MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 6

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

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Choose one:

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

Fill in SPDES ID in upper right hand corner.

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OR

This report is being submitted on behalf of a Single Entity

(Per Part II.E of GP-0-10-002)

(Per Fait II.E of Gr-0 10 002)	
Name of Single Entity	

OR

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

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

Name of Coalition				
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MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 6

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MCC form for period ending March 9, 2 0 1 6

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Each MS4 must submit an MCC form.								
Section 1 - MCC Identification Page								
Indicate whether this MCC form is being submitted to certify endorsement or • An Annual Report for a single MS4	accep	tan	ce c	of:				
○ A Single Entity (Per Part II.E of GP-0-10-002)								
○ A Joint Report								
Joint reports may be submitted by permittees with legally bind	ing ag	ree	me	nts.	•			
If Joint Report, enter coalition name:						1		
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MCC form for period ending March 9, 2 0 1 6

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Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> 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
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

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MCC form for period ending March 9, 2 0 1 6

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MCC form for period ending March 9, 2 0 1 6

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Name of MS4 Village of Hastings-on-Hudson

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 6

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MCC form for period ending March 9, 2 0 1 6

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Name of	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/CoalitionName Saw Mill River Coalition Name (con't.) SPDES Partner ID - If applicable NYR20 Address 2 2 Main Steet State Zip Yonkers 2 2 Main Steet State Zip NY 10701 - State Edgally 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 General Storm water Education Rules MM3 MM4 Land Use																													
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MCC form for period ending March 9, 2 0 1 6

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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.

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Send completed form and any attachments to the DEC Central Office at:

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

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

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

Name of MS4/Coalition Village of Hastings-on-Hudson	SPDES ID N Y R 2 0 A 2 1 9		
Minimum Control Measure 1. Public E	Education and Outreach		
The information in this section is being reported (check one):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 			
1. Targeted Public Education and Outreach Best Manage	ment Practices		
Check all topics that were included in Education and Outreach	n during this reporting period:		
● Construction Sites	 Pesticide and Fertilizer Application 		
● General Stormwater Management Information	Pet Waste Management		
Household Hazardous Waste Disposal	Recycling		
Name of MS4/Coalition Village of Hastings-on-Hudson Minimum Control Measure 1. Public Education and Outreach The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1. Targeted Public Education and Outreach Best Management Practices Check all topics that were included in Education and Outreach during this reporting period: Construction Sites Pesticide and Fertilizer Application General Stormwater Management Information Pet Waste Management			
● Infrastructure Maintenance	● Trash Management		
Smart Growth	Vehicle Washing		
Storm Drain Marking	Water Conservation		
Green Infrastructure/Better Site Design/Low Impact Development	nt • Wetland Protection		
Other:	○ None		
	d.		
2. Specific audiences targeted during this reporting period	u.		
● Public Employees ○ Contractors			
● Residential ○ Developers			
● Businesses ● General Public			
○ Restaurants ○ Industries			
Other: Agricultural			
Other			

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$

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 Hastings-on-Hudson	SPDES ID N Y R 2 0 A 2 1 9
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieved identified in your Stormwater Management Program Plan (SWMPP), in III.C.1. Submit additional pages as needed.	ving measurable goals acluding requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMI	PP in this reporting period.
Continuing to advance the public's understanding of stormwater manaliterature, use of media including the village website and cable television	gement program through on and village meetings.
B. Briefly summarize the observations that indicated the overall ef Goal.	fectiveness of this Measurable
Public Service Cable Television Spots ran 2,312 times during the report information. Signage in parks encourages cleanup after pets. Village households and includes stormwater management information and recommendation.	calendars are mailed to 3567
C. How many times was this observation measured or evaluated in	this reporting period? (ex.: samples/participants/events)
D. Has your MS4 made progress toward this Measurable Goal dur	ring this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SV	
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedule	e goals of this MCM during).
Continue with cable TV spots and literature distribution. Continue disputes. Invite public participation as well as participation in outside activation.	plays in Village Hall and other ivities such as Saw Mill River

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$

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 Village of Hastings-on-Hudson 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: 1 # Events Cleanup Events #Comments Comments on SWMP Received 3 8 0 Community Hotlines Phone# 1 Phone # Phone # Phone# Phone# Phone # Phone # Phone # Phone # Phone # Phone # O Community Meetings # Attendees 0 1 0 0 Plantings Sq. Ft. #Drains Storm Drain Markings # Attendees O Stakeholder Meetings # Events O Volunteer Monitoring Other: 2. Was public notice of availability of this annual report and Stormwater Management O No Program (SWMP) Plan provided? Yes 5 0 # In List 2 0 List-Serve 1 # Days Run Newspaper Advertising 5 # Days Run TV/Radio Notices Other:

