MS4 Annual Report Cover Page

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

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

SPI	DES	ID						
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Choose one:

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

Fill in SPDES ID in upper right hand corner.

Na	me o	of M	lS4																		
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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)

Nar	ne o	T S1	ngie	En	tity													

OR

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

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

Name of Coalition		
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MS4 Annual Report Cover Page

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

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 2

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Name of MS4	Village of Old Field		N	Y	R	2	0	А	4	0	7

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:

- 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 agreements.

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

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Name of MS4	Village of Old Field	N	Y	R	2	0	А	4	0	7

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
- 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 2 2

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Section 2 - Contact Information

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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).
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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 2 2

	SPDES ID	
Name of MS4 Village of Old Field	N Y R 2 0 A 4 0 7	
Section 3 - Partner Information		
Name of MS4 Village of Old Field N Y R 2 0 A 4 0 7		
Submit a separate sheet for each partner. Information provided i accepted. If your MS4 cooperated with a coalition, submit one s coalition. It is not necessary to include a separate sheet for each	heet with the name of the	
Name of MS4 Village of Old Field N Y R 2 0 A 4 0 7 Section 3 - Partner Information Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? O Yes No If Yes, complete information below. Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition. If No, proceed to Section 4 - Certification Statement. Partner/CoalitionName N Y R 2 0		
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable	
	N Y R 2 0	
Address		
Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?		
City State	e Zip	
Section 3 - Partner Information Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? ○ Yes ● No If Yes, complete information below. Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition. If No, proceed to Section 4 - Certification Statement. Partner/CoalitionName Partner/CoalitionName SPDES Partner ID - If applicable N Y R 2 0		
eMaii		
Phone		
Legally I		
What tasks/responsibilities are shared with this partner (e.g. MM1 S	School Programs or Multiple Tasks)?	
O MM1		
O MM2		
O MM3		
O MM4		
O MM5		
O MM6		
Additional tasks/responsibilities **Watershed Improvement Strategy Best Management Practices 1	required for MS4s in impaired	

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

Name of MS4 Village of Old Field	N	Z R	2	0	A	4	0	7

Section 4 - Certification Statement

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

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

First Name	MI	Last Name
Stephen	W	Shybunko
Title (Clearly print title of individual <u>signing</u> report)		
Mayor		
Signature		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, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$

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Name of MS4/Coalition Village	of Old Field	N	Y	R	2	0	А	4	0	7

Name of MS4/Coalition Villag	ge of Old Field	N Y R 2 0 A 4 0 7	
	Water Quality Trends		
The information in this sec	Water Quality Trends ormation in this section is being reported (check one): chalf of an individual MS4 chalf of a coalition How many MS4s are contributed to this report? sthis MS4/Coalition produced any reports documenting water quality trends atted to stormwater? If not, answer No and proceed to Minimum Control Measure		
On behalf of an individuOn behalf of a coalitionHow many MS4s			
related to stormwat One.	Water Quality Trends ation in this section is being reported (check one): f of an individual MS4 f of a coalition many MS4s are contributed to this report? is MS4/Coalition produced any reports documenting water quality trends It to stormwater? If not, answer No and proceed to Minimum Control Measure ● Yes ○ No see one of the following attached to the annual report e(s) where report(s) is/are provided below lease provide specific address of page where report(s) can be accessed - not home page. AL. W W O D D D D D D		
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$

Name of MS4/Coalition Village of Old Field	N Y R 2 0 A 4 0 7
Minimum Control Measure 1. Public Edu	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 de	uring this reporting period:
 Construction Sites 	Pesticide and Fertilizer Application
General Stormwater Management Information	Pet Waste Management
Household Hazardous Waste Disposal	O Recycling
Illicit Discharge Detection and Elimination	Riparian Corridor Protection/Restoration
O Infrastructure Maintenance	O Trash Management
Smart Growth	O Vehicle Washing
O Storm Drain Marking	Water Conservation
○ Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
Other:	O None
Other	
2. Specific audiences targeted during this reporting period:	
Public EmployeesContractors	
ResidentialDevelopers	
○ Businesses	
○ Restaurants ○ Industries	
Other: OAgricultural Other	

