinator(Individualresponsiblefor coordination/implementationofSWMP).
5. ReportPreparer(Consultantsmayprovidecompanynameinthespaceprovided).

Aseparatesheetmustbesubmittedforeachpositionlistedaboveunlessmorethanonepositionis filledbythesameindividual.Ifoneindividualfillsmultipleroles,providethecontactinformation onceandcheckallpositionsthatapplytothatindividual.

IfanewDulyAuthorizedRepresentativeissigningthisreport,theircontactinformationmustbe providedandasignatureauthorizationform,signedbythePrincipalExecutiveOfficerorChief ElectedOfficialmustbeattached.

Foreachcontact,selectallthatapply:

- PrincipalExecutiveOfficer/ChiefElectedOfficial
- DulyAuthorizedRepresentative
- LocalStormwaterPublicContact
- StormwaterManagementProgram(SWMP)Coordinator
- ReportPreparer

FirstName

Michael

MI

LastName

Grace

Title

Supervisor

Address

363 Underhill Avenue

City

Yorktown Heights

State

NY

Zip

10598

eMail

supervisor@townofyorktownny.org

Phone

(914) 962 - 5722

County

Westchester

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3. TheLocalStormwaterPublicContact(requiredperGP-0-08-002PartVII.A.2.c&PartVIII.A.2.c).
4. TheStormwaterManagementProgram(SWMP)Coordinator(Individualresponsiblefor coordination/implementationofSWMP).
5. ReportPreparer(Consultantsmayprovidecompanynamethespaceprovided).

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IfanewDulyAuthorizedRepresentativeissigningthisreport,theircontactinformationmustbe providedandasignatureauthorizationform,signedbythePrincipalExecutiveOfficerorChief ElectedOfficialmustbeattached.

Foreachcontact,selectallthatapply:

- PrincipalExecutiveOfficer/ChiefElectedOfficial
- DulyAuthorizedRepresentative
- LocalStormwaterPublicContact
- StormwaterManagementProgram(SWMP)Coordinator
- ReportPreparer

FirstName

Bruce

MI

LastName

Barber

Title

Stprmwater Management Consultant, Cornerstone Associates

Address

1770 Central Street

City

Yorktown Heights

State

NY

Zip

10598 -

eMail

barberbruce@yahoo.com

Phone

(914) 299 - 5293

County

Westchester

MS4MunicipalComplianceCertification(MCC)Form

MCCformforperiodendingMarch9,

2014

NameofMS4

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Section3-PartnerInformation

DidyourMS4workwithpartners/coalitionto completesomeorallpermitrequirementsduringthisreporting period? Yes No

IfYes,completeinformationbelow.

Submitaseparatesheetforeachpartner.Informationprovidedinothertoolswillnotbe accepted.IfyourMS4cooperatedwithacoalition,submitonesheetwiththenameofthe coalition.ItisnotnecessarytoincludeaseparatesheetforeachMS4inthecoalition.

IfNo,proceedtoSection4-CertificationStatement.

Partner/CoalitionName

Partner/CoalitionName(con't.) SPDESPartnerID-Ifapplicable

Address

City State Zip

eMail

Phone

LegallyBindingAgreementinaccordance withGP-0-08-002PartIV.G.? Yes No

Whattasks/responsibilitiesaresharedwiththispartner(e.g.MM1SchoolProgramsorMultipleTasks)?

- MM1
- MM2
- MM3
- MM4
- MM5
- MM6

Additionaltasks/responsibilities

WatershedImprovementStrategyBestManagementPracticesrequiredforMS4sinimpaired watershedsincludedinGP-0-08-002PartIX.

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2014

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NameofMS4

Town of Yorktown

Section4-CertificationStatement

"Icertifyunderpenaltyoflawthatthisdocumentandallattachmentswerepreparedundermy directionorsupervisioninaccordancewithasystemdesignedtoassurethatqualifiedpersonnel properlygatheredandevaluatedtheinformationsubmitted.Basedonmyinquiryofthepersonor personswhomanagethesystem,orthosepersonsdirectlyresponsibleforgatheringtheinformation, theinformationsubmittedis,thebestofmyknowledgeandbelief,true,accurate,andcomplete.Iam awarethattherearesignificantpenaltiesforsubmittingfalseinformation,includingthepossibilityof fineandimprisonmentforknowingviolations."

Thisformmustbesignedbyeitheraprincipalexecutiveofficerorrankingelectedofficial,orduly authorizedrepresentativeofthatpersonasdescribedinGP-0-08-002PartVI.J.