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

2.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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This report is being submitted for the reporting period ending March 9, 2 0 1 6

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 N Y R 2 0 A 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents? Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed. MS4/Coalition Office Annual Report SWMP Plan
Comments Department d|i|n| t m e n t B|u|i|1g D е p a r Address e n 7 $M \mid a \mid p$ 1 Α e v u е City Zip 7 Y 1 0 0 6 H a | i n 0 Η d n Ν s t g s n u s 0 Phone 9 1 4 4 7 8 3 4 0 0 SWMP Plan O Comments Library Address Annual Report Α 7 М 1 е v e n u e a p City Zip NY 1 7 0 6 d n 0 i 0 n Н u s 0 \mathbf{H} а s t n g s Phone 4 4 7 8 3 3 0 7 9 1 Comments Other Annual Report SWMP Plan Address f|f|i| i | 1 | 1 | a | C 1 k s 0 С е V q е е r Zip City Phone 7 8 3 0 4 9 1 4 4 Comments Annual Report SWMP Plan Web Page URL: i n 0 r d o С s t|p t gsg g h t s 0 W W W h а / Stormw а t er i \mathbf{z} i n g Ρ 1 n n n g $o \mid n$ а Please provide specific address of page where report can be accessed - not home page. O eMail Comments

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

				SPDE	S ID					
Name of MS4/Coalition	Village of Hastings-on-Hudson	<u>h.</u>)		N	R	2	0 4	2	1	9
-	was made available on the internet, wh		vas i	t pos	ted?	,				
Leave blank if t	this report was not posted on the internet		0	5	0	5	1 2	2 0	1	5
4.b. For how many	y days was/will this report be posted?							3	6	5
If submitting a	report for single MS4, answer 5.a If su	bmitting	a joi:	nt rej	ort,	ans	wer :	5.b		
	al Report public meeting held in this r	eporting	peri	od?	_		9	es	0	No
If Yes, what	was the date of the meeting?		0	5	/ 0	5	1/2	2 0	1	5
If No, is one	e planned?						0 \	es	0	No
5.b. Was an Annu	al Report public meeting held for all N	/IS4s con	tribi	uting	to t	his	repo	rt d	urii	ıg
this reporting	period?) • T	es	0	No
If No, is one	e planned for each?						0	es	0	No
If Yes, attach co	ts received during this reporting period comments, responses and changes made to conse to comments to this report.						0	Yes	•	No

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$

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SPDES ID

Name of MS4/Coalition	Village of Hastings-on-Hudson		N Y R 2	0 A 2 1 9
7. Evaluating Prog	gress Toward Measurable Goa	als MCM 2		
identified in your St	ort on your progress and project cormwater Management Program tional pages as needed.			
A. Briefly summar	rize the Measurable Goal iden	tified in the SV	WMPP in this repor	ting period.
	ouraged to participate in village voroviding plantings in public are			
B. Briefly summar Goal.	rize the observations that indic	cated the overa	all effectiveness of t	his Measurable
Saw Mill River clear Village owned traff	April 25 and 26, 2015. 55 peop anup held April 18, 2015. Villag fic islands including mulching o with annual maintenance to pre	ge residents pla f soil and addit	nted 4,000 daffodil bion of woodchips in	oulbs in 2014.
C. How many time	es was this observation measu	red or evaluate		period? 1 samples/participants/events
D. Has your MS4	made progress toward this me	easurable goal		ng period?
E. Is your MS4 on	schedule to meet the deadline	e set forth in th	ne SWMPP?	● Yes ○ No • Yes ○ No
	rize the stormwater activities ing cycle (including an implen			MCM during
Continue communi annual Saw Mill R	ity outreach and participation. Civer Cleanup.	Continue cleanu	ips. Continue partici	pation in
	26016	D 6 6		

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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

