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 cover page.

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Choose one:

○ This report is being submitted on behalf of an individual MS4	\Box	This	report is	being	submitted	on behalf	of ar	n individual	MS4.
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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)

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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 1 6

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

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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 acceptance of:

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

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

If Joint Report, enter coalition name:

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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

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- 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.

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- O Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

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

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- 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

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 T	Name of	MS	4	Γον	wn	of	F	arr	nin	gt	on												SPL N	Y Y	R	2	0	А	1	1	0
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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.

Peter V	I n g a 1 s b e
Title (Clearly print title of individual signing report)	
Town Supervisor	
Signature	
Rhlas	Date 1 2 1 2 0 1

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

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

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Name of MS4 Town of Macedon	N	Y	R	2	0	А	3	9	1

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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

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Section 2 - Contact Information

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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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MCC form for period ending March 9, 2016

Name of MS4 Town of Macedon	SPDES ID NYR20A391
Section 4 - Certification Statement	
"I certify under penalty of law that this document and all attachments direction or supervision in accordance with a system designed to assu properly gathered and evaluated the information submitted. Based on persons who manage the system, or those persons directly responsible the information submitted is, the best of my knowledge and belief, tru aware that there are significant penalties for submitting false informat fine and imprisonment for knowing violations."	re that qualified personnel my inquiry of the person or e for gathering the information, ne, accurate, and complete. I am tion, including the possibility of
This form must be signed by either a principal executive officer or rar authorized representative of that person as described in GP-0-08-002	
First Name Cassandra MI Last Name Pagano	
Title (Clearly print title of individual signing report)	
Town Supervisor	
Signature	
Cassandra n. Pagano	Date 0 4 / 1 2 / 2 0 1 6

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

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

	SPI	DES	SID						
Name of MS4 Village of Macedon	N	Y	R	2	0	A	2	5	8

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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

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Name of MS4 Village of Macedon	N	Y	R	2	0	А	2	5	8

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

Name of MS4 Village of Macedon N Y R	2	0	А	2	5	8

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- 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

	SP	DES	SID						
Name of MS4 Village of Macedon	N	Y	R	2	0	A	2	5	8
Section 4 - Certification Statement									

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

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

First Name	MI	Las	st Na	ame							
Marie		C	r	a	m	е	r				
Title (Clearly print title of individual signing report)											
Mayor											
Signature											
M. Cramer, mayor/CEO							Date	1 0	1 5	20	, /

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

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

Name of MS4 Ontario County Highway Department

SPI	DES	ID						
N	Y	R	2	0	A	4	0	0

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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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

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- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
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- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
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MCC form for period ending March 9, 2 0 1 6

Name of MS4 Ontario County Highway Department

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

Section 3 - Partner Information Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting													
Name of MS4 Ontario County Highway Department N Y R 2 0 A 4 0 0													
Section 3 - Partner Information													
Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? • Yes • No													
If Yes, complete information below.													
Submit a separate sheet for each partner. Information provided in other formats will not be													
1 ,													
•													
ii No, proceed to Section 4 - Certification Statement.													
Partner/CoalitionName													
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 T													
Legally Binding Agreement in accordance													
$(5 8 5)$ $3 9 6$ - $1 4 5 0$ with GP-0-08-002 Part IV.G.? • Yes \bigcirc No													
What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)													
● MM1 Public Education & Outreach													
• MM1 P u b l i c E d u c a t i o n & O u t r e a c h • MM2 P u b . I n v o l v e m e n t / P a r t i c i p a t i o n													
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MCC form for period ending March 9, 2 0 1 6

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Name of MS4	ONTARIO COUNTY	N	Y	R	2	0	A	4	0	0

Section 4 - Certification Statement

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

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

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Name of MS4 Town of Ontario		N	Y	R	2	0	А	0	9	8

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

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Section 2 - Contact Information

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

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Name of MS4 Town of Ontario	N	Y	R	2	0	A	0	9	8

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

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Section 3 - Partner Information Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? 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 T																														
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MS4 Municipal Compliance Certification(MCC) Form