FirstName

Michael

MI

LastName

Grace

Title (Clearlyprinttitleofindividualsigningreport)

Supervisor

Signature

[Signature box]

Date

/ /

SendcompletedformandanyattachmentstotheDECCentralOfficeat:

MS4PermitCoordinator
DivisionofWater
4thFloor
625Broadway
Albany,NewYork12233-3505

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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

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

Other

MS4AnnualReportForm

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

2014		
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Name of MS4/Coalition

SPDES ID

NYR20A007				
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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

19			
----	--	--	--
- Direct Mailings #Mailings

1			
---	--	--	--
- Kiosks or Other Displays #Locations

2			
---	--	--	--
- List-Serves #InList

--	--	--	--
- Mailing List #InList

14200			
-------	--	--	--
- Newspaper Ads or Articles #DaysRun

--	--	--	--
- Public Events/Presentations #Attendees

275			
-----	--	--	--
- School Program #Attendees

--	--	--	--
- TV Spot/Program #DaysRun

180			
-----	--	--	--
- Printed Materials: Total # Distributed

559			
-----	--	--	--

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

Town Hall																				
Library																				

Other:

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

Web Page: Provides specific web addresses - no homepage. Continue on next page if additional space is needed.

URL

www.yorktownny.org/engineeringan																				
dsewer/town-yorktown-stormwater-																				
initiative																				

URL

www.yorktownny.org/engineeringan																				
dsewer/stormwater-reports																				

MS4 Annual Report Form

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2014

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Name of MS4/Coalition

Town of Yorktown

SPDES ID

NYR20A007

4. Evaluating Progress Toward Measurable Goals MCM1

Use this page to report on your progress and project plan 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.

The Town of Yorktown focuses on the educational component and targets phosphorus reduction, fertilizer use, pet waste, septic system maintenance, vehicle washing and more through the distribution of pamphlets, brochures and posters located at Town Hall and the Library. In addition to information provided by the two kiosks, the Town of Yorktown maintains records on how many individuals are educated by Town personnel.

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

The Town distributed 559 pieces of literature from the two kiosks, ran a stormwater program on TV for 180 days. In addition, the town sent out one mailing related to stormwater to 14, 200 people and trained 19 construction site operators.

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 deadlines 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).**

The Town will continue to update and monitor the stormwater website providing up to date materials. In addition, brochures and posters will be replenished at kiosk locations and will be provided to Town departments. Town employees will meet with various contractors and property owners to present information relating to stormwater. Continue biweekly meetings of the Environmental Panel/Stormwater Panel and Conservation Board meetings.

MS4 Annual Report Form

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Name of MS4/Coalition

SPDES ID

2. URL(s) con't.:

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

URL

URL

URL

URL

URL

URL

URL

MS4AnnualReportForm

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

2014

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Name of MS4/Coalition

SPDES ID

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

Address

City Zip

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

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

eMail Comments

MS4AnnualReportForm

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

2	0	1	4		
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If submitting this form as part of a joint report on behalf of a coalition leave SPDESID blank.

Name of MS4/Coalition

SPDESID

N	Y	R	2	0	A	0	0	7					
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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.

0	5	/	3	0	/	2	0	1	4
---	---	---	---	---	---	---	---	---	---

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?

0	5	/	2	7	/	2	0	1	4
---	---	---	---	---	---	---	---	---	---

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	4
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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

Town of Yorktown

SPDES ID

N	Y	R	2	0	A	0	0	7				
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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.

To conduct monthly environmental panel meetings, provide public notice of Town Board meetings for key events and upcoming stormwater related agendas To provide public notice for all other Town of Yorktown stormwater related events/meetings; provide full access to the public for review of stormwater related materials. Continue to conduct open meetings of the stormwater committee.

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

Public presentation of the annual report was conducted. 22 environmental panel/stormwater committee meetings were held. 13,000 flyers about the Battle of Yorktown clean-up event was sent out; 16.65 tons of garbage was collected and 4 car tires; 585 volunteers.

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

2			
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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 Town will hold a public meeting to present the Annual Report as well as monthly environmental panel/stormwater committee and stormwater committee meetings and participate in CKWIC and East of Hudson meetings. The Town will post notices at Town Hall and the website as well as other available media to inform the public about events. Continue to distribute Battle of Yorktown flyers and hold public events.

MS4AnnualReportForm

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NYR20A007

12. Evaluating Progress Toward Measurable Goals MCM3

Use this page to report on your progress and project plan 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.

To maintain a hotline for IDDE, report screenings and eliminate all identified illicit discharges. To conduct dry weather inspections using the NYSDEC outfall reconnaissance inventory method. To participate with Westchester County septic system maintenance and inspection program. Provide stormwater training to municipal employees and other interested parties.

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

125 outfalls have been inspected in accordance with the NYSDEC outfall reconnaissance inventory method. All 4 of the detected illicit discharges were eliminated. A training was conducted for all municipal employees in stormwater related positions.

