

**TOWN OF YORKTOWN, NEW YORK  
ANNUAL STORMWATER REPORT**

**May, 2015**









**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2015

Name of MS4 TOWN OF YORKTOWN

SPDES ID  
N Y R 2 0 A 0 0 7

**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 MI Last Name

B R U C E           B A R B E R

Title

S T O R M W A T E R   M A N A G E M E N T   C O N S U L T A N T

Address

1 7 7 0   C E N T R A L   S T R E E T

City State Zip

Y O R K T O W N   H E I G H T S      N Y      1 0 5 9 8 -

eMail

b a r b e r b r u c e @ y a h o o . c o m

Phone County

( 9 1 4 ) 2 9 9 - 5 2 9 3      W E S T C H E S T E R

### MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2015

Name of MS4 TOWN OF YORKTOWN

SPDES ID  
N Y R 2 0 A 0 0 7

#### Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

E A S T O F H U D S O N

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

N Y R 2 0

Address

P O B O X 1 7 6

City

P A T T E R S O N

State

N Y

Zip

1 2 5 6 3 -

eMail

w w w . e o h w c . o r g

Phone

( 8 4 5 ) 3 1 9 - 6 3 4 9

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?  Yes  No

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

- MM1
- MM2
- MM3
- MM4
- MM5 R E T R O F I T P R O G R A M
- MM6

Additional tasks/responsibilities

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

STORMWATER RETROFITS

**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 2015

Name of MS4

SPDES ID  
N Y R 2 0 A 0 0 7

**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

Title (Clearly print title of individual signing report)

Signature

Date  
0 5 / 2 6 / 2 0 1 5

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	5
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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
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SPDES ID  

N	Y	R	2	0	A	0	0	7
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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 (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 CONTINUES TO PROVIDE A BROAD RANGE OF EDUCATIONAL SOURCES IN THE FORM OF BROCHURES, WEB SITE AND LINKS, AND CABLE TV SPOTS. BROCHURES RELATE TO A WIDE RANGE OF TOPICS INCLUDING CONSTRUCTION SITE MANAGEMENT, SEPTIC SYSTEM MAINTENANCE, PET WASTE AND PHOSPHOROUS REDUCTION.

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

THE TOWN DISTRIBUTED 452 BROCHURES AND INFORMATIONAL SHEETS. INFORMATION REGARDING STORMWATER AND PHOSPHOROUS REDUCTION ARE RUN AS SHORTS ON THE LOCAL CABLE TV CHANNEL 365 DAYS A YEAR. THE PUBLIC HAS OPPORTUNITIES TO BE PRESENT AT ALL LOCAL MEETINGS REGARDIND STORMWATER TOPICS.

**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 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).**

CONTINUE TO MAKE ALL EDUCATIONAL MATERIALS AVAILABLE. UPDATE WEB SITE AS REQUIRED. WILL CONTINUE TO HOLD BIWEEKLY ENVIRONMENTAL PANEL MEETINGS WHICH ARE OPEN TO THE PUBLIC.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

### Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report? [ ][ ][ ]

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

- Cleanup Events # Events [ ][ ][ ][ ] 1
- Comments on SWMP Received # Comments [ ][ ][ ][ ]
- Community Hotlines
 

Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]	Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]
Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]	Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]
Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]	Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]
Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]	Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]
Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]	Phone # ( [ ][ ][ ] ) [ ][ ][ ] - [ ][ ][ ][ ]
- Community Meetings # Attendees [ ][ ] 1 4 4
- Plantings Sq. Ft. [ ][ ][ ][ ]
- Storm Drain Markings # Drains [ ][ ][ ][ ]
- Stakeholder Meetings # Attendees [ ][ ] 8 6
- Volunteer Monitoring # Events [ ][ ][ ][ ]
- Other: E N V . P A N E L / S T M W T C O M M M E E T I N G S

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

- List-Serve # In List [ ][ ][ ][ ]
- Newspaper Advertising # Days Run [ ][ ][ ][ ]
- TV/Radio Notices # Days Run [ ][ ][ ][ ]
- Other: T O W N B O A R D A G E N D A

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





**MS4 Annual Report Form**

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

2	0	1	5
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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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**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	/	2	8	/	2	0	1	5
---	---	---	---	---	---	---	---	---	---

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

3	6	5
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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?