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

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Name of MS4 Town of Ontario		

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

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

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Name of MS4 Town of Victor	N	Y	R	2	0	A	2	4	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 acceptance of:

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

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

If Joint Report, enter coalition name:

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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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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 Victor	N	Y	R	2	0	А	2	9	0

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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 Victor	N	Y	R	2	0	A	2	9	0

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

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

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Name of MS4 Town of Walworth	N	Y	R	2	0	А	2	9	3

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

If Joint Report, enter coalition name:

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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:

- Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
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- 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
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

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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

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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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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

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

Name of MS4 Wayne County Highway Department

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Section 1 - MCC Identification Page

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

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Section 2 - Contact Information

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

Name of MS4 Wayne County Highway Department

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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."

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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

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

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Name of MS4/Coalition The On	ntario-Wayne Stormwater Coalition	N	Y	R	2	0		

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 1 \end{vmatrix}$

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

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Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition N Y	R	2	0		

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? 	9
1. Targeted Public Education and Outreach Best Manageme	ent Practices
Check all topics that were included in Education and Outreach de	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	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
Stormwater Management	Roadsigns
Other2. Specific audiences targeted during this reporting period:	
Public Employees Contractors	
ResidentialDevelopers	

Other:

Other

Businesses

Restaurants

d e n t

• General Public

• Industries

Agricultural

S

Name of MS4/Coalition

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.

The Ontario-Wayne Stormwater Coalition

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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.

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Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition	N	Y	R	2	0		

4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Promote the stormwater coalition and provide public education and outreach programs in order to educate and encourage interest and comments from the public. This was accomplished through: Public Education Displays, brochures at community events (i.e. Farmers Markets) and at MS4 buildings, promoting the OWSC website (w/email link for public comments) in newsletters, direct mailings to MS4 residents, public meetings, road signs, and informational materials.

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

MS4 officials have noted an increase in attendance at Coalition booths and at community events. Positive feedback has been received from many residents. Informational materials have consistently been distributed and have required increased replenishment. The Coalition saw an increased amount of people responding and participating in clean up events.

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D. Has your MS4 made progress toward this Measurable Goal during this reporting period?

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	Vec	\bigcirc	No

(ex.:

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

_		_	
	Yes	()	No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to expand outreach via various community events (ie. July 4th Celebration, spaghetti dinners), promote the Coalition website where the MS4 Annual Report will be displayed. Explore updating website to allow Coalition to measure annual hits. Continue replenishing educational material supplies and continue to create new educational materials (ie. OWSC Vehicle Decals). Explore other avenues for advertising such as student scholarships.

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

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Name of MS4/Coalition The Ontario Wayne Stormwater Coalition			N	YR	2	0				
Minimum Control Measure 2.	Public Inv	volveme	nt/I	Partic	ipa	<u>ıtic</u>	<u>)n</u>			
The information in this section is being reported (check	one):									
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1. What opportunities were provided for public development, evaluation and improvement of (SWMP) Plan during this reporting period?	c participati f the Storm	water Ma	ınaş				ran	n		
Cleanup Events				# Ever	nts					9
O Comments on SWMP Received			#(Commer	its					0
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Storm Drain Markings				# Drai	ns		T	1	2	5
O Stakeholder Meetings			#	Attende	es		T			0
O Volunteer Monitoring				# Ever	ıts		T			0
● Other: M t g . r e s . @ c o	n s t r	r u c t	i	o n		s	i	t	е	s
2. Was public notice of availability of this annu Program (SWMP) Plan provided?	al report ar	nd Storm	wat	er Ma	nag	,	ent Ye		0	No
• List-Serve				# In L	ist			3	6	5
Newspaper Advertising			#	Days R	ın				3	7
○ TV/Radio Notices			#	Days R	ın					0
• Other: Town/Village B	oard	d M e	e	t i	n	g	s			

Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition

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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Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 1 \end{vmatrix}$

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Name of MS4/Coalition The Ontario Wayne Stormwater Coalition

