

VILLAGE OF HASTINGS-ON-HUDSON

Municipal Building
7 Maple Avenue
Hastings-on-Hudson, New York 10706
(914) 478-3400
Fax: (914) 478-4624
hastings@hastingsgov.org http://hastingsgov.org

May 29, 2009

DEC Central Office MS4 Permit Coordinator 625 Broadway Division of Water – 4th Floor Albany, NY 12233-3505

Re: MS4 SPDES NYR20A219 – Annual Report Year 6 (March 9, 2008-March 9, 2009)

Dear MS4 Permit Coordinator:

The Village of Hastings-on-Hudson is submitting the enclosed Annual Report for Year 6 ended March 9, 2009 and Municipal Compliance Certification Form signed by the Village Manager, Francis A. Frobel. Also attached are e-mail correspondences from Westchester County Planning Department and from Saw Mill River Coalition describing events and tasks that each has undertaken on behalf of their partners. Both organizations have been instrumental in assisting Westchester County municipalities like Hastings-on-Hudson with Minimum Control Measure (MCM) 1, Education and Outreach and MCM 2, Public Involvement and Participation.

This annual report for is posted on the Village website along with those of prior years and will be mentioned at the Village Board of Trustees Regular meeting on June 2, 2009. If there is any discussion or if any comments are submitted after that Village Board meeting we will forward them to your office.

If you need additional information, do not hesitate to call me at (914) 478-3400 Ext. 630.

Sincerely,

Angela Witkowski

Director of Planning

MS4 Annual Report Cover Page

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

This cover page must be completed by the report preparer. Joint reports require only one cover page.

SPI	DES	ID	0110-04-0					
N	Y	R	2	0	А	2	1	9

Choose one:

This report is being submitted on behalf of an individual MS4.

Fill in SPDES ID in upper right hand corner.

Nai	ne o	of M	IS4																								
V	i	1	1	a	g	е	0	f	Н	a	s	t	i	n	g	s	-	0	n	-	Н	u	d	s	0	n	

OR

○ This is a joint report being submitted on behalf of a coalition.

SPDES ID

Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.

									8						
											L.				
T															

SPI	DES	ID				
N	Y	R	2	0	А	
SPI	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	А	
SPI	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	A	
SPL	DES	ID				
N	Y	R	2	0	А	
SPI	ES	ID				
N	Y	R	2	0	A	
SPL	ES	ID				
N	Y	R	2	0	A	
SPI	ES	ID				
N	Y	R	2	0	A	

N	Y	R	2	0	A		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	PES	ID			er-alifa-a		
N	Y	R	2	0	A		
SPI	DES	ID					
N	Y	R	2	0	A		
SPI	DES	ID					
N	Y	R	2	0	A		
SPI	DES	ID					
N	Y	R	2	0	A		
SPI	DES	ID					
N	Y	R	2	0	A		
SPL	DES	ID					
N	Y	R	2	0	A		
SPL	DES	ID					
N	Y	R	2	0	A		
SPE	DES	ID					
N	Y	R	2	0	А		

SPI	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	A	
SPL	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	A	
SPI	DES	ID				
N	Y	R	2	0	A	
SPE	ES	ID				
N	Y	R	2	0	A	

MS4 Annual Report Cover Page

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

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

SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	NYR20A	NYR20A
SPDES ID	SPDES ID	SPDES ID
NYR20A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 0 A	N Y R 2 0 A

MS4 Annual Report Cover Page

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

Required Forms

- > Municipal Compliance Certification
- > Water Quality Trends
- > Minimum Measure 1
- > Minimum Measure 2.
- > Minimum Measure 3
- > Minimum Measure 4
- > Minimum Measure 4 and 5
- > Minimum Measure 5
- > Minimum Measure 6
- > MS4s in impaired watersheds included in GP-0-08-002 Part IX must also complete the form *Additional Watershed Improvement Strategy Best Management Practices*.

Reporting Requirements

- * Permittees submitting an annual report for an individual MS4 must complete and submit all required forms.
- * Joint reports may be submitted by permittees with legally binding agreements as follows:
 - > <u>Each</u> MS4 contributing to a joint report must submit a Municipal Compliance Certification (MCC) form with an original signature. The MCC forms must be attached to the report.
 - > A coalition may submit information on behalf of its members as follows:
 - 1. Submit one form for each of the Minimum Measures (and if required, Additional Watershed Improvement Strategy Best Management Practices) on behalf of all the MS4s in the coalition, or
 - 2. Complete some of the required forms on behalf of all the MS4's in the coalition and for other Minimum Measures, attach completed forms from each of the MS4s.

For example, a joint report for a coalition including four permitted MS4s may contain one form for *each* of the Minimum Measures 1-5, representing the combined work of all four participating MS4s, and *in addition*, include four separate Minimum Measure 6 forms and four separate *Additional Watershed Improvement Strategy Best Management Practices* forms provided by each of the participating permittees.

The Department will *not* accept a report form from a participating MS4 in addition to a combined report form submitted for the same Minimum Measure.

Instructions for completing forms

These forms may be completed on a computer or by hand. If completing the forms by hand, fill in circles completely and print clearly.

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

_		SI	DES	SID						
Name of MS4	VILLAGE OF HASTINGS-ON-HUDSON	N	Y	R	2	0	A	2	1	9

Section 2 - Contact Information

Provide contact information for all of the following contacts:

- 1. The Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 2. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c.).
- 3. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 4. Report Preparer (Consultants may provide company name in the space provided).

Submit a separate sheet for each contact.

For each contact, select all that apply:

- Signatory Authority (choose one of the following)
 - Executive Officer or Ranking Elected Official
 - O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name	MI Last Name
FRANCIS	A FROBEL
Title	
V I L A G E M A N A G E R	
Address	
7 MAPLEAVENUE	
City	State Zip
City	State Zip
H A S T I N G S - O N - H U D S	O N
H A S T I N G S - O N - H U D S	
H A S T I N G S - O N - H U D S	0 N N Y 1 0 7 0 6 -

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

	SPI	DES	ID						
Name of MS4 Village of Hastings-on-Hudson	N	Y	R	2	0	A	2	1	9

Section 2 - Contact Information

Provide contact information for all of the following contacts:

- 1. The Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 2. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c.).
- 3. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 4. Report Preparer (Consultants may provide company name in the space provided).

Submit a separate sheet for each contact.

For each contact, select all that apply:

- O Signatory Authority (choose one of the following)
 - O Executive Officer or Ranking Elected Official
 - O Duly Authorized Representative
- O Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name	MI Last Name
D e v e n	Sharma
Title	
Building Inspect	: o r
Address	
7 Maple Avenue	
City	State Zip
City H a s t i n g s - o n - H u d s	
Hastings-on-Huds	NY 10706-
Hastings-on-Huds	NY 10706-

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

SPDES	SPDES ID						
Name of MS4 Village of Hastings-on-Hudson N Y	R	2	0	A	2	1	9

Section 2 - Contact Information

Provide contact information for all of the following contacts:

- 1. The Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 2. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c.).
- 3. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 4. Report Preparer (Consultants may provide company name in the space provided).

