

MS4 Annual Report Cover Page

MCC form for period ending March 9,

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

2	0	1	9
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Name of MS4

Stormwater Coalition of Albany County																			
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SPDES ID

N	Y	R	2	0	A														
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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

Name of MS4

SPDES ID							
N	Y	R	2	0	A		

Section 4 - Certification Statement

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Title (Clearly print title of individual signing report)

<input type="text"/>

Signature

<input type="text"/>

Date

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
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Send completed form and any attachments to the DEC Central Office at:

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

MS4 Annual Report Form

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

2	0	1	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

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0					
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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	1
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1. Targeted Public Education and Outreach Best Management Practices

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

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

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

2. Specific audiences targeted during this reporting period:

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

G	e	n	e	r	a	l	P	u	b	l	i	c	-	C	o	a	l	i	t	i	o	n		W	e	b	s	i	t	e		
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Other

MS4 Annual Report Form

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Name of MS4/Coalition

Stormwater Coalition of Albany County																			
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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:

- | | | | | | | | |
|--|---------------------|--|---|---|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>4</td><td>7</td></tr></table> | | | | 4 | 7 |
| | | | 4 | 7 | | | |
| <input type="radio"/> Direct Mailings | # Mailings | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
| | | | | | | | |
| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td>7</td></tr></table> | | | | | 7 |
| | | | | 7 | | | |
| <input checked="" type="radio"/> List-Serves | # In List | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>1</td><td>8</td><td>1</td></tr></table> | | | 1 | 8 | 1 |
| | | 1 | 8 | 1 | | | |
| <input type="radio"/> Mailing List | # In List | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
| | | | | | | | |
| <input type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
| | | | | | | | |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>8</td><td>4</td></tr></table> | | | | 8 | 4 |
| | | | 8 | 4 | | | |
| <input type="radio"/> School Program | # Attendees | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
| | | | | | | | |
| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | |
| | | | | | | | |
| <input checked="" type="radio"/> Printed Materials: | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>5</td><td>6</td></tr></table> | | | | 5 | 6 |
| | | | 5 | 6 | | | |

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

P	r	e	s	e	n	t	a	t	i	o	n	H	a	n	d	o	u	t	s
2		C	W	P		W	e	b	c	a	s	t	s						
H	R	W	s	h	e	d	A	l	l	i	a	n	c	e	-	P	r	e	s
S	t	o	r	m	M	a	p	g	-	P	a	t	r	o	o	n	C	r	k

Other:

2		C	W	P		W	e	b	c	a	s	t	-	A	r	c	h	i	v
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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URL

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

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

Coalition goals for 2018/2019: 1. Maintain/update Coalition website (member info; post DRAFT Joint AR/SWMP doc for public comment; post new publications); 2. Provide coalition members with brochures; 3. Provide traditional MS4 members with Public Education Program Development Tool which displays the location of target audiences (residential, commercial, institution, industrial); the associated pollution generating behaviors; and likely pollutants of concern

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

1. Coalition website maintained and updated
2. Brochures provided or printed when requested
3. Traditional MS4s provided with hard copy map of their MS4 land use types, matched to target audience types (residential, commercial, institutional, industrial), with info about associated pollution generating behaviors, and Pollutants of Concern. Land use/target audience layer on SwIM.

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

			1
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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).

2019/2020 Coalition Goals: Don't know

MS4 Annual Report Form

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Name of MS4/Coalition Stormwater Coalition of Albany County

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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

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

Address

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

City

A l b a n y

Zip

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Phone

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- Library Annual Report SWMP Plan Comments

Address

City

Zip

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Phone

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- Other Annual Report SWMP Plan Comments

Address

City

Zip

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Phone

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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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Stormwater Coalition of Albany County									
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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.

0	5	/	0	3	/	2	0	1	9
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4.b. For how many days was/will this report be posted?

	1	4
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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

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

Jan, 2018 the coalition received notice that the MS4Web software used to write/update the joint Coalition SWMP document had been replaced by MS4Web2.0. using the new format, the SWMP document was updated . "Goals Met' were tracked as activities , noting what happened, when. New goals were written covering the time frame: 3/10/2018 to 3/9/2019 (2018-2019). These goals included elements of proposed MS4 Permit (GP-0-17-002) @ WAVE stream events planned for '18

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

A hybrid Joint Coalition SWMP Plan "Annual Evaluation" document listing activities completed from 3/10/17 to 3/9/18 and goals for the permit reporting year 3/2018 to 3/2019 was posted on the Coalition website 4/28/2018. The CBI MS4web 2.0 SWMP plan module was used to create the document. Completed 4 Coalition-wide WAVE stream monitoring events (3 Days & 4 Site)-1 Site Salt Kill; 2 sites Vly Creek; and 1 site Lisha Kill

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

			1
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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).

2019/2020 Coalition Goals: Don't know

MS4 Annual Report Form

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

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Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID
N Y R 2 0

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

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

Grid for additional information

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

Grid for answer

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

Grid for answer

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

Grid for answer

7. Has the storm sewershed mapping been completed in this reporting period? Yes No
If No, approximately what percent was completed in this reporting period? %

8. Is the above information available in GIS? Yes No
Is this information available on the web? Yes No

If Yes, provide URL(s):

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

URL

Grid containing URL: https://acvarcgis.albanycounty.com/webmap/

URL

Grid for additional URLs

MS4 Annual Report Form

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Name of MS4/Coalition

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

GRANT: 1. Complete field work system/program map'g (outfalls-corrected-/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Review/prepare exist'g datasets from UAlb/T-Bethlehem/T-Colonie for Krumkill/Patroon/Ann Lee Pond for sewershed delineations; 3. Complete sewershed delineations; 4. Use Survey123 to develop ORI form; 5. purchase/load/give tablets w/ORI form to interested parties. OTHER: 6. Create ORI form as needed.