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 0 \end{vmatrix}$

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	SPDES ID
Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition	N Y R 2 0
4.a. If this report was made available on the internet, what dat	te was it posted?
Leave blank if this report was not posted on the internet.	0 5 / 1 8 / 2 0 1 6
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 submitti	ng a joint report, answer 5.b
5.a. Was an Annual Report public meeting held in this reporti If Yes, what was the date of the meeting?	ng period? ○ Yes • No
If No, is one planned?	○ Yes • No
5.b. Was an Annual Report public meeting held for all MS4s of	contributing to this report during
this reporting period?	○ Yes • No
If No, is one planned for each?	○ Yes ● No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.	○ 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.

	SPDES II)			
Name of MS4/Coalition The Ontario Wayne Stormwater Coalition	N Y R	. 2	0		

7. Evaluating Progress Toward Measurable Goals MCM 2

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

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

Promote increased public involvement/participation through: community events (i.e. Hang Around Victor Days, Earth Day), academic events, distribution of educational materials, volunteer opportunities, and the coalition website. The Town of Ontario for example supports a Watershed Committee assisting residents with stormwater issues and the Town of Walworth posts stormwater information in their Town Topics three times a year, reaching 6000 residents each publication.

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

The Coalition provided additional clean up events from the previous year. The Coalition noted an increase in attendance at community meetings and participation in storm drain marking. There was also an increase in plantings from the previous year. Volunteers continue to participate in local events; for example, volunteers cleaned roadsides through the Town of Farmington's "Adopt a Highway" program.

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D. Has your MS4 made progress toward this measurable goal during this reporting period?

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E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

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VAC		
Yes	\bigcirc No	,

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Stormwater Coalition will continue to provide clean-up events and offer volunteer opportunities to the public. The website will continue to list upcoming events which provide public involvement / participation opportunities throughout the next reporting period and include a link to view/comment on the MS4 Annual Report. The individual MS4's have link's on their own websites directing the public to the OWSC website for stormwater related information.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 1 \end{vmatrix}$

Name of MS4/Coalition The Ontario-Wayne Stormwater Co	SPDES ID valition N Y R 2 0							
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination							
The information in this section is being reported ○ On behalf of an individual MS4 ● On behalf of a coalition How many MS4s contributed to								
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reporting period (outfall reconnaissand	7 0 1							
sa. What types of generating sites/sewersh reporting period?	heds were targeted for inspection during this							
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Building Maintenance	○ Marinas							
Churches	O Metal Plateing Operations							
 Commercial Carwashes 	Outdoor Fluid Storage							
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance							
Construction Vehicle Washouts	○ Printing							
Cross-Connections	 Residential Carwashing 							
Distribution Centers	Restaurants							
 Food Processing Facilities 	O Schools and Universities							
 Garbage Truck Washouts 	 Septic Maintenance 							
O Hospitals	Swimming Pools							
O Improper RV Waste Disposal	Vehicle Fueling							
O Industrial Process Water	Vehicle Maint./Repair Shops							
Other:	○ None							
Irondequoit	C r e e k I n s p e c t i o n							
• Sewersheds:								
Fishers Run	(5 0 I n s p e c t i o n s)							

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 1 \end{vmatrix}$

Name of MS4/Coalition	The Ontar	rio-Wayı	ne Stori	mwater	Coali	tion									N	Y	R	2	0				
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● Illegal Dumping ○ Straight Pipe Sewer Discharges																							
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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, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 1 \end{vmatrix}$

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

		SPL	JE2	ID				
Name of MS4/Coalition	The Ontario-Wayne Stormwater Coalition	N	Y	R	2	0		

12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

Identify /detect and eliminate all potential illicit discharges (including dry weather discharges). Develop/update mapping systems that locate all outfalls within each MS4, including new expanded MS4 coverage areas. Send MS4 employees to IDDE training and educate the public about IDDE, how to identify illicit discharges and that if they do identify an illicit discharge to contact the Ontario-Wayne Stormwater Coalition to have it addressed.

