MS4 Annual Report Cover Page

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

This	cover	page	must	be comp	oleted	by the	report	preparer.
Join	t repoi	rts rec	quire (only one	cover	page.	i	

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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 comer.

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OR

O This report is being submitted on behalf of a Single Entity

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

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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.

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MS4 Annual Report Cover Page

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

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

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

	SPI	DES	ID						
Name of MS4 Village of Hastings-on-Hudson	N	Y	R	2	0	A	2	1	9
Each MS4 must submit an MCC form.									
Section 1 - MCC Identification Page									
Indicate whether this MCC form is being submitted to certify endorsement or a	ccep	otan	ce c	of:					
 An Annual Report for a single MS4 									
○ A Single Entity (Per Part II.E of GP-0-10-002)									
O A Joint Report									
Joint reports may be submitted by permittees with legally binding	g ag	gree	me	nts.					
If Joint Report, enter coalition name:		т—					-		_
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MCC form for period ending March 9, 2 0 2 0

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

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

- 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

First Name Mary Beth	MI Last Name Murphy
Title	
V i l l a g e M a n a g e r	
Address	
7 Maple Avenue	
City	State Zip
H a s t i n g s - o n - H u d	s o n N Y 1 0 7 0 6 -
eMail	
eMail V i 1 1 a g e M a n a g e r	@ H a s t i n g s g o v . o r g
	@ H a s t i n g s g o v . o r g

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

		 SPD.	<u>ES</u>	ID						
Name of MS4	Village of Hastings On Hudson	N	Y	R	2	0	A	2	1	9

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).

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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:

- O Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name C h a r l e s	MI	Last Name M i n o z z i
Title		
Building Insp	ecto	r
Address		
7 Maple Aven	ıe	
City		State Zip
	I u d s o i	State Zip N Y 1 0 7 0 6 -
	I u d s o i	
HastingsOn		
Hastings On :		N Y 1 0 7 0 6 -

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

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Name of MS4	Village of Hastings On Hudson		N	Y	R	2	0	A	2	1	9

Section 2 - Contact Information

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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:

- O Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name D o 1 p h	MI Last Name R o t f e 1 d
Title	
V . P . , A I E n g i n e e	rs, Inc., P.C.
Address	
5 7 0 T a x t e r R o a d	
City	State Zip
Elmsford	N Y 1 0 5 2 3 -
eMail	
d o 1 p h @ d r e p c . c o m	
Phone	County
(914)631-8600	Westchester

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

	SPDES ID
Name of MS4 Village of Hastings-on-Hudson	N Y R 2 0 A 2 1 9
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all pern	nit requirements during this reporting
period?	• Yes O No
If Yes, complete information below.	
Submit a separate sheet for each partner. Information provided accepted. If your MS4 cooperated with a coalition, submit one	
coalition. It is not necessary to include a separate sheet for each	
If No, proceed to Section 4 - Certification Statement.	
Partner/CoalitionName	
County of Westchester	
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
Information Technolog	Y N Y R 2 0
Address	
1 4 8 Martine Avenue	
City Sta	
White Plains N	Y 1 0 6 0 1 -
eMail	
s t w 1 @ w e s t c h e s t e r g o v . c	0 m
Phone Legally	Binding Agreement in accordance
	?-0-08-002 Part IV.G.?
What tasks/responsibilities are shared with this partner (e.g. MM1	School Programs or Multiple Tasks)
O MM1	
O MM2	
• MM3 Mapping	
O MM4	
O MM5	
● MM6 M a p i n g	
Additional tasks/responsibilities	
Watershed Improvement Strategy Best Management Practices	s required for MS4s in impaired
watersheds included in GP-0-08-002 Part IX.	, -