Submit a separate sheet for each contact.

For each contact, select all that apply:

- O Signatory Authority (choose one of the following)
 - O Executive Officer or Ranking Elected Official
 - O Duly Authorized Representative
- Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name A n g e l a	MI Last Name Witkowski
Title Director of Plan	n i n g
Address 7 Maple Avenue	
	Ct-t- 7:
City H a s t i n g s - o n - H u d s	State Zip O n
	0 n N Y 1 0 7 0 6 -

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

Naı	ame of MS4 VILLAGE OF HASTINGS-ON-HUDSON Section 3 - Partner Information - Submit a separate sheet																	N	Y	R	2	0	A	2	1	9						
Se	cti	on	3	- F	ar	tne	er :	Inf	or	ma	tie	<u>on</u>	- S	ubı	nit	a s	epa	rate	e sł	neet	fo	r ea	ich	par	tne	r.						
Did peri			MS	4 w	ork	wit	h p	artr	ners	/coa	alit	ion	to c	om	ple	te s	ome	e or	all	per	mit	rec	quir	eme	ents	du	ring	; thi	is re	epo	rtin	g
If Y												,.		د دا														•	Ye	S	0	No
If N Part	-	•					ion	4.	- C	erti	пса	atio	n S	tat	eme	ent.																
W	ner. E	S	Т	C	H		S	Т	E	R		C	0	U	N	Т	Y		P	L	A	N	N	I	N	G		D	E	Р	Т	
Part	ner	/Co	aliti	ion l	Vam	e(c	on't	.)											N/A-S					SPL	DES	Par	tner	· ID	- If	apr	lica	ble
																								N	Y	R	2	0				
Add	res	S																														
1	4	8		M	A	R	Т	I	N	Ε		A	V	Ε	N	U	Ε															
City					_															St	ate		Zip					1				
W	Н	Ι	Т	Ε		P	L	A	I	N	S									N	Y		1	0	6	0	1	-				
eMa		_	7			_	~	+	_	h					100	~				<u> </u>		170										
С	С	a	1	@	W	е	S	t	С	h	е	S	t	е	r	g	0	V	•	С	0	m	-									
Pho	ne 9	1	4	\	9	9	5		3	7	8	2											-	-					dano			Nia
)		7	,					٦	1	0	4							WII	n G	P-0	-08-	-002	Pa	TL I V	.U.	?		Ye	:S		No
Wh	at	tas	ks/i	res	pon	sib	iliti	es	are	sha	arec	d w	ith	thi	s pa	ırtn	er ((e.g	. N	IM:	1 S	chc	ol	Pro	gra	ms	or	Mu	ıltip	ole	Tas	sks)?
• N	1M	1	w	е	b	s	i	t	е	,		Т	V		P	S	A	,		В	a	n	n	е	r	s						
• 1	13 A	2		-3	I			_				_	7		ъл	_	_			i		7										
• N	'IIVI	2	Ε	d	u	С	a	t	i	0	n	a	1		M	a	t	е	r	1	a	1										
\circ N	1M	3																														
\sim N	13. I	A																		Ι,												
O N	TIVI	4																										_				
\circ ν	ſМ	5																														
0 N	1M	6																														
Ad	diti	ion	al t	ask	s/re	espe	ons	ibil	litie	s																						
0					<i>Im</i>											gem	ieni	t Pr	aci	tice	s re	equ	ireo	l fo	r N	1S4	s ir	ı im	пра	ire	£	
						0																										

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

Name of	f MS	S4_	VILI	LAGI	E OF	HAS	STIN	IGS-	ON-	HUD	SON	1										SPL N	Y	R	2	0	A	2	1	9
Section	n 3	<u>- F</u>	ar	tn	er :	Inf	or	ma	atio	<u>on</u>	- S	ubi	nit	a s	epa	rate	e sł	neet	t fo	r ea	ich	par	tne	er.						
Did your period? If Yes, c If No, pr	omj	olet	e in	nfoi	rma	tio	n b	elo	w.				-			e or	all	per	mit	rec	quir	eme	ents	du	ring		is re	-		g No
Partner/Co					.1011		- (1100	1110	11 0	ran	J111V	0110.	'															
W E S		C	Н	E	S	Т	Ε	R		С	0	U	N	Т	Y		D	Е	Р	A	R	Т	М	Е	N	Т		0	F	
Partner/Co	oaliti	ion l	Van	ne(c	on't	.)															1	SPI	DES	Par	tnei	· ID	- If	арр	lica	ble
INF	0	R	M	A	Т	Ι	0	N		Т	Ε	С	Н	N	0	L	0	G	Y			N	Y	R	2	0				
Address																		,		,	,									
1 4 8		M	A	R	Т	I	N	E		A	V	E	N	U	Ε															
City										,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,		,	,		St	ate	_,	Zip					r 1				
MHI	Т	Ε		P	L	А	Ι	N	S									N	I Y	7	1	0	6	0	1	-				
eMail								//												,										
a e h	2	@	W	е	s	t	С	h	е	s	t	е	r	g	0	v		С	0	m										
	Address 1																													
What tas	sks/i	resp	on	sib	iliti	es	are	sha	arec	l w	ith	this	s pa	ırtn	er (e.g	. N	[M]	1 S	cho	ol :	Pro	gra	ms	or	Mu	ıltip	ole '	Гas	ks)?
• MM1	W	е	b	s	i	t	е		N	a	t	u	r	a	1		r	е	S	0	u	r	С	е	s					
О ММ2																														
• MM3	0	u	t	f	a	1	1		G	I	S		1	а	У	е	r		0	n	-	1	i	n	е		m	a	р	s
O MM4																														
О ММ5																														
О ММ6																														
Addition Wate	ersk	ied	Im_{I}	pro	ven	nen	t Si	trat						zem	ieni	t Pr	·acı	tice.	s r€	equ	irec	l fo	r N	1S4	s in	ı im	ıpa	irec	1	

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

		 SPI	DES	ID	70	26-		02 10 00		
Name of MS4	VILLAGE OF HASTINGS-ON-HUDSON	N	Y	R	2	0	A	2	1	9

Section 4 - Certification Statement

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

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

First Name FRANCIS	MI Last Na A F R	me O B E L
Title V		
Signature Zran C. Zrobel		Date 0 5 / 2 9 / 2 0 0 9

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

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

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

SPDES ID

Water Quality Trends The information in this section is being reported (check one):		
The information in this section is being reported (check one):		
 On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 		
The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition		
If Yes, choose one of the following		
O Report(s) attached to the annual report		
URL	\neg	
	\dashv	
URL		
	T	
URL		
URL	_	
	_	
URL		