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

25 illicit discharges were confirmed in the last reporting period and 100% were eliminated. This amount is 2.5 times greater than the previous reporting period where only 10 illicit discharges were confirmed and eliminated. The Coalition continues to map outfalls and noted a slight increase of 1% of outfalls mapped. The number of outfalls inspected and screened for dry weather discharges increased by 56% (394 to 704). The % of storm sewershed mapped increased from 50% to 69%.

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D. Has your MS4 made progress toward this measurable goal during this reporting period?

	Yes		No
\cup	res	\cup	INO

(ex.:

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

T 7		
VAC		
Yes	\bigcirc 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 identify outfalls and detect for illicit discharges. If an illicit discharge is detected, the source is to be identified and eliminated. Continue mapping storm sewershed boundaries. Several coalition members have hired a summer intern to continue to identify potential illicit discharges. The coalition has a GPS unit to map the outfalls and storm sewersheds and will continue to look for additional tools. Explore additional avenues of IDDE training for municipal staff.

SWPPP process?

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 1 \end{vmatrix}$

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

	SPDES ID	0	
Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition	N Y R 2	0	
Minimum Control Measures 4 and 5	5.		
Construction Site and Post-Construction (
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?			
How many MS4s contributed to this report? 9			
1a. Has each MS4 contributing to this report adopted a law, ordinanc	e or other re	zulatorv	
mechanism that provides equivalent protection to the NYS SPDES	•	_	
Stormwater Discharges from Construction Activities?		Yes	\bigcirc No
11. II	4 - J 4J	4 41 1	•
1b. Has each Town, City and/or Village contributing to this report doe equivalent to a NYSDEC Sample Local Law for Stormwater Management			
Sediment Control through either an attorney certification or using	_		ana
Analysis Workbook?	• Yes	-	\circ NT
If Yes, Towns, Cities and Villages provide date of equivalent NYS Sa	-	aw. 13/2006	○ NIT
	09/2004 • C	03/2006	O NT
2. Does your MS4/Coalition have a SWPPP review procedure in place	re?	• Yes	○ No
			O 110
3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) hav	ve been	
reviewed in this reporting period?			1 9
4. Does your MS4/Coalition have a mechanism for receipt and considerate the control of the contr	leration of p	ıblic	
comments related to construction SWPPPs?	• Yes	\bigcirc No	\circ NT
If Yes, how many public comments were received during this reporting	g period?		0
5. Does your MS4/Coalition provide education and training for contr	ractors about	the loca	ıl

● Yes ○ No

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

Notices of Violation	#		8	O No Authority
Stop Work Orders	#		1	O No Authority
O Criminal Actions	#			No Authority
○ Termination of Contracts	#		0	O No Authority
O Administrative Fines	#		0	O No Authority
O Civil Penalties	#		0	O No Authority
O Administrative Orders	#		0	O No Authority
O Enforcement Actions or Sanctions	#		0	
Other	#	1	0	O No Authority

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix}$ 1 $\begin{bmatrix} 6 & 1 \end{bmatrix}$

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

Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition	N Y R 2 0
Minimum Control Measure 4. Construction Site S	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?	disturbances of one acre or more
2. How many construction projects disturbing at least one acreduring this reporting period?	re were active in your jurisdiction 4 2
3. What percent of active construction sites were inspected du	
4. What percent of active construction sites were inspected me	
5. Do all inspectors working on behalf of the MS4s contributi Construction Stormwater Inspection Manual?	
6. Does your MS4/Coalition provide public access to Stormwa (SWPPPs) of construction projects that are subject to MS4	
If your MS4 is Non-Traditional, are SWPPPs of construction public review?	
If Yes, use the following page to identify location(s) where SW	PPPs can be accessed.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 1 \end{vmatrix}$

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

SPDES ID

Name	of M	IS4/	Coa	ılitio	on	The C	Ontar	io-W	ayne	Sto	rmwa	ater (Coali	tion									N	Y	R	2	0				
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• M					Offic	ce																									
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	City																	_				Zip									
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 1 \end{vmatrix}$

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	The Ontario-Wayne Stormwater Coalition	N	Y	R	2	0		

7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

Review and comment on the Erosion & Sediment Control Plans and SWPPPs for each project disturbing more than 1 acre to ensure they follow at a minimum the guidelines set forth in the NY SPDES General Permit. SWPPP inspections on all sites disturbing more than 1 acre are to be performed and the inspection reports are to be kept in the on-site copy of the SWPPP. Any site erosion control deficiencies are to be reported until they are eliminated.