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

	Village of Old Field	SPDES ID N Y R 2 0 A 4 0 7
Name of MS4/Coalition	village of Old Field	
4. Evaluating Pro	gress Toward Measurable Goals MCM 1	
identified in your St	port on your progress and project plans toward tormwater Management Program Plan (SWM) itional pages as needed.	e e
A. Briefly summar	rize the Measurable Goal identified in the S	SWMPP in this reporting period.
Number of visits (i	.e., hits) on the stormwater management webp	page.
B. Briefly summar Goal.	rize the observations that indicated the over	rall effectiveness of this Measurable
	f visits to the stormwater management webpag	ge during the reporting period was
226.		
C. How many time	es was this observation measured or evalua	ted in this reporting period?
		(ex.: samples/participants/events
D. Has your MS4	made progress toward this Measurable Go	
F Is your MS4 on	schedule to meet the deadline set forth in t	● Yes ○ No the SWMPP? ● Yes ○ No
2. 15 your 1/154 on	i senedule to meet the deadline set forth in t	
•	rize the stormwater activities planned to me ing cycle (including an implementation scho	e e
Update stormwater	educational materials on the stormwater man	agement webpage, as necessary.

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

Name of MS4/Coalition Village of Old Field		N Y R	. 2 0	A 4	0 7
Minimum Control Measure 2.	Public Involv	ement/Parti	<u>cipati</u>	<u>on</u>	
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 re 	port?				
1. What opportunities were provided for public development, evaluation and improvement of (SWMP) Plan during this reporting period?	the Stormwate	er Managemen		; ram	
○ Cleanup Events		# Eve	nts		
 Comments on SWMP Received 		# Comme	nts		0
O Community Hotlines	Phone # (
Phone # ()	Phone # (<u> </u>		
Phone # ()	Phone # (<u> </u>		
Phone # ()	Phone #		—		
Phone # ()	Phone #		—		
Phone # ()	Phone # (<u> </u>		
O Community Meetings		# Attend	ees		
○ Plantings		Sq.	Ft.		
O Storm Drain Markings		# Dra	ins		
O Stakeholder Meetings		# Attend	ees		
O Volunteer Monitoring		# Eve	nts		
Other:					
2. Was public notice of availability of this annu Program (SWMP) Plan provided?	al report and S	tormwater Ma	_	nent Yes	○ No
○ List-Serve		# In I	ist		
Newspaper Advertising		# Days R	tun		7
○ TV/Radio Notices		# Days R	tun		
Other:					
• Web Page URL: Enter URL(s) on the following to	wo pages.	-			_

Name of MS4/Coalition

Village of Old Field

MS4 Annual Report Form

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

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

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MS4 Annual Report Form

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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 Old Field	N Y R 2 0 A 4 0	7
4.a. If this report was made available on the internet, what date	e was it posted?	
Leave blank if this report was not posted on the internet.	0 4 / 2 0 / 2 0 2	2
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 submitting	ng a joint report, answer 5.b	
5.a. Was an Annual Report public meeting held in this reporting 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 co	ontributing to this report duri	ng
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, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$

	SPDES ID
Name of MS4/Coalition Village of Old Field	N Y R 2 0 A 4 0 7
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.	
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
Number of public comments received on the annual report.	
B. Briefly summarize the observations that indicated the ove	rall effectiveness of this Measurable
Goal.	Tan effectiveness of this ividusarusic
No comments were received on the annual report.	
C. How many times was this observation measured or evalua	ated in this reporting period?
or 110 williams was this observation incasared or evalua-	
	(ex.: samples/participants/events,
D. Has your MS4 made progress toward this measurable goa	ll 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 me the next reporting cycle (including an implementation sch	0
Continue to make annual reports available to the general public.	

