#### **MS4 Annual Report Cover Page**

MCC form for period ending March 9, 2 0 1 8

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

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#### **Choose one:**

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

Fill in SPDES ID in upper right hand corner.

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#### **OR**

# ○ This report is being submitted on behalf of a Single Entity

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

Name of Coalition

Name o	of Si	ngle	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.

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# **MS4 Annual Report Cover Page**

MCC form for period ending March 9, 2 0 1 8

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 8

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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:

- 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.

If Jo	oint	Rep	ort,	ent	er c	oali	tion	nai	ne:										
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MCC form for period ending March 9, 2 0 1 8

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#### **Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for *each* of the following positions as indicated below:

- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
- 3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
- 4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- 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,  $2 \mid 0 \mid 1 \mid 8$ 

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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 1 8

	SPDES ID
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 perperiod?	rmit requirements during this reporting  O Yes  No
	O les Will
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 eac If No, proceed to Section 4 - Certification Statement.	e sheet with the name of the
Partner/CoalitionName	
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
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Address	
City	tate Zip
eMail	
	ly Binding Agreement in accordance GP-0-08-002 Part IV.G.? ○ Yes ○ No
What tasks/responsibilities are shared with this partner (e.g. MM	1 School Programs or Multiple Tasks)?
O MM1	
○ MM2	
○ MM3	
○ MM4	
O MM5	
○ MM6	
Additional tasks/responsibilities	
<ul> <li>Watershed Improvement Strategy Best Management Practice watersheds included in GP-0-08-002 Part IX.</li> </ul>	es required for MS4s in impaired

MCC form for period ending March 9, 2 0 1 8

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
M i c h a e l	S	L e v i n e
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, 2 0 1 8

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 Old Field	SPDES ID           N         Y         R         2         0         A         4         0         7
Minimum Control Measure 1. Public Ed	ucation and Outreach
The information in this section is being reported (check one):	
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition         How many MS4s contributed to this report?     </li> </ul>	
1. Targeted Public Education and Outreach Best Management	ent Practices
Check all topics that were included in Education and Outreach d	uring this reporting period:
<ul><li>Construction Sites</li></ul>	Pesticide and Fertilizer Application
General Stormwater Management Information	Pet Waste Management
<ul> <li>Household Hazardous Waste Disposal</li> </ul>	○ Recycling
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
○ Infrastructure Maintenance	○ Trash Management
○ Smart Growth	O Vehicle Washing
O Storm Drain Marking	O Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
Other:	○ None
Othor	
<ul><li>Other</li><li>2. Specific audiences targeted during this reporting period:</li></ul>	
Public Employees Contractors	
<ul><li>Residential</li><li>Developers</li></ul>	
O Businesses • General Public	
○ Restaurants ○ Industries	
○ Other: ○ Agricultural	
Other	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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 Old Field  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.			0 A 4 0 7
4. Evaluating Progress	s Toward Measurable Goals MCM	11	
identified in your Storm	water Management Program Plan (S'	<u>e</u>	0
A. Briefly summarize t	he Measurable Goal identified in t	the SWMPP in this repor	ting period.
Number of visits (i.e., h	its) on the stormwater management v	webpage.	
B. Briefly summarize to Goal.	he observations that indicated the	overall effectiveness of t	his Measurable
	ts to the stormwater management we	ebpage during the reporting	g period was
399.			
C How many times we	as this observation measured or ev	aluated in this reporting	period?
c. How many times wa	is this observation measured of ev	aruateu in tins reporting	3 9 9
			samples/participants/events
D. Has your MS4 mad	e progress toward this Measurable	e Goal during this report	ing period? ● Yes ○ No
E. Is your MS4 on scho	edule to meet the deadline set forth	in the SWMPP?	● Yes ○ No
•	he stormwater activities planned t ycle (including an implementation	C	ICM during
Update stormwater educ	cational materials on the stormwater	management webpage, as	necessary.