0	5	/	2	6	/	2	0	1	5
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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, 

2	0	1	5
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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
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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.**

THE TOWN CONDUCTED SEMI-MONTHLY ENVIRONMENTAL PANEL MEETINGS WHICH ARE OPEN TO THE PUBLIC, FULL ACCESS TO ALL STORMWATER MATERIALS ARE AVAILABLE FOR PUBLIC REVIEW, STORMWATER RELATED TOPICS APPEAR ON TOWN BOARD AND PLANNING BOARD MEETINGS, ANNUAL REPORT PRESENTED AT PUBLIC MEETING AND INCLUDED ON WEB SITE.

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

THE ANNUAL REPORT WAS PRESENTED AT A PUBLIC TOWN BOARD MEETING, THERE WERE 20 ENVIRONMENTAL PANEL MEETINGS HELD DURING THE YEAR, THE BATTLE OF YORKTOWN DEBRIS REMOVAL DAY WAS PUBLICALLY NOTICED AND INCLUDED 514 VOLUNTEERS WHO PICKED UP 23,500 POUNDS OF POTENTIAL FLOATABLES.

**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).**

THE TOWN WILL CONTINUE TO HOLD SEMI-MONTHLY ENVIRONMENTAL PANEL MEETINGS, PRESENT THE ANNUAL REPORT AT A PUBLIC MEETING AND ON THE TOWN WEBSITE. IN ADDITION, BATTLE OF YORKTOWN WILL CONTINUE ANNUALLY AND RESIDENTS WILL BE NOTICED REGARDING STORMWATER RELATED ACTIVITIES.







**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 

TOWN OF YORKTOWN
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SPDES ID  

N	Y	R	2	0	A	0	0	7
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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 TOWN WILL CONTINUE TO MAINTAIN THE STORMWATER HOT LINE. THE HIGHWAY DEPARTMENT ALSO REPORTS POTENTIAL ILLICIT DISCHARGES DISCOVERED DURING MAINTENANCE. OUTFALLS WILL CONTINUE TO BE INSPECTED USING NYSDEC APPROVED REPORTING METHODS. STORMWATER TRAINING WILL CONTINUE TO BE HELD AT STORMWATER MEETINGS AND STAFF TRAINING EVENTS.

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

130 OUTFALLS WERE INSPECTED DURING THE REPORTING PERIOD. TWO ILLICIT DISCHARGES WERE CORRECTED. TRAINING WAS CONDUCTED FOR STAFF AND RESIDENTS AT A SCHEDULED STORMWATER COMMITTEE MEETING.

**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).**

THE TOWN OF YORKTOWN WILL CONTINUE OUTFALL INSPECTIONS AND MAINTAIN/REPAIR AS REQUIRED. DETECTED ILLICIT DISCHARGES WILL BE ELIMINATED. TRAINING SESSIONS WILL BE HELD ON AN ANNUAL BASIS

**MS4 Annual Report Form**

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

2	0	1	5
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Name of MS4/Coalition 

TOWN OF YORKTOWN
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SPDES ID

N	Y	R	2	0	A	0	0	7
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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?**

	2	3
--	---	---
- 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
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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:**

- Notices of Violation # 

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

 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**

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

2	0	1	5
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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
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SPDES ID  

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

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

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

 %

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

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

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

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

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2015

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, 

2	0	1	5
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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
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SPDES ID

N	Y	R	2	0	A	0	0	7
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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 TOWN OF YORKTOWN REVIEWS ALL PROJECTS AND DETERMINES IF STORMWATER PERMITS ARE REQUIRED. ALL SWPPP'S ARE REVIEWED, ALL CONSTRUCTION SITES ARE INSPECTED AND ENFORCEMENT IS ADMINISTERED AS REQUIRED.

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

ALL 23 SWPPP'S THAT WERE RECEIVED WERE REVIEWED TO ENSURE COMPLIANCE WITH NYSDEC EROSION CONTROL AND STORMWATER DESIGN MANUALS. 100% OF THE CONSTRUCTION SITES WERE INSPECTED AND 3 STOP WORK ORDERS WERE ISSUED.