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

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

If Submitting this form as part of a John report on behalf of a	a coantion leave of DEO ID ofank.
Name of MS4/Coalition VILLAGE OF HASTINGS-ON-HUDSON	SPDES ID N Y R 2 0 A 2 1 9
Minimum Control Measure 1. Public Ed	ucation 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 Manageme	ent Practices
Check all topics that were included in Education and Outreach d	uring this reporting period:
Construction Sites	• Pesticide and Fertilizer Application
General Stormwater Management Information	Pet Waste Management
Household Hazardous Waste Disposal	Recycling
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
Infrastructure Maintenance	Trash Management
Smart Growth	O Vehicle Washing
O Storm Drain Marking	Water Conservation
• Green Infrastructure/Better Site Design/Low Impact Development	 Wetland Protection
Other:	O None
2. Specific audiences targeted during this reporting period:	
○ Agricultural ○ Contractors	
● Residential ○ Developers	
Businesses General Public	
○ Restaurants ○ Industries	
Other:	

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

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

																						S	PDE	ES I	D_						
Name (of M	S4/C	Coal	itior	VI	LLA	GE (OF H	AST	ING	S-Oì	V-HU	JDS	ON		-111-240						N	1 3	Y	₹ :	2	0 2	A	2	1	9
3. W	/hat is r	stı epo	ato rti	egie ng	s d per	id iod	you 1? (ır N Che	MS4	4/C all	oa tha	li ti e t ap	o n oply	use /:	to	acl	niev	e e	edu	cat	ion	an	d o	uti	rea	ch	goa	ıls	duı	ing	5
O Cor	ıstru	ctio	n S	lite	Оре	erat	ors	Tra	aine	d													#	Tra	ine	d [
O Dir	ect I	Mai	ling	S																			# N	⁄Iail	ling	s					
• Kio	sks	or (Oth	er D	isp	lays	5																# L	ocai	tion	s					3
• Lis	t-Sei	ves																					:	# In	Lis	st [1	2	5	0
Ma	iling	Lis	st																				:	# In	Lis	st [4	0	2	6
○ Nev	wspa	ıper	Ad	ls oi	r Ai	rtic	les																# D	ays	Ru	n [
• Pul	olic	- Eve	nts	/Pre	sen	tati	ons																# A	tten	dee	es [1	9	0
O Sch	nool	Pro	gra	m																			# A	tter	idee	es					
• TV	Spo	ot/Pi	rog	ram																			# E)ays	Ru	n [1	2	0
• Pri																					To	tal #	Di:	strit	oute	d [5	7	5
	Loca	3.0	-	- 1	design line						1	т	1	Т	Т	Т	Т	T													
	V	+	+	-	+	+	E	+	H Z	A	L	L	+	-	+	+	+	+	+	\exists											
	L	+	+		+	+	Y		7.7	+			NT	m	F	R	+	+	+	\exists											
	C	\pm	=	+	+	N	+	+	Y	+		+	+	-	E S		+	\pm	+	=											
O Otl	C c	L	E	A	N		U	P		E	V	ᆫ	1/	_	2			_													
O 01			П		Т														T												
■ 137 /	eb P	200		Pro	wid	A \$1	neci	fic	wel	. ad	ldre	sse	S - 1	not	hon	ne r	age	e. C	Con	— tinu	e oi	n ne	ext p	oag	e if	ado	litic	onal	l sp	ace	is
UF		age.	•	nee			JCC1	1110	*****	, 40		000				[0-						•		6-60 000 00		200000000000000000000000000000000000000			0 - 10	
h	- 1	t	p	:	/	/	w	w	w		h	a	s	t	i	n	g	s	g	0	v		0	r	g	/	d	0	С	S	/
E	1	a	n	n	i	n	g		a	n	d		Z	0	n	i	n	g	/	S	t	0	r	m	W	a	t	е	r		
UI		1.	Π		,	1	Ī		7.7		n	1	2	n	n	i	n	a		w	е	s	t	С	h	е	S	t	е	r	
l l	+	+	p	:	[/	W	W	W		p	l m	w	n	n	le	r	g M	a		a	g		m	e	n	t				
UI UI	-	V	.	C	0	m		S	t	0	r	m		a			_	1/1	_ u		<u></u>	ב ב			_						
ŀ		t	р	:	/	/	w	W	W		s	a	W	m	i	1	1	r	i	v	е	r	С	0	a	1	i	t	i	0	n
	. 0	r	g	/	S	t	0	r	m	W	a	t	е	r	M	a	n	a	g	е	m	е	n	t							

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

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

e of MS4/Coalition	VILLAGE OF HAS	STINGS-ON	-HUDS(ON					N	Y	R	2	0 2	A 2	
Web Page con't.:	Provide s	specific v	web a	ddres	ses - 1	not h	ome j	oage.							
JRL															T
			++	+	-			_	+	-	+	+	+	\pm	\dagger
JRL		TIT	ТТ			ТТ	T		T	Т				T	T
							_		+-	-	4		+	+	+
JRL															_
JRL															-
JRL															
			++			+				-			\dashv	+	\dagger
JRL						T				Т				T	T
														-	+
URL															_
URL		T													
		+++		+	++	+-							H		+
URL				-1-									П	T	T
									4			_		-	+
URL															-
		+			$\dagger \dagger$										
URL								П							T
					1	+		-		-		-			+

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

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

		SP	DES	ID						
Name of MS4/Coalition	VILLAGE OF HASTINGS-ON-HUDSON	N	Y	R	2	0	A	2	1	9

4. Evaluating/Measuring Progress MCM 1

What indicators do you use to evaluate the overall effectiveness of your Education and Outreach Program, how long have you been tracking them and at what frequency?

Example	*:			
Indicator	[Public phone survey		
Began Ti	racking	2005	Frequency:	Annual
Degun 1.	8	(year)		(ex.: annual, monthly, biweekly)
# 1000				
			(ex.: samples/part	icipants/events)
Results:	I	ncreased awareness o	f issues related to	use of fertilizers
* This in	dicator	r is provided as an exai	mple only.	5
Indicator	r:	Village of Hastings-on-Hudson	n website	
Began Ti		2009	Frequency:	Monthly
Degun 11	rucning	(year)		(ex.: annual, monthly, biweekly)
# Avera	ge 5 hits p	per months		
			(ex.: samples/part	icipants/events)
Results:	d n	Village acquired a new lownloads monthly.	w server in Februa Next annual report ss are provided to	g and Zoning Documents" Annual Reports. ry 2009 and has begun to track hits and will be annual tracking (3/2009-3/2010) with a Westchester County Planning and Saw Mill web sites.

Submit additional pages as needed.