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

Name of MS4/Coalition Village of Old Field				N	YR	2	0	A 4	0	7
<b>Minimum Control Measure 2.</b>	Public In	volve	emen	t/Pa	rtici	pat	tio	<u>n</u>		
The information in this section is being reported (chec	ck one):									
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this in</li> </ul>	report?									
1. What opportunities were provided for public development, evaluation and improvement (SWMP) Plan during this reporting period	of the Storm	ıwate	r Mai	nage			gr	am		
O Cleanup Events				#	Even	ts				
O Comments on SWMP Received				# Co	mmen	ts				
O Community Hotlines	Phone #	(		)			<b>-</b> [			
Phone # ( ) -	Phone #	(		)			<b>-</b> [			
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O Community Meetings				# At	tendee	es				
○ Plantings					Sq. F	t.				
O Storm Drain Markings				#	#Drain	ıs				
O Stakeholder Meetings				# At	tendee	es				
O Volunteer Monitoring				#	Even	ts				
Other:										
2. Was public notice of availability of this ann Program (SWMP) Plan provided?	ual report a	nd St	ormw	ater	Mar Mar	age		e <b>nt</b> Yes	0	No
○ List-Serve				#	In Li	st				
<ul><li>Newspaper Advertising</li></ul>				# D	ays Ru	n				7
○ TV/Radio Notices				# D	ays Ru	n				
Other:										
• Web Page URL: Enter URL(s) on the following	two pages.					_				

# **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

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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	(				)				-																						
• We	b Pa	age	UR	RL:													A	nnu	al l	Rep	ort		) S	WN	<b>1</b> P 1	Plan	ı	0	Con	nme	nts
	W	W	W		0	1	d	f	i	е	1	d	n	У	•	0	r	g	/	s	е	r	v	i	С	е	s	/			
	е	n	v	i	r	0	n	m	е	n	t	a	1	-	s	t	е	W	а	r	d	s	h	i	р	/					
	Ple	ease	pr	ovi	de	spe	cif	ic a	ıddı	ess	of	paş	ge v	νhε	ere	rep	ort	car	ı be	e ac	ces	sec	l - r	ot	hor	ne	pag	ge.			
○ eM			-			-										-													Con	nme	nts
																															$\overline{}$

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

	,	SPL	DES ID						
Name of MS4/Coalition Village of Old Field		N	YR	2	0	А	4	0	7
4.a. If this report was made available on the internet, what da	ite was it	po	sted?						
Leave blank if this report was not posted on the internet.	0	4	/ 2	3	/	2	0	1	8
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	ing a join	nt re	eport,	ans	we!	r 5.	b		
<b>5.a. Was an Annual Report public meeting held in this report</b> If Yes, what was the date of the meeting?	ing perio	od?	/			Ye	es	•	No
If No, is one planned?					С	Ye	es	•	No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	tin	g to tl	his	rep	ort	t du	ırin	ıg
this reporting period?					С	Ye	es		No
If No, is one planned for each?					С	Ye	es		No
<b>6.</b> Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					С	Ye	es	•	No

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

Name of MS4/Coalition	Village of Old Field		SPDES ID N Y R 2 0 A 4	0 7
7. Evaluating Pro	ogress Toward Measurable Goals N	<b>ICM 2</b>		
identified in your St	port on your progress and project plan tormwater Management Program Pla itional pages as needed.		_	Part
A. Briefly summar	rize the Measurable Goal identifie	d in the SWMPP	in this reporting per	iod.
Number of public of	comments received on the annual rep	oort.		
B. Briefly summar Goal.	rize the observations that indicated	l the overall effec	ctiveness of this Meas	surable
	e received on the annual report.			
C. How many time	es was this observation measured o	or evaluated in th	nis reporting period?	
			(ex.: samples/pai	0 rticipants/events)
D. Has your MS4	made progress toward this measur	able goal during	this reporting period	d?
E Is your MS4 on	a sahadula ta maat tha daadlina sat	fouth in the CIVI		○ No
E. 18 your W154 on	schedule to meet the deadline set	iorui iii uie S w N	• Yes	○ No
•	rize the stormwater activities planting cycle (including an implementa	0	oals of this MCM du	ring
Continue to make a	annual reports available to the genera	al 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,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