Name of MS4 Village of Hastings On Hudson

MS4 Municipal Compliance Certification (MCC) Form

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

SPDES ID

N Y R 2 0 A 2 1 9

Section 3 - Partner Information Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? • Yes O No
If Yes, complete information below.
Submit a separate sheet for each partner. Information provided in other formats will not be
accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the
coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.
If No, proceed to Section 4 - Certification Statement.
Partner/CoalitionName
Saw Mill River Coalition
Partner/Coalition Name (con't.) SPDES Partner ID - If applicable
N Y R 2 0
Address
2 2 Main Steet
City State Zip
Y o n k e r s N Y 1 0 7 0 1 -
eMail
a n n m a r i e @ g r o u n d w o r k h v . o r g
Phone I applie Disting Agreement in accordance
Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? • Yes • No
What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks
• MM1 General Stormwater Education
O MM2
O MM3
● MM4 Land Use
O MM5
• MM6 Habitat Restoration
Additional tasks/responsibilities
O Watershed Improvement Strategy Best Management Practices required for MS4s in impaired
watersheds included in GP-0-08-002 Part IX.

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

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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 Mary Beth	MI	Last Name Murphy
Title (Clearly print title of individual signing report) V i 1 1 a g e M a n a g e r		
Signature		
May Betsleys		Date

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 2 0

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	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	 Vehicle Washing
Storm Drain Marking	Water Conservation
• Green Infrastructure/Better Site Design/Low Impact Development	Wetland Protection
Other:	○ None
Other	
2. Specific audiences targeted during this reporting period:	
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 2 0 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 2 0

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SPDES ID

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$

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

C. How many times was this observation measured or evaluated in this D. Has your MS4 made progress toward this Measurable Goal during E. Is your MS4 on schedule to meet the deadline set forth in the SWM F. Briefly summarize the stormwater activities planned to meet the goat the next reporting cycle (including an implementation schedule). Continue with cable TV spots and literature distribution. Continue displays sites. Invite public participation as well as participation in outside activitie Coalition Cleanup.	this reporting period? • Yes O No PP? • Yes O No als of this MCM during s in Village Hall and other
 D. Has your MS4 made progress toward this Measurable Goal during E. Is your MS4 on schedule to meet the deadline set forth in the SWM F. Briefly summarize the stormwater activities planned to meet the goal 	(ex.: samples/participants/event this reporting period? • Yes O No PP? • Yes O No
D. Has your MS4 made progress toward this Measurable Goal during	(ex.: samples/participants/event this reporting period? • Yes • No
	(ex.: samples/participants/event this reporting period?
C. How many times was this observation measured or evaluated in this	1
C. How many times was this observation measured or evaluated in this	
Public Service Cable Television Spots run with periodic stormwater informencourages cleanup after pets. Village calendars are mailed to 3567 housel stormwater management information and recycling inserts.	
B. Briefly summarize the observations that indicated the overall effecti Goal.	
Continuing to advance the public's understanding of stormwater managem literature, use of media including the village website and cable television as	
A. Briefly summarize the Measurable Goal identified in the SWMPP in	n this reporting period.
Use this page to report on your progress and project plans toward achieving identified in your Stormwater Management Program Plan (SWMPP), includ III.C.1. Submit additional pages as needed.	
4. Evaluating Progress Toward Measurable Goals MCM 1	
Name of MS4/Coalition Village of Hastings-on-Hudson 4. Evaluating Progress Toward Measurable Goals MCM 1	N Y R 2 0 A 2 1 9

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 0 \end{vmatrix}$

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
Minimum Control Measure 2.	Public In	VO.	lven	1en	t/F	ar	tic	ipa	tio	n			
The information in this section is being reported (check	k one):												
On behalf of an individual MS4													
On behalf of a coalition How many MS4s contributed to this r	eport?												
				£	ň								
1. What opportunities were provided for publi development, evaluation and improvement of				_						an	ı		
(SWMP) Plan during this reporting period?					-	,			- 0				
Cleanup Events						# I	Even	its					1
Comments on SWMP Received					#(om	men	its					_
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O Storm Drain Markings						#]	Drai	ns					
O Stakeholder Meetings					#	Att	ende	es				Ì	
O Volunteer Monitoring						#]	Ever	nts					
Other:													
2. Was public notice of availability of this ann	ual report a	and	Sto	ımv	vat	er i	Ma	nag	em	ent	t		
Program (SWMP) Plan provided?	•								-	Υe		0	No
● List-Serve						#	In L	ist		2	5	0	0
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O Other:													
• Web Page URL: Enter URL(s) on the following	two pages.												