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR VILLAGE OF HASTINGS-ON-HUDSON 2 0 A 2 1 Name of MS4/Coalition 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: # Events Cleanup Events O Comments on SWMP Received # Comments O Community Hotlines Phone # Community Meetings # Attendees Sq. Ft. Plantings # Drains O Storm Drain Markings # Attendees O Stakeholder Meetings # Events Volunteer Monitoring Other: 2. Was public notice of availability of annual report and Stormwater Management Program Yes O No (SWMP) Plan provided? # In List O List-Serve O Newspaper Advertising # Days Run

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

O TV/Radio Notices

Other:

Days Run

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 0 \end{vmatrix}$ 9 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

Vam	e of																			N	Y	R	2	0	A	2	1	9				
2.	UR	L(L(s) con't.: ase provide specific address(es) where notice(s) can b															be :	acc	ess	ed ·	- n(ot h	on	ne p	oag	e.					
	JRL	.]				/	,					1-		_	4												/	-7		_	~	
Ļ	h			_				_			_		-							H	0	V	·	0	r	g	/	d	0	С	S	•
	/	Р	1	a	n	n	i	n	g	Z	0	n	i	n	g	/	S	t	0	r	m	W	a	t	е	r						
Ĺ	JRL																															
ŀ	1																															
L	JRL																															
Ţ	JRL									Ι																						
ŀ	-							<u> </u>																						\blacksquare		
	JRL																															
ſ																																
Ī	T																															
Ţ	JRL												_											_								
																					<u></u>											
Į	JRL							Γ	Т												Т											
I								+	\vdash	_	_									\vdash	\vdash											
	JRL.																															
ĺ																																
ľ											C									Ī	T	Ī										
Ţ	JRL							_	-	_				_					_	_	_	_					_			_		_
1	JRL					1		Τ	Т	Т											T			1		1						
	_									-																						

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

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

SPDES ID

ne of MS4	IS4/Coalition VILLAGE OF HASTINGS-ON-HUDSON																	N	Y	R	2	0	А	2	1	
URL(s) Please	con't.:									tic	es c	an	be	acc	ess	sed	- n	ot	ho	me	pa	ge.				
URL						T								-		_			_							Т
URL															_											+
																										I
++			+	\vdash	+	+						1		\forall	1	\forall	1									t
IDI						1																				1
JRL					T	T								T												1
	++-		+		+	+				_	_				+										_	
JRL						_						_		Т	Т	Т										1
						_								_	4											
JRL						_	_																			
																										_
																				H						
URL				1																						
			+		+	+	+																			=
																				_	_	_	_	_	_	_
URL			T	Т			T		Г																	
			+		-	+	+	_	-					-	_	_			_	\vdash	_	-				=
URL							1											Ī		Т	Т	Т			Т	_
							1																		L	_
URL																										_
																										1
					+	+	+		+													1	T	T		=
							1																		_	-
URL							T		Т											T	1		Γ		Γ	-
			-				-	-	-												_	_	+	-	-	=

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

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

																					5	SPDE	ES I	D						_
Name	of MS4/	Coa	litic	n V	ILL	AGE	OF I	HAST	TINC	S-O	N-H	UDS	ON									N 3	Z :	R	2	0	A	2	1	9
3. W	here (can	th	e pı	ubl	ic a	icci	ess	cop	ies	of	th	e ai						tori	nw	ato	er N	I ai	nag	gem	ıen	t P	rog	rai	n
	nter ac																		vhic	eh c	loc	ıım <i>e</i>	enf	is	ลงล	ila	ble	and	l	
	hether																												•	
• MS	4/Coal Depart			ffic	е										•	Ar	nnua	al R	.epo	rt	•	SW	/M	PΡ	lan	(• C	com	mei	nts
	Вu	i	1	d	i	n	g		0	r		V	i	1	1	a	g	C	1	е	r	k								
	Addres	S																												
	7	M	a	р	1	е		A	v	е	n	u	е																	
	City H a	s	t	i	n	g	s	0	n	Н	u	d	s	0	n		N	Y			Zip 1	0	7	0	6	-[
	Phone																													
	(9	1	4)	4	7	8	-	3	4	0	0																		
• Lib) Aı	าทน	al R	lepo	rt		SW	/M	PΡ	lan		\circ	Com	me	nts
	Addres				7			7\			n							T	T		П	T	T	Т	1			T	П	
	7	M	a	р	1	е		A	V	е	n	u	е								Zip									
	City H a	s	t	i	n	g	s	0	n	Н	u	d	s	0	n		N	1 7	7	Ī	1	0	7	0	6	_				
	Phone												1							_										
	(9	1	4)	4	7	8	-	3	4	0	0																		
O Otl	her														C) A :	nnu	al F	Repo	ort	C	SW	VΜ	ΡF	Plan	l	0 (Com	me	nts
	Addre	SS																	П	Т			T							
	City																				Zip					and the sale		See and		
	City																									-				
	Phone			1 ,		1		1 1					1																	
	(_)				-		dis																				
• We	eb Page	UI:	RL:												_	A	nnu	al I	Repo	ort		SV	VM	IP I	Plar	1	• (Com	me	nts
	ht	t	p	:	/	/	W	w	W		h	a	s	t	i	n	g	s	g	0	V		0	r	g	/	d	0	С	s
	/ P	1	a	n	n	i	n	g	Z	0	n	i	n	g	/	S	t	0	r	m	W	a	t	е	r					
	Pleas	e p	rov	ide	spe	ecif	ic a	ıddı	ess	of	`pa	ge	wh	ere	rep	ort	car	be	ace	ces	sec	l - n	ot l	hor	ne	paş	ge.			
• eN	Iail	-																									• (Con	ıme	nts
	THE	1	11	Ti	+	ТТ	0	v	i	1	1	a	a	le	Н	a	1	1	F	0	r	m	s	-	s	u	b	m	i	t

. h a s t i n g s g o v

. org/

Forms

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

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

Nat	ne of MS4/Coalition VILLAGE OF HASTINGS-ON-HUDSON	SPDES ID N Y R 2	0 A 2	1 9
4.	Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SW this report.	MP in response to com	○ Yes ments to	• No
	If submitting a report for single MS4, answer 5.a If submitt	ting a joint report, answ	ver 5.b	
5.:	a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	rting period?	○ Yes	• No
	If No, is one planned?		• Yes	○ No
5.	b. Was an Annual Report public meeting held for all MS4 this reporting period?	s contributing to this	report d ○ Yes	luring O No
	If No, is one planned for each?		○ Yes	○ No

Name of MS4/Coalition VILLAGE OF HASTINGS-ON-HUDSON

6. Evaluating/Measuring Progress MCM 2

Submit additional pages as needed.