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

Minimum Control Measure 3.	Illicit Discharge Detection and Elimination									
The information in this section is being reported (	_									
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to the</li> </ul>										
1. Enter the number and approx. percent	of outfalls mapped: 0 # 0 %									
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?									
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspection during this									
O Auto Recyclers	○ 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									
O Food Processing Facilities	○ Schools and Universities									
O Garbage Truck Washouts	○ Septic Maintenance									
○ Hospitals	○ Swimming Pools									
○ Improper RV Waste Disposal	○ Vehicle Fueling									
○ Industrial Process Water	○ Vehicle Maint./Repair Shops									
Other:	○ None									
Residential										
O Sewersheds:										

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

	SPDES ID
Name of MS4/Coalition Village of Old Field	N Y R 2 0 A 4 0 7
3.b. What types of illicit discharges have	e been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
○ 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:	● None
4. How many illicit discharges/potentia	al illegal connections have been detected during this
reporting period?	
7 TT 111 1 1 1	
5. How many illicit discharges have be	en confirmed during this reporting period?
	connections have been eliminated during this reporting
6. How many illicit discharges/illegal c	onnections have been eliminated during this reporting
6. How many illicit discharges/illegal c period?	onnections have been eminiated during this reporting
<ul><li>period?</li><li>7. Has the storm sewershed mapping b</li></ul>	peen completed in this reporting period? ● Yes ○ No
period?	peen completed in this reporting period? ● Yes ○ No
<ul><li>period?</li><li>7. Has the storm sewershed mapping b</li></ul>	peen completed in this reporting period?  Sompleted in this reporting period?  Yes O Note: The solution of the
<ul> <li>period?</li> <li>7. Has the storm sewershed mapping be If No, approximately what percent was</li> <li>8. Is the above information available in Is this information available on the storm and the storm and the storm and the storm are stormed as a second as</li></ul>	een completed in this reporting period?  Yes ONG s completed in this reporting period?  Yes ONG Yes ONG Yes ONG
<ul> <li>period?</li> <li>7. Has the storm sewershed mapping be a lift No, approximately what percent was severed.</li> <li>8. Is the above information available in the lift Yes, provide URL(s):</li> </ul>	een completed in this reporting period?  Yes ONG Some completed in this reporting period?  Yes ONG Yes ONG Yes ONG Yes ONG Yes ONG
<ul> <li>period?</li> <li>7. Has the storm sewershed mapping be a lift No, approximately what percent was severed.</li> <li>8. Is the above information available in the lift Yes, provide URL(s):</li> </ul>	peen completed in this reporting period?  Sompleted in this reporting period?  Order  Yes  No  Yes  Yes  No  Yes  No  Yes  No  Yes  No  Yes  No  Yes  No  Yes  Yes  No  Yes  Yes  No  Yes  Yes  No  Yes  Yes  Yes  No  Yes  Yes  No  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Ye
<ul> <li>period?</li> <li>7. Has the storm sewershed mapping be If No, approximately what percent was</li> <li>8. Is the above information available in Is this information available on the If Yes, provide URL(s):</li> <li>Please provide specific address of page</li> </ul>	een completed in this reporting period?  Yes ONG Some completed in this reporting period?  Yes ONG Yes ONG Yes ONG Yes ONG Yes ONG
<ul> <li>period?</li> <li>7. Has the storm sewershed mapping be If No, approximately what percent was</li> <li>8. Is the above information available in Is this information available on the If Yes, provide URL(s):</li> <li>Please provide specific address of page</li> </ul>	een completed in this reporting period?  Yes ONG Some completed in this reporting period?  Yes ONG Yes ONG Yes ONG Yes ONG Yes ONG
7. Has the storm sewershed mapping by If No, approximately what percent was 8. Is the above information available in Is this information available on the If Yes, provide URL(s):  Please provide specific address of page URL	een completed in this reporting period?  Yes ONG Some completed in this reporting period?  Yes ONG Yes ONG Yes ONG Yes ONG Yes ONG
<ul> <li>period?</li> <li>7. Has the storm sewershed mapping be If No, approximately what percent was</li> <li>8. Is the above information available in Is this information available on the If Yes, provide URL(s):</li> <li>Please provide specific address of page</li> </ul>	een completed in this reporting period?  Yes ONG Some completed in this reporting period?  Yes ONG Yes ONG Yes ONG Yes ONG Yes ONG
7. Has the storm sewershed mapping by If No, approximately what percent was 8. Is the above information available in Is this information available on the If Yes, provide URL(s):  Please provide specific address of page URL	een completed in this reporting period?  Yes ONG Some completed in this reporting period?  Yes ONG Yes ONG Yes ONG Yes ONG Yes ONG