**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).**

THE TOWN WILL CONTINUE TO REVIEW ALL CONSTRUCTION APPLICATIONS AND REQUIRE STORMWATER PERMITS WHERE REQUIRED. SITES WILL CONTINUE TO BE INSPECTED AT LEAST ONCE AND ALL STORMWATER REGULATIONS WILL BE ENFORCED.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2015

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

**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"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Filter Systems	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input checked="" type="radio"/> Infiltration Basins	3 0	3 0	3 0
<input checked="" type="radio"/> Open Channels	2 5	2 5	2 5
<input type="radio"/> Ponds	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Wetlands	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Other	<input type="text"/>	<input type="text"/>	<input type="text"/>

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:

C O N S E R V A T I O N B O A R D

**MS4 Annual Report Form**

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

2	0	1	5
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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
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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?  

		0
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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?  

	1	0
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 %

**MS4 Annual Report Form**

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

2	0	1	5
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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
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SPDES ID  

N	Y	R	2	0	A	0	0	7
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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 TOWN OF YORKTOWN WILL CONTINUE TO BE A MEMBER OF THE EOH WATERSHED CORPORATION AND WILL WORK TO ACHIEVE COMPLIANCE USING REGIONAL STORMWATER RETROFITS. THE TOWN WILL CONTINUE TO INSPECT AND MAINTAIN STORMWATER BASINS, SWALES/DITCHES AND THE OVERALL STORMWATER CONVEYANCE SYSTEM.

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

THE TOWN HAS WORKED WITH EOH TO CONTINUE RETROFIT INSTALLATION WITHIN THE WATERSHED. THE TOWN HIGHWAY DEPARTMENT INSPECTED AND MAINTAINED 30 DETENTION BASINS AND 25 DRAINAGE SWALES AS PART OF ONGOING OPERATION AND MAINTENANCE OF POST CONSTRUCTION STORMWATER PRACTICES/CONVEYANCES.

**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).**

THE TOWN WILL CONTINUE TO WORK WITH EOH TO INSURE COMPLIANCE WITH PHOSPHOROUS REDUCTION REQUIREMENTS. INSPECTION AND MAINTENANCE OF POST CONSTRUCTION STORMWATER PRACTICES AND THE STORMWATER CONVEYANCE SYSTEM WILL CONTINUE.

**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 

TOWN OF YORKTOWN
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SPDES ID 

N	Y	R	2	0	A	0	0	7
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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 checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" 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 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 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"/>

**MS4 Annual Report Form**

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

2	0	1	5
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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
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SPDES ID  

N	Y	R	2	0	A	0	0	7
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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 # 

		1	3	0
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

			3	0
--	--	--	---	---
- 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 

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

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

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

0	4
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 / 

2	1
---	---

 / 

2	0	1	4
---	---	---	---

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

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

	7	0
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 %

**MS4 Annual Report Form**

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

2	0	1	5
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Name of MS4/Coalition 

TOWN OF YORKTOWN
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SPDES ID  

N	Y	R	2	0	A	0	0	7
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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.**

TO CONDUCT OVERALL GOOD MUNICIPAL HOUSEKEEPING PRACTICES INCLUDING CATCH BASIN INSPECTION AND CLEANING, PROPER LAWN MAINTENANCE PRACTICES, ROAD SALT APPLICATION AND SPILL PROTECTION. TOWN WILL CONTINUE TO INSPECT MUNICIPAL FACILITIES.

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

130 CATCH BASINS WERE INSPECTED AND CLEANED. TRAINING WAS CONDUCTED FOR TOWN STAFF AT A SCHEDULED STORMWATER MEETING. JUDICIOUS USE OF ROAD SALT/DE-ICER WILL CONTINUE.

**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).**

THE TOWN WILL CONTINUE TO INSPECT AND MAINTAIN ALL TOWN FACILITIES AND WILL PROVIDE TRAINING TO TOWN STAFF. EMPHASIS WILL BE PLACED ON IMPROVEMENT OF WATER QUALITY, REDUCTION IN PHOSPHOROUS AND SPILL PROTECTION.

**MS4 Annual Report Form**

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

2	0	1	5
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Name of MS4/Coalition 

TOWN OF YORKTOWN
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SPDES ID  

N	Y	R	2	0	A	0	0	7
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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? 

1	0	0
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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? 

		2
--	--	---

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? 

1	0	0
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 %

No Projects Planned

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

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

**MS4 Annual Report Form**

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

2	0	1	5
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Name of MS4/Coalition

TOWN OF YORKTOWN

SPDES ID

N	Y	R	2	0	A	0	0	7
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- 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