Oil spill has been controlled and the Town is waiting for the NYSDEC spill closure letter.

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 deadlines 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).**

To conduct dry weather screenings of 20% of outfalls. Continue to provide a hotline for IDDE and screen for illicit discharges. Eliminate all detected illicit discharges. Provide training to all municipal employees.

MS4 Annual Report Form

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2	0	1	4
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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

Town of Yorktown

SPDES ID

NYR20A007							
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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?

--	--	--

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?

4	4	
---	---	--

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 #

3				
---	--	--	--	--

 No Authority
- Stop Work Orders #

3				
---	--	--	--	--

 No Authority
- Criminal Actions #

--	--	--	--	--

 No Authority
- Termination of Contracts #

--	--	--	--	--

 No Authority
- Administrative Fines #

--	--	--	--	--

 No Authority
- Civil Penalties #

--	--	--	--	--

 No Authority
- Administrative Orders #

--	--	--	--	--

 No Authority
- Enforcement Actions or Sanctions #

--	--	--	--	--

 No Authority
- Other #

--	--	--	--	--

 No Authority

MS4 Annual Report Form

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2	0	1	4
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Name of MS4/Coalition

Town of Yorktown

SPDES ID

NYR20A007							
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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?

--	--	--

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?

5		
---	--	--

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

100	
-----	--

 %

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

100	
-----	--

 %

 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

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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

SPDES ID

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

Address

City

Zip

Phone

() -

Library

Address

City

Zip

Phone

() -

Other

Address

City

Zip

Phone

() -

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,

20	14		
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Name of MS4/Coalition

SPDES ID

NYR20A007					
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7. Evaluating Progress Toward Measurable Goals MCM4

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.

To review all basic and full SWPPPs, inspect all active construction sites where land disturbance is greater than 5,000SF. To conduct any enforcement as required. To provide education to all construction personnel.

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

All 44 SWPPPs have been reviewed to be compliant with NYS Standards of Erosion and Sediment control (NYS Stormwater Design Manual as applicable). 100% of construction sites were inspected; 100% were inspected more than once. In addition, enforcement included 3 notices of violation and 3 stop work orders.

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 deadlines 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).

To continue to review all applications, all basic and full SWPPPs. To conduct regular site inspections and enforce all stormwater related ordinances.

MS4 Annual Report Form

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Name of MS4/Coalition

SPDES ID

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
<input type="radio"/> Alternative Practices	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Filter Systems	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Infiltration Basins	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	30 <input type="text" value=""/> <input type="text" value=""/>	30 <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Open Channels	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Ponds	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Wetlands	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Other	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>

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:

MS4 Annual Report Form

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2	0	1	4
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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

Town of Yorktown

SPDES ID

N	Y	R	2	0	A	0	0	7				
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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?

2		
---	--	--

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?

15		
----	--	--

 %

MS4 Annual Report Form

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2	0	1	4		
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Name of MS4/Coalition

Town of Yorktown					
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SPDES ID

NYR20A007					
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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 (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.

To participate in East of Hudson Corporation's retrofit programming and other aspects of regional stormwater cooperation including distribution strategies and prioritize structural and non-structural management practices to improve water quality. Inspection and maintenance of Town owned post-construction stormwater practices.

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

30 detention basins were inspected and cleaned. The town is a participant in the EOH Corporation with other communities to address the retrofit plan implementation resulting in a reduction of phosphorus.

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

2			
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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 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).

The Town will continue to participate in the EOH, inspect post construction site stormwater practices and maintain as necessary. In addition, the Town will continue to conduct regular inspection and maintenance of municipal facilities.

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

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

MS4AnnualReportForm

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

2014

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
NYR20A007

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 (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?

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

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

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

MS4 Annual Report Form

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

2014

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 Yorktown

SPDES ID

NYR20A007

7. Evaluating Progress Toward Measurable Goals MCM6

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.

To conduct regular good housekeeping practices such as proper road salt storage, landscaping and lawn care and roadway maintenance. Conduct employee training in stormwater, illicit discharge detection and elimination, septic system maintenance and repair, and other good housekeeping practices. Conduct inspections of all town facilities.

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

The Town continues to maintain good housekeeping practices such as proper road salt storage. 125 catch basins were inspected and cleaned. 30 employees were trained.

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 deadlines 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).**

To continue to implement Town MS4 priority management practices to improve water quality and address phosphorus. To conduct good housekeeping practices at all Town owned facilities and to provide training to employees.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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 Yorktown

SPDES ID
NYR20A007

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)
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,

20	14		
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

NYR20A007							
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Name of MS4/Coalition

Town of Yorktown

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?

52	100
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 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYS DEC 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?

		2
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7c. What percent of the projects included in 7b have been completed in this reporting period?

100

 %

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

100

 %
 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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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

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