MS4 Annual Report Form

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

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

SPDES ID

N Y R 2 0 A 2 1 9

					been tracking them and at what frequency?
	mple*:	Nur	nber of attendees at public eve	ents	
	an Tracki	ng:	2005 (year)	Frequency:	Annual (ex.: annual, monthly, biweekly)
#	1000				
		7.		(ex.: samples/parti	
Res	ults:	Atte	ndance at public ev	ents has increase	d 200% since 2005.
* T	his indicat	or is	provided as an exam	ple only.	
Ind	icator:	Att	endance sheets kept for Villag	ge clean-up events, Saw N	Aill River Coalition events
			2005	Frequency:	annual
вед	gan Tracki	ng:	(year)	Trequency.	(ex.: annual, monthly, biweekly)
#	Saw Mill Riv	er Coa	lition 6 River Clean-ups; Wet		gut Ave at SM River. 2 Hastings Village Clean-ups
				(ex.: samples/part	icipants/events)
Res	sults:	Plai	ached e-mails from s uning describe partn unteers.	Saw Mill River C ter events. Villag	Coalition and from Westchester County ge-wide clean-ups consistently have nearly 50

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

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

	SPDES ID
Name of MS4/Coalition VILLAGE OF HASTINGS-ON-H	UDSON N Y R 2 0 A 2 1 9
Minimum Control Measure 3	. Illicit Discharge Detection and Elimination
The information in this section is being reporte	d (check one):
On behalf of an individual MS4	
On behalf of a coalition How many MS4s contributed to	o this report?
·	
1. Enter the number and approx. percen	nt of outfalls mapped: 8 # 1 0 0 %
2. How many of these outfalls have been	screened for dry weather discharges during this
reporting period (outfall reconnaissa	nce inventory)?
3.a. What types of generating sites/sewers	sheds were targeted for inspection during this
reporting period?	
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	○ Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
○ Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	● None
O Sewersheds:	

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

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

NI C	MO	1/0	0012	+:	VII	LLA	GE C	F H.	AST	INGS	S-ON	I-HU	DSC)N									N .			2	0 .	A	2	1	9
Name of																					or	الله الله الله الله الله الله الله الله	n ~	na	rio	19					_
3.b.W	hat	ty	pes	of	illi	cit	dis	ch	arg	es I	nav										epo)FUI	ng	pe	HUU	u i					
O Brok	en I	Line	es F	ron	n S	anit	ary	Se	wer			(⊃ Iı	ndu	stria	al (Con	nec	tion	S											
O Cros	s C	onr	ecti	ions	3							(○ I1	nflo	w/I	nfil	trat	ion													
O Faili	ng S	Sep	tic :	Sys	tem	ıs						(○ P	um	p S	tati	on l	Fail	ure												
O Floo	r Dı	rain	s C	onr	nect	ed '	Го	Sto	rm	Sev	ers	(\circ s	ani	tary	/ Se	we	r O	veri	flow	/S										
O Illeg	al I	un	npin	ıg								1	\circ s	tra	ight	Pi	oe S	Sew	er I	Disc	har	ges									
Othe													• N																		
4. He	ow i						cha	arg	es/j	pot	ent	ial	ille	ega	l c o	nn	ect	ion	s h	ave	· be	en	de	teci	ted	du	rin	g t	his		0
5. Ho																															0
6. He	ow rio		ny	illi	cit	dis	cha	arg	es/	ille	gal	col	nne	ecti	ons	s ha	ive	be	en	elin	nin	ate	ed c	lur	ing	th	is r	epe	ort	ing	0
7. H	as t No	he , ap	sto pro	rm xir	se nat	wei ely	r sh wł	ed nat	ma per	pp i cen	i ng t ha	be as t	en beer	cor	npl omp	l ete olet	d? ed?	?									•	Ye	S	0]	No %
If	thi Ye	s ii s, p	rov	rm:	atio	on a RL	ava (s):	ila	ble	ila on	the	e w	eb'	?	ma	n(s)	۱ ۵۵	ın h	.e. a	cce	cce	d .	กดเ	· ho	me	na:	•	Ye Ye		0	
PI6 URI		pr	OV1	ae	spe	CIII	ic a	aaı	CSS		paş	30 1	VVIIC	10	IIIa,	p(s	, Ca		o u		000		110			P	0				
h	t	t	р	:	/	/	w	W	w		W	е	s	t	С	h	е	s	t	е	r	g	0	v		С	0	m	/		
P	1	a	n	n	i	n	g	/	S	t	0	r	m	W	a	t	е	r													
URI	_																														
									_																			<u> </u>			_
																														Ш	
URI	Ī																														
-																						Ī									

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

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

+	+	+	+	+	+							+	+	+			100					
JRL												 		_								9 116
JKL																						
						T																
URL				_		1	-	-		_									_			
URL					_	Т				Т	Γ		-1	-1								
			_		+	-		<u> </u>	_	_									<u> </u>			
URL		T			T			T	T		T								Γ			
	+	+	+	+	+			1	<u> </u>					-	_				T	Ī		
																		L				
URL				T		T	Γ															
				+		t		T			T								T			
URL					-						-										-	
O.C.D				T																		
																					//2	

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

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

SPDES ID

NYR2 0 A 2 1 9 VILLAGE OF HASTINGS-ON-HUDSON Name of MS4/Coalition 12. Evaluating/Measuring Progress MCM 3 What indicators do you use to evaluate the overall effectiveness of your Illicit Discharge Elimination Program, how long have you been tracking them and at what frequency? Example*: Number of illicit discharges identified/eliminated Indicator: 2005 Monthly inspections Frequency: Began Tracking: (ex.: annual, monthly, biweekly) (year) 25 illicit discharges identified/24 eliminated (ex.: samples/participants/events) Since 2005, the number of annual inspections has doubled. We have developed a Results: tracking system and illicit discharges that have been identified are being eliminated, on average, within a week of discovery. * This indicator is provided as an example only. Checked outfalls when mapped in 2007; NYS DEC monitors outfalls on Saw Mill River Indicator: 2007 Frequency: Began Tracking: (ex.: annual, monthly, biweekly) (year) (ex.: samples/participants/events) When outfalls were mapped in late 2007 they were also checked and no illicit Results: discharges were detected.

Submit additional pages as needed.

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

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

		SPI	DES	ID		G-na			Teacher	
Name of MS4/Coalition	VILLAGE OF HASTINGS-ON-HUDSON	N	Y	R	2	0	A	2	1	9

<u>Minimum Control Measures 4 and 5.</u> Construction Site and Post-Construction Control

The	e information in this section is	being	g repoi	ted	(ch	eck	one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s o		ibuted	to	this	s rep	port?	
1.	Has each Town, City and other regulatory mechanic Permit for Stormwater Di	sm tl	hat pr	ov	ides	s eq	ting to this report adopted a law, ord ual protection to the NYS SPDES Gestruction Activities?	inance or eneral Yes O No
	If Yes, provide date of equi	valeı	nt NY	S S	Sam	ple	Local Law. 09/2004	• 03/2006
2.	Does your MS4/Coalition	have	e a SV	VP.	PP	revi	iew procedure in place?	Yes O No
3.	How many Construction a reviewed in this reporting			er l	Poll	lutio	on Prevention Plans (SWPPPs) have	been
4.	comments related to cons	truct	tion S	W]	PPF	Ps?		Yes O No
	If Yes, how many public co	mm	ents w	ere	rec	ceiv	ed during this reporting period?	0
5.	Does your MS4/Coalition SWPPP process?	pro	vide e	du	cati	on a	and training for contractors about th	e local Yes O No
6.	Identify which of the folloperiod for construction acdo not have authority:	owin etivit	g type ties, ir	es o	of er	nfor e the	rement actions you used during the number of actions, or note those for	reporting r which you
	Notices of Violation	#				3	O No Authority	
0	Stop Work Orders	#					O No Authority	
0	Criminal Actions	#					O No Authority	
0	Termination of Contracts	#					O No Authority	
0	Administrative Fines	#					O No Authority	
0	Civil Penalties	#					O No Authority	
0	Administrative Orders	#					O No Authority	
\bigcirc	Other	#					O No Authority	