Name of MS4/Coalition

Village of Old Field

MS4 Annual Report Form

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

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SPDES ID

N Y R

2

	Minimum Control Measure 3 I	llicit Discharge Detection and Elimination
Th	the information in this section is being reported (
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the	
1.	Enter the number and approx. percent of	of outfalls mapped: 0 # 0 %
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	O Parking Lot Maintenance
	O Construction Vehicle Washouts	○ Printing
	O Cross-Connections	O Residential Carwashing
	O Distribution Centers	○ Restaurants
	○ Food Processing Facilities	O Schools and Universities
	○ Garbage Truck Washouts	O Septic Maintenance
	○ Hospitals	O Swimming Pools
	O Improper RV Waste Disposal	O Vehicle Fueling
	O Industrial Process Water	O Vehicle Maint./Repair Shops
	● Other: R e s i d e n t i a 1	○ None
	O Sewersheds:	

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SPDES ID

Name of MS4/Coalition Village of Old Field	N Y R 2	2 0 A 4 0 7
3.b.What types of illicit discharges have	been found during this reporting period	?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	○ Inflow/Infiltration	
O Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows	
O Illegal Dumping	O Straight Pipe Sewer Discharges	
Other: 4. How many illicit discharges/potential	None l illegal connections have been detected d	luring this
reporting period?		0
5. How many illicit discharges have been	n confirmed during this reporting period	d? 0
6. How many illicit discharges/illegal coperiod?7. Has the storm sewershed mapping be If No, approximately what percent was		this reporting O Yes O No
8. Is the above information available in Is this information available on the war If Yes, provide URL(s): Please provide specific address of page 1		○ Yes○ YesNooage.
URL	1\/	
URL		

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

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e of MS	S4/Coa	lition	Vil	llage o	of Old	l Field	1													N	Y	R	2	0	А	4	0
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$

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SPDES ID

Name of MS4/Coalition	Village of Old Field	N Y R 2 0 A 4 0 7
12. Evaluating Prog	gress Toward Measurable Goals MCM 3	
identified in your St	ort on your progress and project plans toward formwater Management Program Plan (SWM) tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the S	WMPP in this reporting period.
Number of illicit di	scharges discovered and eliminated.	
B. Briefly summar Goal.	rize the observations that indicated the over	rall effectiveness of this Measurable
There have been no	illicit discharges discovered or eliminated du	aring the reporting period.
C. How many time	es was this observation measured or evalua	ted in this reporting period?
D II 1464		(ex.: samples/participants/events
D. Has your MS4 i	made progress toward this measurable goa	during this reporting period? ● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in t	
•	rize the stormwater activities planned to me ing cycle (including an implementation sch	
Conduct IDDE train	ning and continue to search for illicit discharg	es.

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

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

		SPI	JES	ΙD						
Name of MS4/Coalition	Village of Old Field	N	Y	R	2	0	А	4	0	7

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

	Construction Site and Post-Construction Control		
The	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a	. Has each MS4 contributing to this report adopted a law, ordinance or other requestion that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?	•	, ○ No
	Stormwater Discharges from Constitution Retivities.	9 105	O 110
	equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney certification or using the NYSDE Analysis Workbook? Yes If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La © 09/2004 • 0	C Gap ○ No	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	Yes	○ No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have reviewed in this reporting period?	ve been	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of procomments related to construction SWPPPs? • Yes	ublic ● No	O NT
	If Yes, how many public comments were received during this reporting period?		
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	the loca	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	#			0	O No Authority
O Stop Work Orders	#				O No Authority
O Criminal Actions	#				O No Authority
○ Termination of Contracts	#				O No Authority
O Administrative Fines	#				O No Authority
O Civil Penalties	#				O No Authority
O Administrative Orders	#				O No Authority
O Enforcement Actions or Sanctions	#				
Other	#				O No Authority