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

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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, $\begin{vmatrix} 2 & 0 \end{vmatrix}$ 2

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

SPDES ID

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	3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?																														
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 0 \end{vmatrix}$

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

		SPD	ES II)					
Name of MS4/Coalition Village of Hastings-on-Hudson		N	YR	2	0	A	2	1	9
4.a. If this report was made available on the internet, what da	ite was it	t p o	sted'	?					
Leave blank if this report was not posted on the internet.	0	5	/ 1	4]/	2	0	1	9
4.b. For how many days was/will this report be posted?							3	6	5
If submitting a report for single MS4, answer 5.a If submitt	ing a join	nt re	port,	ans	wei	r 5.	b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting perio	od?	/[1	4	• /	Ye	% 0	1	No 9
If No, is one planned?					0	Ye	×s	0	No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	ıtin	g to 1	his	-				_
this reporting period?					•	Υe	žS	0	No
If No, is one planned for each?					O	Υe	es :	0	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					C	Υe	es	9	No

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$

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
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed.	PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
Residents are encouraged to participate in village wide cleanups and assisting with providing plantings in public areas. Residents River Coalition Cleanup.	
B. Briefly summarize the observations that indicated the ove	erall effectiveness of this Measurable
Saw Mill River cleanup held April, 2019. Residents continue to	participate in cleanup efforts.
C. How many times was this observation measured or evalua	ated in this reporting period?
	1
D. Has some MCd made was successful this manner than	(ex.: samples/participants/events;
D. Has your MS4 made progress toward this measurable goa	H during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in	
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to m the next reporting cycle (including an implementation sch	3
Continue community outreach and participation. Continue clear annual Saw Mill River Coalition Cleanup.	nups. Continue participation in
	, h

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 & 0 \end{vmatrix}$ 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 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
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	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
○ Garbage Truck Washouts	Septic Maintenance
○ Hospitals	O Swimming Pools
○ Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	• Vehicle Maint./Repair Shops
Other:	O None
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 0 \end{vmatrix}$ 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	O Inflow/Infiltration
○ Failing Septic Systems	O Pump Station Failure
O 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?	d illegal connections have been detected during this
5. How many illicit discharges have been	en 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 value of the Value	veb? ○ Yes • No
URL Please provide specific address of page	where map(s) can be accessed - not home page.
URL	

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

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SPDES ID

Name of MS4/Coalition	Village of Hastings-on-Hudson		N Y R 2 0 A	2 1 9
12. Evaluating Pro	gress Toward Measurable Goals MC	М 3		
Use this page to repidentified in your S	port on your progress and project plans tormwater Management Program Plan (itional pages as needed.	oward achievin		
A. Briefly summa	rize the Measurable Goal identified i	the SWMPP	in this reporting	period.
Identify and elimin	ate any sources of illicit discharges			
	ž.			
B. Briefly summa Goal.	rize the observations that indicated t	ne overall effec	ctiveness of this N	leasurable
piping and attribute	e found. The NYSDEC Grant for mappers has been completed. The Village not will assist in the rapid location of any	w has maps of a	all stormwater drai	
C. How many tim	es was this observation measured or	evaluated in th	nis reporting peri	od?
				1
D. Has your MS4	made progress toward this measural	le goal during	-	s/participants/event eriod?
				Yes O No
E. Is your MS4 or	n schedule to meet the deadline set for	th in the SWN	MPP?	Yes O No
•	rize the stormwater activities planned ing cycle (including an implementati	_	goals of this MCM	l during
Continue annual or and document.	utfall inspections and respond immedia	ely to reports o	of illicit discharges	, mitigate
	ese are period			

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$ 2 $\begin{vmatrix} 0 & 2 \end{vmatrix}$ 0 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 Village of Hastings-on-Hudson Name of MS4/Coalition