Minimum Control Measure 3. I	llicit Discharge Detection and Elimination
The information in this section is being reported (o	check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	nis report?
1. Enter the number and approx. percent of	of outfalls mapped: 17# 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	reened for dry weather discharges during this inventory)?
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	○ Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	Restaurants
O Food Processing Facilities	O Schools and Universities
○ Garbage Truck Washouts	Septic Maintenance
○ Hospitals	O Swimming Pools
○ Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	● Vehicle Maint./Repair Shops
Other:	○ None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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	N Y R 2 0 A 2 1 9												
3.b. What types of illicit discharges have	been found during this reporting period?												
O Broken Lines From Sanitary Sewer	O Industrial Connections												
O Cross Connections	○ Inflow/Infiltration												
O Failing Septic Systems	O Pump Station Failure												
○ Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows												
O Illegal Dumping	O Straight Pipe Sewer Discharges												
Other:	● None												
4. How many illicit discharges/potentia reporting period?	al illegal connections have been detected during this												
5. How many illicit discharges have been confirmed during this reporting period?													
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during this reporting												
7. Has the storm sewershed mapping b If No, approximately what percent was													
8. Is the above information available in Is this information available on the VIIf Yes, provide URL(s):													
Please provide specific address of page URL	where map(s) can be accessed - not home page.												
URL													

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$

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SPDES ID

Name of MS4/Coalition	N Village of Hastings-on-F	Hudson		N	Y R 2 0	A 2 2	1 9
12. Evaluating Pro	ogress Toward M	easurable Goals	s MCM 3				
Use this page to repidentified in your S III.C.1. Submit add	Stormwater Manag	gement Program					art
A. Briefly summa	rize the Measura	ible Goal identi	fied in the S	WMPP in t	his reportin	g perio	d.
Identify and elimin	nate any sources o	f illicit discharge	es				
B. Briefly summa Goal.	arize the observat	tions that indica	ted the over	rall effective	ness of this	Measu	rable
No illicit discharge	e found and correc	cted.					
		q					
C. How many tim	nes was this obser	rvation measure	ed or evalua	ted in this r	eporting pe	riod?	
•							1
D. II MCA	4 3 4		auroblo goo	l duning this			icipants/events
D. Has your MS4	made progress τ	oward this mea	surable goa	n during uns			○ No
E. Is your MS4 o	n schedule to me	et the deadline s	set forth in	the SWMPP		×	O NI
F. Briefly summathe next repor	arize the stormwa ting cycle (includ					Yes CM duri	
Continue annual cand document. Vigrant to complete	outfall inspections illage is part of an the mapping of st	18 member mur	nicipal conso	ortium which	icit discharg received a	ges, miti NYSDE	gate C

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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_		<u>S</u>	DE	SID						
Name of MS4/Coalition	Village of Hastings-on-Hudson	ı	1 Z	R	2	0	A	2	1	9

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

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?		
1a.	Has each MS4 contributing to this report adopted a law, ordinance or other reg mechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?		r
1b	.Has each Town, City and/or Village contributing to this report documented that equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney certification or using the NYSDEC Analysis Workbook?	Erosio C Gap	n and
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La	w. 3/2006	o 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 reviewed in this reporting period?	e beer	1
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs? • Yes	ıblic O No	ONT
	If Yes, how many public comments were received during this reporting period?	17	0
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	the lo	

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:

O Notices of Violation	#			O No Authority
Stop Work Orders	#			O No Authority
O Criminal Actions	#			O No Authority
O Termination of Contracts	#			O No Authority
O Administrative Fines	#			O No Authority
○ Civil Penalties	#			O No Authority
O Administrative Orders	#			O No Authority
■ Enforcement Actions or Sanctions	#		3	
Other Other	#			O No Authority

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		SP	DES	ID			_			
Name of MS4/Coalition	Village of Hastings-on-Hudson	N	Y	R	2	0	A	2	1	9
-	, , , , , , , , , , , , , , , , , , , ,	7.5								

	Minimum Control Measure 4. Construction Site Stormwater Runo	ff Cont	<u>trol</u>
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 a during this reporting period?	acre or 1	nore
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 2
3.	What percent of active construction sites were inspected during this reporting	period?	O NT
		1 0	0 %
4.	What percent of active construction sites were inspected more than once?	1 0	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use	the NY	S
	Construction Stormwater Inspection Manual? • Yes	O No	O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approva-		
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made av public review?	ailable f	
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	d.	

This report is being submitted for the reporting period ending March 9, 2 0 1 6 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 N Y R 2 0 A 2 1 9 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department Building D e p ar t m e n t Address 7 M | a | p1 е Α v е n u е Zip City H a s t i n g s o n H u d s o n NY 0 7 0 6 Phone 3 0 0 9 1 4 8 4 O Library Address Zip City Phone Other Address City Zip Phone Please provide specific address where SWPPPs can be accessed - not home page. • Web Page URL(s): URL URL