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 8$ 

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This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

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 Old Field	N Y R 2 0 A 4 0 7
12 Evaluating Proc	gress Toward Measurable Goals MCM 3	
12. Evaluating 110	gress Toward Measurable Goals MCM 5	
identified in your St	ort on your progress and project plans toward ormwater Management Program Plan (SWM tional pages as needed.	
A. Briefly summar	ize the Measurable Goal identified in the	SWMPP in this reporting period.
Number of illicit dis	scharges discovered and eliminated.	
B. Briefly summar Goal.	ize the observations that indicated the ove	erall effectiveness of this Measurable
There have been no	illicit discharges discovered or eliminated d	uring the reporting period.
C. How many time	es was this observation measured or evalua	ated in this reporting period?
		(ex.: samples/participants/events
D. Has your MS4 i	nade progress toward this measurable goa	
		● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in	
•	ize the stormwater activities planned to m ng cycle (including an implementation sch	eet the goals of this MCM during
Conduct IDDE train	ning and continue to search for illicit dischar	ges.

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

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

# Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

	<b>Construction Site and Post-Construction Control</b>		
The	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a	. Has each MS4 contributing to this report adopted a law, ordinance or other reg mechanism that provides equivalent protection to the NYS SPDES General Per	mit for	
	<b>Stormwater Discharges from Construction Activities?</b>	• Yes	○ No
	equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney certification or using the NYSDEC Analysis Workbook?  Yes  If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La © 09/2004 • 0	C <b>Gap</b> ○ No	o NT  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.	<b>Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs?</b>	ıblic ● No	ONT
	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 loc	<b>al</b> ● 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:

<ul><li>Notices of Violation</li></ul>	#			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,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

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 Old Field		N Y	R	2	0 A	4	0 7
Minimum Control Measure 4. Construction Site	Stormy	<u>vater</u>	Ru	<u>ino</u>	ff C	<u>on</u> 1	t <u>rol</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 report?							
1. How many construction projects have been authorized for during this reporting period?	disturba	nces	of o	ne a	icre (	or n	nore 0
2. How many construction projects disturbing at least one aduring this reporting period?	cre were	active	e in y	you	r jur	isdi	o o
3. What percent of active construction sites were inspected of	luring th	is rep	ortii	ng p	erio	d?	• NT
							%
4. What percent of active construction sites were inspected r	nore thai	once	?				• NT
5. Do all inspectors working on behalf of the MS4s contribution Construction Stormwater Inspection Manual?	ting to th	-	ort		the I		
6. Does your MS4/Coalition provide public access to Stormy (SWPPPs) of construction projects that are subject to MS		and a	ppr	ova	1?		
If your MS4 is Non-Traditional, are SWPPPs of construct public review?	tion proje		○ Y ade		● N ailab ○ Ye	le f	○ NT or ○ No

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

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

		SPDE	S ID					
Name of MS4/Coalition Village of Old Field		NY	R	2	0	A	4 (	0 7
6. con't.: Submit additional pages as needed.								
O MS4/Coalition Office Department								
						$\top$		
Address								
City	Zip				Г			
					-			
Phone								
(								
○ Library								
Address								$\overline{\top}$
City								
City					_			$\overline{}$
Phone					L			
(								
Other								
Address								
								$\top$
City	Zip							
					-			
Phone					_			
O Web Page URL(s): Please provide specific address where SWPPP	s can be	access	ed - :	not	hon	ne p	age.	
URL								
			П			寸		
			$\forall$		$\pm$	+	$\pm$	+
					$\perp$			
URL					$\overline{}$	$\overline{}$		
			$\perp \perp \mid$		$\perp$	$\downarrow$	$\perp$	$\perp$

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

	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 4	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Number of SWPPPs reviewed.	
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Low number of SWPPPs reviewed is indicative of few parcels regreater than 1 acre.	maining in the Village that are
C. How many times was this observation measured or evaluate	ted in this reporting period?
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal	
E. Is your MSA on schodule to most the deadline set forth in t	• Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in t	• Yes O No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	e e
Continue to review SWPPPs as they are received.	