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

100% of the construction sites with over an acre of disturbance have been visited more than once during the reporting period. Few issues were reported during this reporting period due to the MS4 site inspections and plan/SWPPP review process. The Coalition issued fewer Notices of Violations and Stop Work Orders during this reporting period compared to the previous reporting period.

C. H	ow many t	times wa	s this	observation	measured or	· evaluated	in this	reporting 1	period?
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D. Has your MS4 made progress toward this measurable goal during this reporting period?

0 1			
	Yes	\bigcirc	No

(ex.:

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

● 165 ○ 110		Yes	\circ	No
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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 review the Construction Erosion Control Plans and SWPPP's for all projects that disturb more than 1 acre. Continue site inspections for all projects that disturb more than 1 acre using trained in-house staff and contracted qualified inspectors (including Ontario County Soil & Waster Conservation District). Ensure all sites comply with the design of the approved SWPPP's and E&SC plan. Continue to educate developers and contractors at pre-construction meetings.

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.

		J -					_		SPDE	ES ID			
Name of MS4/Coalition	n The Ontario-Wayne S	Stormwater (Coalition						N Y	R	2 0		
Minimum	Minimum Control Measure 5. Post-Construct											geme	<u>ent</u>
The information in the	nis section is beir	ng reporte	ed (che	ck one):								
On behalf of an incOn behalf of a coa	lition		41.	,	ء ٦		9						
How n	nany MS4s cont	ributed t	o this	report	? [9						
1. How many and MS4/Coalition i	• • •						_		-		has yo	ur	
		# Invento	ried	Insp	# ecti	ons		Tim inta					
Alternative Practice	ces		3			3			3				
○ Filter Systems													
• Infiltration Basins			5			5			3				
Open Channels			5		5	8		1	0				
Ponds		7	4		6	1		4	9				
O Wetlands													
Other			1					3	2				
2. Do you use an BMPs, inspecti		_		abase	, sp	reads	sheet)	to t	rack]	post-		ructio Yes	on O No
3. What types of Development/F		-					_		ent Lo	w In	npact		
Building Codes	Municipal C	omprehe	nsive F	Plans									
Overlay Districts	Open Space	Preservat	tion Pr	ogram									
Zoning	• Local Law o	r Ordina	nce										
○ None	• Land Use R	egulation	/Zonin	g									
O Watershed Plans	Other Comp	rehensive	Plan										
Othory													

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NYS

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

Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition SPDES ID N Y R 2	2 0	
4a. Are the MS4s contributing to this report involved in a regional/watershed wide plan	O	
4b. Does the MS4 have a banking and credit system for stormwater management practi	○ Yes	No
40. Does the M54 have a banking and credit system for stormwater management practi	O Yes	No
4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for		l
and approval of banking and credit of alternative siting of a stormwater manageme	ent practice	?
and approval of banking and credit of alternative siting of a stormwater manageme	ent practice • Yes	
and approval of banking and credit of alternative siting of a stormwater management at the stormwater management practices have been implemented as part of the reporting period?	O Yes	• No
4d. How many stormwater management practices have been implemented as part of the reporting period?	Yes	No No this
4d. How many stormwater management practices have been implemented as part of the	Yes is system in	No No this

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.

	SPL	DES	ID				
Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition	N	Y	R	2	0		

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.

Identify and inspect all post-construction stormwater management practices. Update stormwater management inventories with the new facilities. Ensure that the construction of the post-construction stormwater management practice follows the design in the approved SWPPP. Monitor & maintain the post-construction stormwater management practices as necessary and per their individual SWPPP. Inspection reports are to be kept on file.