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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 V	fillage of Hastings-on-Hudson		N Y R 2 0 A	2 1 9
7. Evaluating Progr	ress Toward Measurable Goa	ils MCM 4		
identified in your Stor	rt on your progress and project rmwater Management Program onal pages as needed.	plans toward ac ı Plan (SWMPF	chieving measurable goals), including requirements	in Part
A. Briefly summariz	ze the Measurable Goal ident	tified in the SV	VMPP in this reporting p	eriod.
Number of Construc	tion Projects over 1 acre under	way this reporti	ing period	
B. Briefly summari Goal.	ze the observations that indic	cated the overa	all effectiveness of this M	easurable
2 projects over 1 acr	e underway this reporting perion	od		
C. How many time	s was this observation measu	red or evaluat	ed in this reporting perio	od?
			(ex.: sample	s/participants/eve
D. Has your MS4 1	made progress toward this m	easurable goal	during this reporting pe	riod? Yes ○ No
	schedule to meet the deadlin			es ○ No
F. Briefly summar the next reporti	rize the stormwater activities ing cycle (including an imple	planned to me mentation sche	et the goals of this MCM edule).	during
Continue to admini requirements	ster and monitor all projects ov	er 1 acre as per	r legislation and SWPPP	

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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Name of MS4/Coalition	Village of Hastings-on-	Hudson		SPDES ID N Y R	
Minimum (Control Meas	ure 5. Post-	<u>Constructio</u>	n Stormwater]	<u>Management</u>
The information in thi	s section is being	reported (chec	k one):		
On behalf of an indOn behalf of a coalHow ma		buted to this r	eport?		
1. How many and w MS4/Coalition in	what type of post	-construction s	stormwater ma		s has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
O Filter Systems					
O Infiltration Basins					
Open Channels					
○ Ponds					
O Wetlands					
Other					
2. Do you use an e BMPs, inspection			ibase, spreads	heet) to track pos	t-construction ● Yes ○ No
3. What types of a Development/B					impact
Building Codes	• Municipal Co	omprehensive P	lans		
Overlay Districts	Open Space I	Preservation Pro	ogram		
Zoning	• Local Law or	r Ordinance			
○ None	O Land Use Re	egulation/Zoning	3		
O Watershed Plans	Other Compr	ehensive Plan			
Other:					

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$ 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 YR 2 0 A 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort? O Yes 4b. Does the MS4 have a banking and credit system for stormwater management practices? O 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? O Yes No 4d. How many stormwater management practices have been implemented as part of this system in this reporting period? 0 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

0 %

Infrastructure principles in this reporting period?

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$

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	N Y R 2 0 A 2 1 9
6. Evaluating Progress Toward Measurable Goals MCM 5	
TT	destinate manuals and
Use this page to report on your progress and project plans towar identified in your Stormwater Management Program Plan (SWN)	
III.C.1. Submit additional pages as needed.	n i), morading requirements in i are
F8	
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
Number of Best Management Practices Inventoried this reporting	ng period
	*
B. Briefly summarize the observations that indicated the ov Goal.	erall effectiveness of this Measurable
Goal.	
No new BMP's came on line this reporting period	
C. How many times was this observation measured or evalu	ated in this reporting period?
	(ex.: samples/participants/ever
D. Has your MS4 made progress toward this measurable go	
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in	12
	• Yes • No
F. Briefly summarize the stormwater activities planned to n the next reporting cycle (including an implementation sc	<u> </u>
Continue to Inventory and Monitor Best Management Practices monitor for compliance with SWPPP's and BMP's inventoried.	
*	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$

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	Α	2	1	9

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):
On behalf of an individual MS4On behalf of a coalition
How many MS4s contributed to this report?
1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.
<u>Self-Assessment</u>
Operation/Activity/Facility
performed within the past 3
Operation/Activity/Facility Addressed in SWMP? years?
Street Maintenance 9 Yes O No
Bridge Maintenance ● Yes ○ No
Winter Road Maintenance ■ Yes ○ No ■ Yes ○ No
Winter Road Maintenance ■ Yes ○ No

Operation/Activity/Facility	Audresseu III S WWIT:	<u>years:</u>
Street Maintenance	• Yes O No	● Yes ○ No
Bridge Maintenance	• Yes O No	Yes O No
Winter Road Maintenance		● Yes ○ No
Salt Storage	• Yes O No	● Yes ○ No
Solid Waste Management	• Yes O No	Yes ○ No
New Municipal Construction and Land Disturba	nnce • Yes O No	● Yes ○ No
Right of Way Maintenance	Yes O No	■ Yes ○ No
Marine Operations	~	O Yes No
Hydrologic Habitat Modification		■ Yes ○ No
Parks and Open Space		● Yes ○ No
Municipal Building	~	Yes ○ No
Stormwater System Maintenance	_	■ Yes ○ No
Vehicle and Fleet Maintenance	G	Yes O No
Other	O 37 A 31-	O Yes No