	Minimum Control Measures 4 and 5.	
	Construction Site and Post-Construction Control	
• (on behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1a.	Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?	O No
1b.	.Has each Town, City and/or Village contributing to this report documented that the law equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?	
*	Analysis Workbook? Yes O No	ONI
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. ○ 09/2004 ● 03/2006	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 been reviewed in this reporting period?	2 2
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? • Yes • No	ONT
	If Yes, how many public comments were received during this reporting period?	8
5.	Does your MS4/Coalition provide education and training for contractors about the loca SWPPP process?	al • No

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

Notices of Violation	#		4	O No Authority
Stop Work Orders	#		2	O No Authority
• Criminal Actions	#		0	O No Authority
O Termination of Contracts	#			O No Authority
O Administrative Fines	#			O No Authority
O Civil Penalties	#			O No Authority
Administrative Orders	#		6	O No Authority
• Enforcement Actions or Sanctions	#		6	
O Other	#			O No Authority

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

SPDES ID

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1 0 0 %

O No O NT

Yes

Name of MS4/Coalition Village of Hastings-on-Hudson	N Y R 2 0 A 2 1 9
Minimum Control Measure 4. Construction Site	Stormwater Runoff Control
The information in this section is being reported (check one): On behalf of an individual MS4	
On behalf of a coalition How many MS4s contributed to this report?	
1. How many construction projects have been authorized for during this reporting period?	r disturbances of one acre or more
2. How many construction projects disturbing at least one a during this reporting period?	cre were active in your jurisdiction
3. What percent of active construction sites were inspected of	luring this reporting period? ONT

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

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS

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

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

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

Construction Stormwater Inspection Manual?

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

	SPDES	3 ID		
Name of MS4/Coalition Village of Hastings-on-Hudson	NY	R 2	0 A	2 1 9
6. con't.:				
Submit additional pages as needed.				
● MS4/Coalition Office				
Department				
Building Department				
Address 7 Maple Avenue				
	Zip			
HastingsonHudson NY	1 0 7	0 6	-	
Phone				
(9 1 4) 4 7 8 - 3 4 0 0				
O Library				
Address				
City	Zip	1		
Phone] - 🔲	
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Other				
Address		TT		
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Phone				
O Web Page URL(s): Please provide specific address where SWPPPs can	be access	ed - not	home	oage.
URL				
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This report is being submitted for the reporting period ending March 9, 2 0 2 0

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
7. Evaluating Progress Toward Measurable Goals MCM 4	
7. Evaluating Hogicss Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward achieving meas identified in your Stormwater Management Program Plan (SWMPP), including re III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this	reporting period.
Number of Construction Projects over 1 acre underway this reporting period	
B. Briefly summarize the observations that indicated the overall effectivenes	ss of this Measurable
2 projects over 1 acre underway this reporting period	
C. How many times was this observation measured or evaluated in this repo	orting period?
C. How many times was this observation measured of evaluated in this repo	nting period:
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this re	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	● Yes ○ No
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).	this MCM during
Continue to administer and monitor all projects over 1 acre as per legislation and requirements	d SWPPP

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$ 2 $\begin{vmatrix} 0 & 2 \end{vmatrix}$

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-o	n-Hudson		SPDES N Y	
Minimum	Control Mea	sure 5. Post-	Constructio	n Stormwate	er Management
The information in the On behalf of an income On behalf of a coal How m	lividual MS4	•			
1. How many and w MS4/Coalition in					
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	es				
O Filter Systems					
O Infiltration Basins					
Open Channels			1		
Ponds			. 2		
O Wetlands					
Other		2			
2. Do you use an o BMPs, inspecti			base, spreads	heet) to track p	oost-construction • Yes • No
3. What types of a Development/E		_		-	w Impact
Building Codes	• Municipal C	Comprehensive P.	lans		
Overlay Districts	Open Space	Preservation Pro	gram		
Zoning	• Local Law o	or Ordinance			
○ None	O Land Use R	egulation/Zoning			
O Watershed Plans	Other Comp	rehensive Plan			
Other:					