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

N Y R 2 0 A 4 0 7

Name of MS4/Coalition Village of Old Field			N Y	R 2	0 A 4	1 0 7	
Minimum	Control Mea	asure 5. Post	-Construction	on Stormwate	er Ma	nagem	<u>ent</u>
The information in the	nis section is bein	ng reported (che	ck one):				
<ul><li>On behalf of an inc</li><li>On behalf of a coa</li><li>How m</li></ul>		tributed to this	report?				
1. How many and MS4/Coalition i				_		s your	
		# Inventoried	# Inspections	# Times Maintained			
○ Alternative Practic	ces	Inventoried	Inspections	Maintained			
○ Filter Systems							
○ Infiltration Basins							
Open Channels							
○ Ponds							
<ul><li>Wetlands</li></ul>			4	4			
Other							
<ul><li>2. Do you use an BMPs, inspection</li><li>3. What types of Development/E</li></ul>	ions and maint non-structural	tanance?  practices have	e been used to	implement Lo		○ Yes	
<ul><li>Building Codes</li></ul>		Comprehensive F	•	•			
Overlay Districts	Open Space	Preservation Pr	ogram				
<ul><li>Zoning</li></ul>	• Local Law o	or Ordinance					
○ None	O Land Use R	egulation/Zoning	g				
<ul><li>Watershed Plans</li></ul>	Other Comp	orehensive Plan					
Other:							

This report is being submitted for the reporting period ending March 9, 2 0 1 8

			SPI	DES .	D					
Naı	me of MS4/Coalition Village of Old Field		N	Y	R 2	2	0 7	4	0	7
4a	. Are the MS4s contributing to this report involved in a regional	/watershe	d v	ide	plaı	nni	0	<b>ffor</b> Yes		No No
4b	. Does the MS4 have a banking and credit system for stormwater	r manage	me	nt pi	acti	ice	es?			
							0 \	Zes .		No
4c	Do the SWMP Plans for each MS4 contributing to this report in and approval of banking and credit of alternative siting of a sto	-								
							0 !	Zes .		No
4d	. How many stormwater management practices have been imple	mented a	s pa	art o	f th	is s	syste	m iı	n th	is
	reporting period?								0	
5.	What percent of municipal officials/MS4 staff responsible for p	rogram i	mp	leme	nta	tio	n at	tend	led	
	training on Low Impace Development (LID), Better Site Design	(BSD) aı	nd	othe	r Gı	ree	n _			_
	Infrastructure principles in this reporting period?								0	%

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 8$ 

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, 2

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 Old Field	N	Y	R	2	0	А	4	0	7

#### 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?	

Other..... O Yes

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** Addressed in SWMP? vears? Street Maintenance..... 

Yes ○ No ...... • Yes  $\bigcirc$  No Bridge Maintenance.... O Yes ● No ..... ○ Yes No Winter Road Maintenance.... 

Yes ○ No ..... • Yes  $\bigcirc$  No Salt Storage.... O Yes No Yes  $\bigcirc$  No Solid Waste Management..... O Yes No ....Yes  $\bigcirc$  No New Municipal Construction and Land Disturbance.. O Yes No Right of Way Maintenance.... O Yes ● No ..... ○ Yes No No Marine Operations.... O Yes Hydrologic Habitat Modification..... O Yes ● No ..... ○ Yes No ○ No Yes Parks and Open Space.... Yes  $\bigcirc$  No ○ No ..... • Yes Municipal Building.... 