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$

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

	SPD	ES ID					
Name of MS4/Coalition Village of Hastings-on-Hudson	N	YR	2	0 .	A 2	2 1	9
2. Provide the following information about municipal operations good	od ho	ousek	eep	ing	pro	gra	ms:
Parking Lots Swept (Number of acres X Number of times swept)		# Acr	es			1 2	0
 Streets Swept (Number of miles X Number of times swept) 		# Mil	les			1 6	8
Catch Basins Inspected and Cleaned Where Necessary			# [2 0	0
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary			#				
O Phosphorus Applied In Chemical Fertilizer		# LI	os.				
O Nitrogen Applied In Chemical Fertilizer		# LI	os.				
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)		Acre	s				•
3. How many stormwater management trainings have been provide	d to 1	muni	cipa	l er	nplo	yee	:S
during this reporting period?							1
4. What was the date of the last training?	0 5	/ 0	7	/ [2	0 1	. 5
5. How many municipal employees have been trained in this reporti	ng p	eriod	?				2
6. What percent of municipal employees in relevant positions and d stormwater management training?	epar	tmen	ts re	ecei [- 1	5 C) %

This report is being submitted for the reporting period ending March 9, 2 0 1 6

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	_=	NYR	2 0 A 2 1 9
7. Evaluating Pro	gress Toward Measurable (Goals MCM 6		
identified in your St	ort on your progress and proj tormwater Management Prog itional pages as needed.	ject plans toward ram Plan (SWMI	achieving measurab PP), including requi	ole goals rements in Part
A. Briefly summar	rize the Measurable Goal id	lentified in the S	WMPP in this rep	orting period.
Number of Catch B	Basins Inspected and Cleaned	•		
B. Briefly summar Goal.	rize the observations that in	ndicated the over	all effectiveness of	f this Measurable
200 Catch Basir	ns Inspected and Cleaned as r	necessary this rep	orting period.	
				. 10
C. How many tim	es was this observation mea	asured or evalua	ted in this reportir	ig period?
			(ex	: samples/participants/events
D. Has your MS4	made progress toward this	measurable goa	l during this repor	ting period? ● Yes ○ No
E. Is your MS4 or	n schedule to meet the dead	line set forth in	the SWMPP?	• Yes O No
	rize the stormwater activiti ting cycle (including an imp			
Continue catch bas	sin cleaning, sweeping and ot	ther infrastructure	maintenance activi	ities.

	<u>M54 Annua</u>	l Report Form	
ii subinitting uns forn	•	porting period ending t on behalf of a coalition	
			SPDES ID
ame of MS4/Coalition			N Y R 2 0
Additional Waters	shed Improvemen	t Strategy Best Ma	nagement Practices
he information in this section i	is being reported (check	cone):	
On behalf of an individual M		·	
On behalf of a coalition			
How many MS4s	s contributed to this re	port?	
IS4s must answer the ques	stions or check NA a	s indicated in the table	helow.
1545 must answer the ques	tions of check 14A a.	indicated in the tubic	bolowi
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	1004557 10 01 0	10.11.12	- Phosphorus
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9 1,2,3,4,7a-d,8a,8b,9	10,11,12 5,10,11,12	Phosphorus
Traditional Non-Land Use Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	1,2,774-4,04,00,7	-	-
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	-	-	-
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary	-	-	-
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
* 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1		-	Phosphorus
Oscawana Lake Watershed	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	PROSUBORIS
Oscawana Lake Watershed Traditional Land Use	1 1 6 7a d 9a 0		
Oscawana Lake Watershed Traditional Land Use Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oscawana Lake Watershed Traditional Land Use Traditional Non-Land Use Non-Traditional	1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9		
Oscawana Lake Watershed Traditional Land Use Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12	Phosphorus
Oscawana Lake Watershed Traditional Land Use Traditional Non-Land Use Non-Traditional LI 27 Embayments		2,3,5,8b,10,11,12	Phosphorus Phosphorus

This report is being submitted for the reporting period ending March 9, If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Y R 2 0 Name of MS4/Coalition 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? O Yes \bigcirc No \bigcirc 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? % 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 O Yes O No O N/A disturb five thousand square feet or more? 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 O No O N/A O Yes Standards? 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? ○ N/A O Yes O No 7b. How many projects have been sited in this reporting period? 7c. What percent of the projects included in 7b have been completed in this reporting period? % 7d. What percent of projects planned in previous years have been completed? O 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? O Yes O No O 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? O Yes O No O N/A

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SPDES ID

N Y R 2 0

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