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

		SPD	ESI	D						
Nan	ne of MS4/Coalition Village of Hastings-on-Hudson	N	Y	2	2	0	A	2	1	9
	. Are the MS4s contributing to this report involved in a regional/watershe	ed w	ide _l	pla	nn	_	eff Ye			No
4b.	. Does the MS4 have a banking and credit system for stormwater manage	m en	t pr	ac	tice		Ye	s		No
4c.	Do the SWMP Plans for each MS4 contributing to this report include a and approval of banking and credit of alternative siting of a stormwater					pr		ice'	?	No
4d.	. How many stormwater management practices have been implemented a reporting period?	s pa	rt o	f tl	his	sys	tem	in	thi 2	S

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$

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Name of MS4/Coalition Village of Hastings-on-Hudson SPDES ID N Y R 2 0 A 2 1 9	
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.	
Number of Best Management Practices Inventoried this reporting period	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.	
2 new BMP's came on line this reporting period	
C. How many times was this observation measured or evaluated in this reporting period?	
1	
(ex.: samples/participants/eve	nts)
D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes • No	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	
Yes O No	
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	
Continue to Inventory and Monitor Best Management Practices as they come on line. Continue to monitor for compliance with SWPPP's and BMP's inventoried.	

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	SPD	ES	\mathbb{D}						
Name of MS4/Coalition Village of Hastings-on-Hudson	N	Y	R	2	0	A	2	1	9

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check	c one):			
On behalf of an individual MS4				
On behalf of a coalition				
How many MS4s contributed to this re	port?			
		••		
1. Choose/list each municipal operation/facility				
Pollutants of Concern to the MS4 system. For	_			
operation/facility has been addressed in the				
Program(SWMP) Plan and whether a self-a		-	_	
reporting period. A self-assessment is perform				llutants
potentially generated by the permittee's oper		-	•	
effectiveness of existing programs and 3) id			-	
that will be addressed by the pollution preve	ention and	good house	ekeeping program,	, if it's
not done already.				
			Self-Assessm	ent
			Operation/Activity	/Facility
			Operation/Activity performed within t	
Operation/Activity/Facility A	ddressed i	n SWMP?	performed within t	
Operation/Activity/Facility A			performed within t years?	
• • • • • • • • • • • • • • • • • • • •	• Yes	○ No	performed within t vears? Yes	the past 3
Street Maintenance	• Yes	○ No ○ No	performed within to vears? Yes Yes Yes	O No
Street Maintenance	• Yes • Yes • Yes	○ No ○ No ○ No	performed within to vears? Yes Yes Yes Yes Yes	O No O No
Street Maintenance Bridge Maintenance Winter Road Maintenance	• Yes • Yes • Yes • Yes	NoNoNoNo	performed within to vears? Yes Yes Yes Yes Yes Yes	No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage	• Yes • Yes • Yes • Yes • Yes • Yes	NoNoNoNoNo	performed within temperature vears? • Yes • Yes • Yes • Yes • Yes • Yes • Yes	No No No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management	• Yes • Yes • Yes • Yes • Yes • Yes • Yes	NoNoNoNoNoNoNo	performed within to vears? • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	No No No No No No No No No No No No No N
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No	performed within to vears? • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	No No No No No No No No No No No No No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage. Solid Waste Management. New Municipal Construction and Land Disturbance	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No	performed within temperature vears? • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	No No No No No No No No No No No No No N
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance Marine Operations Hydrologic Habitat Modification	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No O No O No O No	performed within to years? Yes Yes Yes Yes Yes Yes Yes Yes Yes Ye	No No No No No No No No No No No No No N
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance Marine Operations Hydrologic Habitat Modification Parks and Open Space	Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	O No O No O No O No O No O No O No O No O No O No O No O No O No	vears? Yes Yes	 No No No No No No No No No No No No No No No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance Marine Operations Hydrologic Habitat Modification	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	 ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No 	performed within temperature vears? Yes Yes Yes Yes Yes Yes Yes Yes Yes Ye	 No No No No No No No No No No No No No No No No No No No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage. Solid Waste Management. New Municipal Construction and Land Disturbance Right of Way Maintenance. Marine Operations. Hydrologic Habitat Modification. Parks and Open Space. Municipal Building.	Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	 ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No ○ No 	performed within to years? Yes Yes Yes Yes Yes Yes Yes Yes Yes Ye	 No No No No No No No No No No No No No No No No No No No No No No No