Yes  $\bigcirc$  No ○ No ..... • Yes  $\bigcirc$  No Stormwater System Maintenance..... • Yes ● No ..... • Yes  $\bigcirc$  No Vehicle and Fleet Maintenance.... O Yes ● No ○ Yes No

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 0 \end{vmatrix}$ 

	S]	PDES ID					
Name of MS4/Coalition Village of Old Field	1	Y R	2	0 A	4	0	7
	_						
2. Provide the following information about municipal operati	ons good	housek	eepi	ng pr	ogr	am	s:
• Parking Lots Swept (Number of acres X Number of times swept	t)	# Acr	es [				1
• Streets Swept (Number of miles X Number of times swept)		# Mil	es				8
Catch Basins Inspected and Cleaned Where Necessary			#			4	5
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>			#				4
O Phosphorus Applied In Chemical Fertilizer		# Lt	s.				
O Nitrogen Applied In Chemical Fertilizer		# Lt	s.				
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Nutimes applied to the nearest tenth.)	umber of	# Acres	}			•	
3. How many stormwater management trainings have been p	rovided to	o munic	ipal	emp	loye	ees	
during this reporting period?							2
4. What was the date of the last training?	0 2	2 / 0	8	/ 2	0	1	8
5. How many municipal employees have been trained in this i	reporting	period <sup>4</sup>	?			1	4
6. What percent of municipal employees in relevant positions stormwater management training?	and depa	rtment	s re	ceive	0	0	%

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 8$ 

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 Old Field	N Y R 2 0 A 4 0 7
7. Evaluating Prop	gress Toward Measurable Goals MCM 6	
identified in your St	ort on your progress and project plans toward formwater Management Program Plan (SWM tional pages as needed.	5
A. Briefly summar	rize the Measurable Goal identified in the S	SWMPP in this reporting period.
Number of roadway	y catch basins inspected and maintained.	
B. Briefly summar Goal.	rize the observations that indicated the ove	rall effectiveness of this Measurable
45 of 84 roadway ca	atch basins were inspected and cleaned during	g the reporting year.
C. How many time	es was this observation measured or evalua	
		(ex.: samples/participants/events
D. Has your MS4	made progress toward this measurable goa	l during this reporting period?
E. Is your MS4 on	schedule to meet the deadline set forth in	● Yes ○ No
2. 15 your 1/154 on	selection to meet the dedunite set form in	• Yes O No
•	rize the stormwater activities planned to me ing cycle (including an implementation sch	8
Continue to inspect	and maintain roadway catch basins in the Vi	llage.



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# Progress Report for Part IX.C Pathogen Impaired Watershed Improvement Strategy Areas

PER	RMIT#	NYR20A407	Waterbody Name	Consc	cience Bay
MS4	1 Name	Village of Old Field	Reporting Period Endi (mm/dd/yy	ing	0 3 / 0 9 / 2 0 1 8
×	The M includi ditches owns o	mation for No Discharge unicipal Seperate Storm Sewer S ng roads with drainage systems, s, man-made channels, or storm or operates does not have any out er MS4, into the Conscience	System as defined in 40 ( municipal streets, catch drains that the utfalls that discharge dire	CFR 1: basins	22.26(b)(8) and (16) s, curbs, gutters, of Old Field
<u>Wa</u>	<u>tershe</u>	d Status			
		e describe what your stormwater of pathogens to the impaired wa		doing	to address the
	the MS	suspect the sources of pathogens 64 are something other than the s to be the suspected sources an	sources listed in the TMD	L, ple	
<u>Pul</u>	olic Ed	lucation & Outreach of Patho	ogens as the Pollutar	nt of C	<u>Concern</u>
1.	Descrip	tion of the education program.			
	Who are	e the target audiences and what tee?	is the message delivered	to ea	ch target
3. I	How are	e behavior changes being measu	red?		

Per	mit # NYR20A407
4.	What are the education plans and goals for the next 6 months?
Illio	cit Discharge Detection and Elimination
5.	What has been done to actively look in these watersheds for Illicit discharges?
	Describe procedures and staff that are involved in this reconnaissance.
	swer Either 6a. or 6b.
6a.	<ul> <li>No Illicit Discharges were discovered during this reporting period</li> <li>Explain how the determination for No Illicit Discharges was made</li> </ul>
6b.	☐ Illicit Discharges were discovered during this reporting period
	What has the municipality determined from the illicit discharges that have been found?
Co	mplete Either 7a. (Map) or 7b. (Written Response)
7a.	Attach a map showing where IDDE outfall inspections have occurred this reporting period, which outfalls have illicit discharges, and if the discharge has been removed, where the illicit
	connection is in the system and how it is entering the system (i.e. Direct connection to the
	MS4, overland connection, structural failure of the MS4 piping network)
7b.	Give the number of inspections performed during this reporting period. # Inspections [ ] [ ] [ ] (Provide municipal identification #s for all outfalls inspected)
	State which outfalls have illicit discharges and whether or not the illicit discharge has been
	removed. Also describe where the illicit discharge is in the system and how it is entering the system (i.e. Direct connection to the MS4, overland connection, structural failure of
	the MS4 piping network)