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

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N Y R 2 0 A 4 0 7

Name of MS4/Coalition Village of Old Field		NY	R 2	2 0	A 4	0	7
Minimum Control Measure 4. Construction Site	Stormw	<u>ater</u>	Rui	<u>noff</u>	<u>Con</u>	<u>trol</u>	ı
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?	disturba	nces	of on	e acr	e or 1		0
2. How many construction projects disturbing at least one ac during this reporting period?	ere were a	ctive	in yo	our j	urisd		0
3. What percent of active construction sites were inspected de	uring this	s repo	orting	g per	iod?	• N	
4. What percent of active construction sites were inspected m	nore than	once	?	[• N	% NT %
5. Do all inspectors working on behalf of the MS4s contribute Construction Stormwater Inspection Manual?	ing to thi	_	ort u O Yes		e NY No	S	
6. Does your MS4/Coalition provide public access to Stormw (SWPPPs) of construction projects that are subject to MS4		and a	ppro	val?			
If your MS4 is Non-Traditional, are SWPPPs of constructional public review?	ion proje		⊃ Yes ade a	vaila		○ N For ○ N	

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

Name of MS4/Coalition	Village	e of Old	Field													N	Y	R	2	0	A	4	0	7
6. con't.:																								
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Sublint addition	iai pa	ges as	ince	Jucu	1.																			
O MS4/Coalition Of	fice																							
Department																								
Address																								
City												_			Zip									
																				-				
Phone	\		ı r																					
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				51 15	
Name of MS4/Coalition	Nillage of Old Field			N	Y R 2 0 A 4 0 7
Minimum	Control Mea	asure 5. Post	-Constructio	on Stormwa	ter Management
The information in the	nis section is bei	ng reported (che	ck one):		
On behalf of an incOn behalf of a coaHow m		tributed to this	report?		
1. How many and MS4/Coalition i				_	•
		# Inventoried	# Inspections	# Times Maintained	
○ Alternative Practic	ces				
O Filter Systems					
○ Infiltration Basins					
Open Channels					
○ Ponds					
Wetlands			4	0	
Other					
2. Do you use an BMPs, inspect			abase, spreads	heet) to track	post-construction ○ Yes • No
3. What types of Development/F		•			ow Impact
Building Codes	• Municipal C	Comprehensive F	Plans		
Overlay Districts	Open Space	Preservation Pr	ogram		
Zoning	• Local Law o	or Ordinance			
○ None	O Land Use R	Regulation/Zoning	g		
Watershed Plans	Other Comp	orehensive Plan			
Other:					

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

		SLI	DES	ш						
Naı	me of MS4/Coalition Village of Old Field	N	Y	R	2	0	А	4	0	7
4a	a. Are the MS4s contributing to this report involved in a regional/watersh	ed v	vide	pla	ann	_				NT.
4 b	o. Does the MS4 have a banking and credit system for stormwater manag	eme	nt p	rac	etice		Ye	S		No
						\circ	Ye	S		No
4c	and approval of banking and credit of alternative siting of a stormwate	-				t pr		ice?		No
4d	I. How many stormwater management practices have been implemented reporting period?	as pa	art (of t	his	sys	tem	in	thi	S

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

Name of MS4/Coalition	Village of Old Field		SPDES ID N Y R 2 0 A 4	0 7
6. Evaluating Pro	ogress Toward Measurable Goals N	MCM 5		
identified in your S	port on your progress and project plan tormwater Management Program Plan itional pages as needed.	,	0	Part
A. Briefly summa	rize the Measurable Goal identifie	d in the SWMPP	in this reporting peri	iod.
Conduct post-cons	truction inspections of Village-owne	d BMPs each year.		
B. Briefly summa Goal.	rize the observations that indicated	d the overall effec	tiveness of this Meas	urable
Inspections were pe	erformed on four constructed wetlan	d swales.		
C. How many time	es was this observation measured o	or evaluated in thi	is reporting period?	4
			(ex.: samples/par	rticipants/events)
D. Has your MS4	made progress toward this measur	rable goal during		l? ○ No
E. Is your MS4 or	schedule to meet the deadline set	forth in the SWM		0 110
		1.	• Yes	○ No
•	rize the stormwater activities plan ing cycle (including an implements	0	oals of this MCM dui	ring
Continue to perform	m post-construction inspections.			