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

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

		SPI	DES	ID						
Name of MS4/Coalition	VILLAGE OF HASTINGS-ON-HUDSON	N	Y	R	2	0	A	2	1	9
1 (0)110 011110 11 01111111		0								

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The	e 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 ac during this reporting period?	re or m	ore 2
2.	How many construction projects disturbing at least one acre were active in your during this reporting period?	jurisdi	ction 2
3.	What percent of active construction sites were inspected during this reporting pe	riod?	0 %
4.	What percent of active construction sites were inspected more than once?	1 0	0 %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the Construction Stormwater Inspection Manual?	Yes	S
6.	(SWPPPs) of construction projects that are subject to MS4 review and approval	Yes	ns O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed.		

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

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

													2000						· C	SPD	ES	ID	7 776	1100-3		Pari I I I I I		
Name of N	MS4/Coaliti	on	/ILL	AGE	OF	HAS	STIN	GS-C	DN-H	łUD	SON									N	Y	R	2	0	А	2	1	9
6. con	't.•																											
	 mit additi	ona	l pa	iges	s as	ne	ede	d.																				
				0																								
	Coalition (Offic	e																									
В	1 2000 8	d	i	n	g		D	е	р	t		_	P	r	0	р	е	r	t	У		f	i	1	е	S		
L	ldress								T							_				_								_
7		p	1	е		A	v	е	n	u	е																	
Cit	ty														_	_			Zip				_					_
Н	ast	i	n	g	S	0	n	Н	u	d	s	0	n		N	1 A	7		1	0	7	0	6	-				
Ph	one	٦,									1																	
(9 1 4])	4	7	8	-	3	4	0	0																		
O Librar	-																											
Ac	ddress	1	T				Т			Г	Т	Т																
																			Zip									
Ci	iy	T																	Lip					_				
Ph	ione		_																				200	8				
(1				_																						
		/				J				_	J																	
Other																												
A	ddress		Τ												T													
_ Ci	itv		_					_	_	-							-		Zip)								
Ĺ	Ĭ																							-				
Ph	none							_			,				-													
()				-																						
■ Web	Page URL	(e)·		Plea	se r	ros	zide	sne	ecif	ic a	Iddi	ess.	wh	ere	SW	/PP	Ps	can	be	acce	esse	ed -	not	ho	me	pag	e.	
UF		(3).	1	104	3 0 F	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	100	op.																				
		1	T	T	T	Ī	Ī	T	Ī																			
			_				_				_				1	V-1			-									
UF	RL		Т	T	1		T	T		T	Τ	Τ	T		T	T		T										
		+	+				+	+	_	+	+	+	\vdash	-	+	+	+	+	\vdash	 			H					H

Name of MS4/Coalition

MS4 Annual Report Form

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

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

VILLAGE OF HASTINGS-ON-HUDSON

7. Evaluating/Measuring Progress MCM 4

SPDES ID

N Y R 2 0 A 2 1 9

What indicate Management	ors d Prog	o you use to evalua gram, how long hav	ate the overall effe	ctiveness of your Construction Site Stormwater ng them and at what frequency?
Example*:				
Indicator:	Per	cent SWPPPs reviewed		
Began Tracki	ng:	2005	Frequency:	Upon submission (ex.: annual, monthly, biweekly)
# 50 SWPPPs		(year)		(ex unnua, monuny, emecky)
# 50 SWPPPs			(ex.: samples/part	icipants/events)
Results:	100 com	% of SWPPPs wernments. All of thes	re reviewed. 50% se were returned w	of the SWPPPs reviewed were returned with vith modifications reflecting NYS Standards.
* This indica		provided as an exam		d Consulting Engincer or DPW, if necessary
Indicator:	Sit	e Inspection of all sites by S		d Consuming Engineer of D1 11, 11 necessary
Began Track	ing:	(year)	Frequency:	Weekly (ex.: annual, monthly, biweekly)
# 2 Violations				
H 2 1.000000			(ex.: samples/par	ticipants/events)
Results:	45 Euc	Main Street (1+acr clid <1 acre-runoff	e) -Runoff from V from neighboring	Whitman Street above; resolved put in a drain property; resolved by regrading to divert water
Submit addi	tiona	l pages as needed.		

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

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

SPDES ID

	of MS4/Coa	lition Vil	lage of Hastings-on	n-Hudson			NY	R	2	0 A	2	1 9	
What	indicator	s do you		ss MCM 4 nate the overall effective you been tracking						te Sto	orm	water	
Exam	ple*:												7
Indica	ator:	Percent SV	VPPPs reviewed										
Rogar	n Tracking		2005	Frequency:	Upon submiss	ion							
Degui	i Trucking	•	(year)			(ex.: ann	ual, mon	thly, l	iwee	kly)			7
# 50	0 SWPPPs												
				(ex.: samples/part	icipants/events)								7
Resul	c c	ommen	ts. All of the	ere reviewed. 50% ese were returned w	ith modific	cations re	flectin	ng N	YS	Stan	darc	ls.	
* Thi	e indicator	ie nrovi	ided as an exa	umple only.									
* Thi	s indicator	is provi	ided as an exa	ample only.									
* Thi				umple only. sulting Engineer and approv	ed by Planning I	Board and by	SMO/Bu						
Indic		SWPP s fo			ed by Planning I		SMO/Bu	ilding	Inspe	ector for			
Indic Bega	ator:	SWPP s fo	or reviewed by Con- 2004	sulting Engineer and approv				ilding	Inspe	ector for			
Indic Bega	ator: n Trackinş	SWPP s fo	or reviewed by Con- 2004	sulting Engineer and approv				ilding	Inspe	ector for			

Submit additional pages as needed.