This report is being submitted for the reporting period ending March 9, 2 0 2 0 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	1	9
2. Provide the following information about municipal operations good	d h	ousek	eep	ing p	rog	ram	ıs:
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	es		1	6	8
 Catch Basins Inspected and Cleaned Where Necessary 			#		4	0	0
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary			#				
O Phosphorus Applied In Chemical Fertilizer		# Lt	os.				
O Nitrogen Applied In Chemical Fertilizer		# Lt	s.				
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)		Acres	s [
3. How many stormwater management trainings have been provided during this reporting period?	l to 1	munio	cipa	l emp	oloy	ees	1
4. What was the date of the last training?	4	/[1	9	/ 2	0	1	9
5. How many municipal employees have been trained in this reporting	ng p	eriod	?				1
6. What percent of municipal employees in relevant positions and de stormwater management training?	par	tment	s re	eceive	5	0	%

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

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Name of MS4/Coalition Village of Hastings-on-Hudson	SPDES ID N Y R 2 0 A 2 1 9
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward achieved in your Stormwater Management Program Plan (SWMPP), it III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWM	IPP in this reporting period.
Number of Catch Basins Inspected and Cleaned	
B. Briefly summarize the observations that indicated the overall e Goal.	ffectiveness of this Measurable
400 Catch Basins Inspected and Cleaned as necessary this reporting for mapping of stormwater conveyance system piping and attributes by Village now has maps of all stormwater drainage infrastructure. This of any illicit discharges detected.	has been completed. The
C. How many times was this observation measured or evaluated i	n this reporting period?
D. II. MC4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(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 S	WMPP?
	Yes O No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedule	5
Continue catch basin cleaning, sweeping and other infrastructure mai	ntenance activities.

	MS4 Annua	al Report Form	
-	ng submitted for the re		2
Name of MS4/Coalition			SPDES ID N Y R 2 0
Additional Water	ershed Improvemen	nt Strategy Best Ma	nagement Practices
The information in this section	on is being reported (check	k one):	
On behalf of an individualOn behalf of a coalition			
How many MS	S4s contributed to this ro	eport?	
MS4s must answer the qu	estions or check NA a	s indicated in the table	e below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	-	-	
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed		-	-
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use Non-Traditional	1,6,7a-d,8a,9 1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12 2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	1,0,7a-0,8a,9	2,3,4,3,80,10,11,12	Phosphorus
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 2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
Oyster Bay		2,0,0,00,10,11,12	- Inogration
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary	•	•	-
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed Traditional Land Use	1,4,6,7a-d,8a,9	22505101112	Phosphorus
		2,3,5,8b,10,11,12	
		-,-,-,-,-,-,-,-,-	-
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathog ens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens
Traditional Non-Land Use Non-Traditional L127 Embayments Traditional Land Use Traditional Non-Land Use Non-Traditional 1. Does your MS4/Coalir phosphorus/nitrogen/ 2. Has 100% of the MS4 If N/A, go to question is	1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9 tion have an education pathogens on waterbook	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12 5,6,8a,8b 5,6,8a,8b 5,6,8a,8b,10,11,12 a program addressing i dies?	Phosphorus Phosphorus Pathogens Pathogens Pathogens Pathogens O Yes O No O in GIS? O Yes O No O
Estimate what percenta	ige was mapped in this r	reporting period.	

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 N Y R 2 0 Name of MS4/Coalition 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? 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 disturb five thousand square feet or more? O Yes O No 6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? O Yes O No O N/A 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? O Yes \bigcirc No \bigcirc N/A 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