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

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		SPDES ID									
Name of MS4/Coalition	Village of Old Field		N	Y	R	2	0	А	4	0	7
Name of MS4/Coalition	Village of Old Field		IN	Y	R		U	А	4	U	

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):		
On behalf of an individual MS4On behalf of a coalition		
How many MS4s contributed to this report?		

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

Self-Assessment
Operation/Activity/Facility
performed within the past 3

		perior	med within	the past s
Operation/Activity/Facility	Addressed in	n SWMP?	<u>vears?</u>	•
Street Maintenance	• Yes	○ No	• Yes	\bigcirc No
Bridge Maintenance	O Yes	• No	O Yes	No
Winter Road Maintenance	• Yes	○ No	• Yes	\bigcirc No
Salt Storage	O Yes	• No	• Yes	\bigcirc No
Solid Waste Management		• No	• Yes	\bigcirc No
New Municipal Construction and Land Disturba	nce O Yes	• No	O Yes	No
Right of Way Maintenance	○ Yes	• No	O Yes	No
Marine Operations		• No	O Yes	No
Hydrologic Habitat Modification		• No	O Yes	No
Parks and Open Space		○ No	• Yes	\bigcirc No
Municipal Building		○ No	• Yes	\bigcirc No
Stormwater System Maintenance		○ No	• Yes	\bigcirc No
Vehicle and Fleet Maintenance	O Yes	• No	• Yes	\bigcirc No
Other	○ Yes	• No	O Yes	No

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

	SPDES ID		
Name of MS4/Coalition Village of Old Field	N Y R 2	0 A 4	0 7
2. Provide the following information about municipal operat	ions good housekee	ping prog	grams:
• Parking Lots Swept (Number of acres X Number of times swep	t) # Acres		1
• Streets Swept (Number of miles X Number of times swept)	# Miles		8
Catch Basins Inspected and Cleaned Where Necessary	#		4 1
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		4
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		
O Nitrogen Applied In Chemical Fertilizer	# Lbs.		
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	# Acres [umber of		
3. How many stormwater management trainings have been p during this reporting period?	provided to municip	al employ	yees 2
4. What was the date of the last training?	0 2 / 2 4	2 0	2 2
5. How many municipal employees have been trained in this	reporting period?		1 4
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments r	receive 9	3 %

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

Name of MS4/Coalition	Village of Old Field		SPDES ID N Y R 2 0 A 4	1 0 7
7. Evaluating Pro	ogress Toward Measurable Goals N	MCM 6		
G				
identified in your S	port on your progress and project plan tormwater Management Program Plan itional pages as needed.		_	Part
A. Briefly summa	rize the Measurable Goal identifie	d in the SWMPP	in this reporting per	riod.
Number of roadwa	y catch basins inspected and maintai	ned.		
B. Briefly summa Goal.	rize the observations that indicated	d the overall effec	tiveness of this Meas	surable
41 of 84 roadway o	catch basins were inspected and clear	ned during the repo	orting year.	
C. How many time	es was this observation measured (or evaluated in th	is reporting period?	
·				4 1
D. Has your MSA	made progress toward this measur	roblo gool during		rticipants/events)
D. Has your MIS4	made progress toward this measur	Table goal during	• Yes	○ No
E. Is your MS4 or	schedule to meet the deadline set	forth in the SWM	IPP?	
			• Yes	\bigcirc No
•	rize the stormwater activities plan ing cycle (including an implement	_	oals of this MCM du	ring
Continue to inspec	t and maintain roadway catch basins	in the Village.		