Other:

MS4 Annual Report Form

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

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

Name of MS4/Coalition VILLAGE OF HAST	INGS-ON-HUDSON		SPDES ID N Y R 2 0 A 2 1 9
Minimum Control Mea	sure 5. Post-	-Construction	n Stormwater Management
The information in this section is being	ng reported (chec	k one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s cont 	ributed to this t	report?	
1. How many and what type of pos MS4/Coalition inventoried, insp	st-construction pected and main	stormwater man	nagement practices has your eporting period?
	# Inventoried	# Inspections	# Times Maintained
O Alternative Practices			
O Filter Systems			
O Infiltration Basins			
Open Channels			
○ Ponds			
○ Wetlands			
Other			
2. Do you use an electronic tool BMPs, inspections and main	tanance?		● Yes ○ No
3. What types of non-structural Development/Better Site Des	l practices hav ign/Green Infi	e been used to rastructure pri	implement Low Impact nciples?
Building Codes			
O Comprehensive Planning			
Overlay Districts			
Zoning			
○ None			

Name of MS4/Coalition VILLAGE OF HASTINGS-ON-HUDSON

MS4 Annual Report Form

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

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

SPDES ID

N Y R 2 0 A 2 1 9

4.]	Evaluatin	g/N	Ieasuring Progress	s MCM 5	
Wha	at indicato nagement	ors c Pro	lo you use to evalua gram, how long hav	ate the overall effective you been tracking	etiveness of your Post-Construction Stormwater ag them and at what frequency?
Exa	mple*:				
Indi	icator:	Nı	umber of reports of flooding of	during storm events from bu	siness district
Beg	an Trackii	ıg:	2005	Frequency:	Annual Summary
1			(year)		(ex.: annual, monthly, biweekly)
#	18			(ex.: samples/parti	cipants/events)
_	ults:	_			nced average rainfall, but DPW records show
* T	his indicat	attr	ributable to increase	ed inspection and r	g in the business district fell 25%. This is maintenance of post construction BMPs.
Ind	licator:	R	eports of stormwater runoff i	incidents from general publi	c observation follow-up by Building and/or DPW
	gan Tracki	ng:	2004 (year)	Frequency:	(ex.: annual, monthly, biweekly)
#	1 incident				
				(ex.: samples/part	icipants/events)
Res	sults:	201	ose Old Croton Ag	neduct: DPW Sup	vater runoff from Graham School property erintendent and (OCA) field supervisor met m and recommend erosion control measures.

Submit additional pages as needed.

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

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

		SPI	DES	ID		0				
Name of MS4/Coalition	VILLAGE OF HASTINGS-ON-HUDSON	N	Y	R	2	0	A	2	1	9
Tunio of 1710 ii Countion										

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	

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

Self-Assessment

Operation/Activity/Facility performed within the past 3 Addressed in SWMP? years? Operation/Activity/Facility Street Maintenance..... 9 Yes O No ○ No Yes O No Bridge Maintenance....

Yes O No ○ No • Yes Winter Road Maintenance..... • Yes ○ No • Yes O No Salt Storage.....

Yes O No ○ No • Yes Solid Waste Management..... • Yes New Municipal Construction and Land Disturbance..

Yes ○ No • Yes O No \bigcirc No ○ No Yes Winter Road Maintenance....

Yes ○ No • Yes O No Right of Way Maintenance.... • Yes ○ No • Yes O No Marine Operations..... • Yes O No Hydrologic Habitat Modification..... • Yes ○ No • Yes O No ○ No • Yes Parks and Open Space.... • Yes \bigcirc No ○ No Yes Municipal Building.... • Yes ○ No Yes O No Stormwater System Maintenance.... • Yes ○ No Yes O No Vehicle and Fleet Maintenance....

• Yes Other..... O Yes O No ○ No Yes

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

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

SPDES ID

Name of MS4/Coalition VILLAGE OF HASTINGS-ON-HUDSON	NYR2	0 A	2	1	9
2. Provide the following information about municipal operat	ions good housekeep	oing pr	ogr	am	s:
Parking Lots Swept	# Acres				4
• Streets Swept	# Miles			3	2
 Catch Basins Inspected and Cleaned Where Necessary 	#		3	0	0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#				2
O Phosphorus Applied In Chemical Fertilizer	# Lbs.			T	0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.				0
O Pesticide/Herbicide Applied As Pure Product	# Lbs.				0
3. How many stormwater management trainings have been parting this reporting period?	provided to municipa	al emp	loye	- 1	2
4. What was the date of the last training?	0 6 / 1 9	/ 2	0	0	8
5. How many municipal employees have been trained in this	reporting period?				2
6. What percent of municipal employees in relevant position stormwater management training?	s and departments r	eceive	5	0	%

Name of MS4/Coalition

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 0 9 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

VILLAGE OF HASTINGS-ON-HUDSON

7. Evaluating/Measuring Progress MCM 6

Submit additional pages as needed.

SPDES ID

N Y R 2 0 A 2 1 9

Example*:				
Indicator:	Catc	h basins inspected and cleane	ed	
Began Traci	king:	2005 (year)	Frequency:	monthly (ex.: annual, monthly, biweekly)
40 catch ba	sins clean	ed		
			(ex.: samples/parti	cipants/events)
	1	ν 1	-	vents to perform emergency maintenance.
* This indice	ator is p	provided as an exam	ple only.	
		provided as an examp		
Indicator:	300			Annual (ex.: annual, monthly, biweekly)
Indicator: Began Trac	300 king:	+/-Catch Basins Inspected ar	nd Cleaned Frequency:	
Indicator: Began Trac	300 king:	+/-Catch Basins Inspected ar 2007 (year)	nd Cleaned Frequency:	(ex.: annual, monthly, biweekly)

Name of MS4/Coalition Village of Hastings-on-Hudson

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 0 9 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

N Y R 2 0 A 2 1 9

iai illulvaio	are do vou use to evalu-	s MCM 6	ectiveness of your Municipal Stormwater
anagement a	and Good Housekeepin	ng Program, how l	ong have you been tracking them and at what
ample*:			-
dicator:	Catch basins inspected and clea	aned	
gan Trackin	2005 (year)	Frequency:	monthly (ex.: annual, monthly, biweekly)
40 catch basin	,		
40 Catell basin	5 Cleaned	(ex.: samples/parti	icipants/events)
This indicate	or is provided as an exan	mple only.	
dicator:	Training of Stormwater Manag	gement personnel	
	2004	7	Annual
	2004	Frequency:	Annual (ex.: annual, monthly, biweekly)
	ng: 2004 (year)	Frequency:	(ex.: annual, monthly, biweekly)
gan Trackir	ng: 2004 (year)	7	(ex.: annual, monthly, biweekly)

Angela Witkowski

From: Anderson, Christina [cca1@westchestergov.com]