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

GRANT: 1&2. Storm system/program mapping completed-data posted on SwIM for Alb Cnty, T/ New Scotland, City/Albany, and V/Green Island. 2&3 Datasets from UAlbany, T/Bethlehem, and T/ Colonie prepared and integrated with V/Colonie. City/Albany, and Albany County datasets to completed 3 storm sewershed delineations (Ann Lee/Patroon/Krumkill). 4&5 ArcGIS Online Survey123/Collector forms created (ORI/Construction/MuniFac)/loaded to tablets for interested parties.

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

			1
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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).

2019/2020 Goals: Don't know

MS4 Annual Report Form

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Name of MS4/Coalition

SPDES ID

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. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

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

- Notices of Violation #

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 ○ No Authority
- Stop Work Orders #

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 ○ No Authority
- Criminal Actions #

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 ○ No Authority
- Termination of Contracts #

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 ○ No Authority
- Administrative Fines #

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 ○ No Authority
- Civil Penalties #

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 ○ No Authority
- Administrative Orders #

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 ○ No Authority
- Enforcement Actions or Sanctions #

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 ○ No Authority
- Other #

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 ○ No Authority

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Name of MS4/Coalition

Stormwater Coalition of Albany County																																							
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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?**

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

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

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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.

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Name of MS4/Coalition Stormwater Coalition of Albany County

SPDES ID
N Y R 2 0

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

[Grid for Department name]

Address

[Grid for Address]

City

[Grid for City]

Zip

[Grid for Zip]

Phone

([Grid]) [Grid] - [Grid]

Library

Address

[Grid for Address]

City

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

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Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

GRANT: 1. Use Survey123 to develop MS4 Construction Site Inspection Form; 2. Purchase/load/give tablet w/MS4 Construction Site Inspection Form to interested MS4s. OTHER: 3. Co-sponsor with ACSWCD, 1 4hr E/SC training for Construction Site Operators; distribute promotional material to Coalition members for distribution to their contacts; post training info on Coalition website; pay tuition(s) as needed, funds permitting.

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

GRANT: 1/2. Survey123 MS4 Construction Site Inspection Form finalized and loaded onto tablets for interested MS4s-two tablet training sessions. OTHER: 3. (One) 4hr E/SC training for Construction Site Operators co-sponsored with ACSWCD (12/7/2018). 21 stormwater related staff from 4 MS4s attended Construction Activity Pmt related trainings (4hr E/SC trainings; 2 Eastern NY SW RTC trainings 4/19/18 Filtration-Infiltrations & 6/9/2018 Small Dam Design) Coalition funded

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

			1
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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).

2019/2020 Goals: Don't know.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

N	Y	R	2	0					
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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,

2	0	1	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

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

GRANT: 1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop PC SMP inspection form(s) modeled after NYSDEC Maintenance Guidance - SW Mgmt Practices 3 Purchase/load/give tablets w/PC SMPs Inspection Form(s) to interested MS4s

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

GRANT: 1/2. System and program mapping completed and data posted on SwIM for Alb Cnty, T/ NewScotland, City/Albany and V/Green Island. 2. No Survey123/Collector ArcGIS Online forms created for PC SMP inspections.

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

			1
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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).

2019/202 Goals: Don't know

MS4 Annual Report Form

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

2	0	1	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

Stormwater Coalition of Albany County																			
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SPDES ID

N	Y	R	2	0															
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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 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 type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Salt Storage.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parks and Open Space.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Municipal Building.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

MS4 Annual Report Form

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

2	0	1	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

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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

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

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

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

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

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

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

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

 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

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

				5
--	--	--	--	---

4. What was the date of the last training?

0	3
---	---

 /

0	7
---	---

 /

2	0	1	9
---	---	---	---

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

		2
--	--	---

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

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

 %

MS4 Annual Report Form

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

2	0	1	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

Stormwater Coalition of Albany County

SPDES ID

N	Y	R	2	0				
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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.

GRANT: 1. Complete field work-system and program map'g (outfalls-corrected/archive; PCSMPs-inventory/mapped; muni facilities inventory/mapped); finalize data/post on SwIM (AlbCnty/T-NewScotland/Ci-Alb/VGrnIs); 2. Use Survey123 to develop Municipal Self Audit form; 3. Purchase/loas/give tabletsw/Municipal Self Audit Form to interested MS4s. OTHER: 4. Coordinate circulation of train'g DVDs for members ; 5. Fund/organize outside vendor/in-house train'g(s)

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

Grant: 1. System and program mapping completed and data posted on SwIM for Alb Cnty, T/ NewScotland, City/Albany and V/Green Island. 2/3. Survey123/collector ArcGIS Online Municipal Self Audit form finalized and loaded onto tablets for interested MS4s. OTHER: 4. Training DVDs circulated among interested users at Coalition Working Group meetings. 5. No outside vendor or in-house trainings.

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

			0
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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).

2019/2020 Coalition goals: Don't know

MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

N	Y	R	2	0					
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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.

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 %

Estimate what percentage was mapped 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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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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SPDES ID

N	Y	R	2	0					
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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?

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 %

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?

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

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 %

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

--	--	--	--

 %
 No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes No N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? Yes No N/A