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

MS4 inspections of the post-construction stormwater management practices has led to an increase of maintenance of facilities. Maintenance increased 262% since the previous reporting period. The increased attention to the post-construction stormwater management practices and the continuously high number of inspections has led to a drop off in flooding issues and increased water quality at the discharge of the stormwater management practices.

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D. Has your MS4 made progress toward this measurable goal during this reporting period?

0				
	V	66	\bigcirc	Nο

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes	0	No
168	\cup	TNO

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 be proactive and update the inventories to include all post-construction stormwater management practices through March 9, 2017. Continue inspections and maintenance for all post-construction stormwater management practices as necessary and per the individual SWPPP's. Report and repair any deficiencies and work to eliminate them throughout the next reporting period. Explore ideas for increased self-reporting by owners of private facilities.

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

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	The Ontario-Wayne Stormwater Coalition	N	Y	R	2	0		

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? 	9

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 **Operation/Activity/Facility** vears? Addressed in SWMP? Street Maintenance..... 9 Yes ○ No • Yes \bigcirc No ○ No • Yes \bigcirc No Bridge Maintenance.... • Yes Winter Road Maintenance....

Yes ○ No • Yes \bigcirc No Salt Storage.

• Yes ○ No Yes \bigcirc No Solid Waste Management..... • Yes ○ No • Yes \bigcirc No New Municipal Construction and Land Disturbance.. • Yes ○ No Yes \bigcirc No Right of Way Maintenance.....

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

Yes \bigcirc No Other...... • Yes

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

	SPDES ID			
Name of MS4/Coalition The Ontario-Wayne Stormwater Coalition	N Y R 2	0		
2. Provide the following information about municipal operations go	od housekeep	ing pro	ogran	ns:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres		4	9
• Streets Swept (Number of miles X Number of times swept)	# Miles	1	6 2	9
 Catch Basins Inspected and Cleaned Where Necessary 	#	1	7 4	1
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		8	2
Phosphorus Applied In Chemical Fertilizer	# Lbs.		2 0	0
Nitrogen Applied In Chemical Fertilizer	# Lbs.	1	0 4	5
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.) 	# Acres of	7	8	6
3. How many stormwater management trainings have been provide	d to municipa	al empl	oyees	
during this reporting period?	•		2	3
4. What was the date of the last training?	0 3 / 0 2	/ 2	0 1	6
5. How many municipal employees have been trained in this reporti	ing period?		6	3
6. What percent of municipal employees in relevant positions and destormwater management training?	epartments r		3 7	%

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.

		SPL	ES	ID				
Name of MS4/Coalition	The Ontario-Wayne Stormwater Coalition	N	Y	R	2	0		

7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

Continue to increase Pollution Prevention / Good Housekeeping efforts. Continue to increase # of available education training programs offered and promote attendance by municipal employees. Train relevant MS4 personal as necessary and track employee training participation.

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

Most roads within the limits of the OWSC were swept at least once (1,629 miles), while some were swept multiple times. 1,741 catch basins were inspected/cleaned and 49 acres of parking lots were swept. These numbers are slightly higher than the previous reporting period. The number of stormwater trainings provided to employees increased significantly by almost 6 times (4 to 23) and the amount of employees trained increased by almost 4 times (16 to 63).

\mathbf{C}	How mony	times w	rog this ob	convetion	bournoom	OM OT	almatad	in this	nononting	noviod?
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samp	les/	part	ici	pant	s/events

D. Has your MS4 made progress toward this measurable goal during this reporting period?

01	-		
	Yes	\bigcirc	No

(ex.:

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

\bullet Yes \circ N

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Each MS4 within the coalition will continue the implementation of the adopted SWMPP. Complete all necessary inspections/maintenance/inventories by March 9, 2017. MS4 employees to continue to receive additional good housekeeping training throughout the next reporting period which ends March 9, 2017.