Sent: Thursday, May 28, 2009 3:47 PM

To: awitkowski@hastingsgov.org

Subject: FW: Stormwater Education and Outreach Program

FYI

From: Anderson, Christina

Sent: Thursday, April 23, 2009 4:52 PM

To: 'TThompson@cmvny.com'; 'NBramson@ci.new-rochelle.ny.us'; 'maryfoster7990@msn.com'; 'philip.amicone@cityofyonkers.com'; 'ArdsleyMayor@aol.com'; 'wvescio@briarcliffmanor.org'; 'bronxvillemayor@optonline.net'; 'gschmidt@crotononhudson-ny.gov'; 'mayor@dobbsferry.com'; 'MayorElmsford@aol.com'; 'jwalsh@harrison-ny.gov'; 'Mayor@Hastingsgov.org'; 'emalloy@irvingtonny.gov'; 'villageclerk@villageoflarchmont.org'; 'sroberts@vomny.org'; 'mayorcindrich@mountkisco.org'; 'hanauer@villageofossining.org'; 'info@pelhamgov.com'; 'jweintraub@pleasantville-ny.gov'; 'dpilla@portchesterny.org'; 'jfeinstein@wfsnyc.com'; 'noreen76@aol.com'; 'pzegarelli@villageofsleepyhollow.org'; 'dfixell@tarrytowngov.com'; 'supervisor@bedfordny.info'; 'lindap@townofcortlandt.com'; 'supervisor@eastchester.org'; 'pfeiner@greenburghny.com'; 'supervisor@lewisborogov.com'; 'rmeehan@mtpleasantny.com'; 'BGerrard@town.new-castle.ny.us'; 'rberman@northcastleny.com'; 'pgreenwood@northsalemny.org'; 'cborgia@townofossining.com'; 'gwarshauer@townofpoundridge.com'; 'super@townofryeny.com'; 'mbmurphy@somersny.com'; 'dpeters@yorktownny.org' Cc: 'cwoods@cmvny.com'; 'korszuli@newrochelleny.com'; 'vpowell@cityofpeekskill.com'; 'james.jmoran@cityofyonkers.com'; 'ljkuhn@mindspring.com'; 'dturiano@briarcliffmanor.org'; 'rvcdpw1@optonline.net'; 'doconnor@crotononhudson-ny.gov'; 'jgoldstein@dobbsferry.com'; 'dpercopo@elmsfordny.org'; 'rwasp@harrison-ny.gov'; 'MGunther@Hastingsgov.org'; 'lschopfer@irvingtonny.gov'; 'publicworks@villageoflarchmont.org'; 'lverrastro@vomny.org'; 'jpalmer@mountkisco.org'; 'vmonastra@ossbuilding.org'; 'richard.slingerland@pelhamgov.com'; 'sjohnson@pleasantville-ny.gov'; 'wwilliams@portchesterny.com'; 'vcarosi@ryebrook.org'; 'JDatino@scarsdale.com'; 'ddouglas@villageofsleepyhollow.org'; 'mmcgarvey@tarrytowngov.com'; 'josterman@bedfordny.info'; 'chrisk@townofcortlandt.com'; 'mritchie@drepc.com'; 'aschmidt@greenburghny.com'; 'highway@lewisborogov.com'; 'ivanoli@mtpleasantny.com'; 'jfaiella@town.new-castle.ny.us'; 'cncastlehighway@optonline.net'; 'highway@northsalemny.org'; 'ccerny@townofossining.com'; 'ipowers@townofpoundridge.com'; 'bnowotnik@townofryeny.com'; 'scharneyhull@somersny.com'; 'itegeder@yorktownny.org'

Subject: Stormwater Education and Outreach Program

Municipalities,

As partners of the Stormwater Education and Outreach Program, you are reminded of the availability of the educational materials and tools located on the County hosted Stormwater Management web pages located at: www.westchestergov.com/stormwater. These materials and tools enable you to implement a stormwater education program at the local level in order to comply with the MS4 - Phase II Permits.

Currently, the NYSDEC is reviewing the proposed budget and we expect to receive a contact in the coming months. In the meantime, we have been advised by the state to move forward with implementing the educational components as directed in Minimum Control Measures 1 & 2. For your Annual Reporting forms, you may indicate the completion of the following tasks:

1. **Website**: The Stormwater Education webpage (<u>www.westchestergov.com/stormwater</u>) developed within existing Westchester County website. Contains 14 total pages, links to other internal pages and outside

- sites, contact information, and downloadable and printable material.
- 2. **Public Service Announcement**: One 30-second TV Public Service Announcement produced, directed and edited in-house and advertised 120 times on Cablevision News12 from 1/30/09 3/08/09. The PSA educates residents about the connection between winter salting and stormwater runoff, and directs viewers back to the website. Go to: http://planning.westchestergov.com/index.php? option=com_content&task=view&id=1444&Itemid=2437 and click on "Salt and Stormwater".
- 3. **Posters**: 73 posters created, printed and advertised at 73 bus shelter locations around the County from 2/09/09 3/22/09. The posters educate residents about the connection between winter salting and stormwater runoff, and direct viewers back to the website. Go to: http://planning.westchestergov.com/index.php? option=com_content&task=view&id=1443&Itemid=2436 and click on "Halt Before You Salt Bus Shelter Ad".
- 4. **Flyers**: 520 flyers created and printed; 20 flyers mailed to each of 26 hardware stores for public posting. The flyers educate residents about the connection between winter salting and stormwater runoff, and direct viewers back to the website. Go to: http://planning.westchestergov.com/index.php? option=com content&task=view&id=1443&Itemid=2436 and click on "Halt Before You Salt Flyer".

ELECTIVE

5. **Stormwater Banner**: Freestanding mobile stormwater education display made available on loan to local municipalities; 15 municipalities borrowed the display and made visible in their town halls for 2 week periods each from April - August 2008.

The following MS4s participated in the banner stand program:

- 1 City of Peekskill
- 2 City of Yonkers
- 3 Town of Bedford
- 4 Town of Cortlandt
- 5 Town of Greenburgh
- 6 Town of North Castle
- 7 Town of Somers
- 8 Town- Village of Harrison
- 9 Village of Ardsley
- 10 Village of Mamaroneck
- 11 Village of Ossining
- 12 Village of Pleasantville
- 13 Village of Rye Brook
- 14 Village of Scarsdale
- 15 Village of Tarrytown

If you have any questions, please contact me. Christina

Christina M. Anderson, Environmental Planner Westchester County Department of Planning 148 Martine Avenue, Room 432 White Plains, NY 10601 P: 914-995-3782 F: 914-995-3780 cca1@westchestergov.com

Angela Witkowski

From: Olivapat5@aol.com

Sent: Thursday, May 28, 2009 2:20 PM
To: AWitkowski@Hastingsgov.org

Subject: Some Coalition Activities in 2008

Saw Mill River Coalition Outreach Activities

1. Continued Water Quality monitoring of the Saw Mill. One of the sites is in Hastings

2. Conducted 6 River Clean Up Days at the Farragut Avenue site along the South County Trailway in Hastings. Approximately 20 volunteers attended each cleanup.

3. May 16 with assistance of Goldman Sachs Community Teamworks Program began restoration of a wetland meadow at Farragut Avenue. There were 35 Goldman Sachs volunteers.

4. June Coalition Meeting featured topic was on MS4 program - findings, new reporting requirements with Pat Ferracane from regional DEC office as speaker. There were 35 people in attendance.

5. December 2 was a major event with DEC and US EPA announcing the Coalition's receipt of a the 3 year Targeted Watershed grant for the Saw Mill.

6. Planning began on the better site design grant in December, 2008. We visited with you one afternoon for guidance and input.

To the second come