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# **Post Construction Stormwater Management**

8.	Number of Post Construction Stormwater Management Practices (SMPs) that discharge to an MS4 that drains to the listed waterbody	# SMPs
	As part of the RFI sent by the Department in August 2016, the information in #8 has alrea. Describe the municipality's policy on post construction stormwater management.	•
9.	Describe the Post-Construction Stormwater Management plan and goals for the	next 6 months
<u>Μι</u>	unicipal Operations Pollution Prevention/Good Housekeeping	
10	Non-Traditional MS4 (skip Question 10)  Is pet waste an issue in the MS4 areas? If pet waste is not an issue please describe, in the box below, the reasoning behind this viewpoint.	
101	b. If pet waste is a problem, where has it been found to be a problem? Are there areas where pets are known to frequent (such as parks, road ends, boat laur marinas, trails). Are there any indications that pet waste is being disposed of improperly (ie. dumped into a catch basin)?	nches,
100	What strategies are in place to manage the proper disposal of pet waste? We strategies are planned to improve pet waste disposal practices in areas identified in need of improvement?	

PERM	/    # NYR20A407
10d.	What measurable indicators are being used to help determine the effectiveness of these strategies?
11a.	Is the goose population an issue in the MS4 areas? If the goose population is not an issue please describe, in the box below, the reasoning behind this viewpoint.
11b.	If the geese are a problem, where has it been found to be a problem? Provide a description of the location or a map showing the areas of high population density of geese.
11c.	What strategies are in place to manage the population of geese on municipal properties?
11d.	What measurable indicators are being used to help determine the effectiveness of these strategies?

#### **MS4 Semi Annual Report Form Certification**

Semi Annual Report form for period ending  $\begin{bmatrix} 0 & 3 & 0 & 9 & 2 & 0 & 1 & 8 \end{bmatrix}$  (MMDDYYYY) SPDES ID Name of MS4 Village of Old Field  $\begin{bmatrix} N & Y & R & 2 & 0 & A & 4 & 0 & 7 \end{bmatrix}$ 

<u>Certification Statement</u> - MS4 Official (Principal Executive Officer or Ranking Elected Official) or a Duly Authorized Representative of the MS4 Official

"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, to 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 of 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-0-15-003 Part VI.J.

First Name	MI	Last Nan	ne							
Michael	S	L e v	i i	n e						
Title (Clearly print title of individual signing report)										
M a y o r										
Signature				Da	te	] /		] /		

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 2732136127

# Progress Report for Part IX.C Pathogen Impaired Watershed Improvement Strategy Areas

PER	MIT#	NYR20A407	Waterbody Name	Stony Brook Harbor and West Meadow Creek
MS4	Name	Village of Old Field	Reporting Period Endi	
<b>X</b> Wa <del>t</del>	The Mincludi ditches owns danothe	mation for No Discharge unicipal Seperate Storm Sewer S ng roads with drainage systems, s, man-made channels, or storm or operates does not have any out or MS4, into the Stony Brook Harbor and W	System as defined in 40 (municipal streets, catch drains that the that the that discharge directions)	CFR 122.26(b)(8) and (16) basins, curbs, gutters, Village of Old Field
	Please	e describe what your stormwater of pathogens to the impaired wa		doing to address the
		. •	•	
	the MS	suspect the sources of pathogens 64 are something other than the set to be the suspected sources an	sources listed in the TMD	L, please state what you
		ucation & Outreach of Pathe	ogens as the Pollutan	t of Concern
	r	1 0		
	Vho are	e the target audiences and what ee?	is the message delivered	to each target
3. F	low are	e behavior changes being measu	red?	

Per	mit # NYR20A407
4.	What are the education plans and goals for the next 6 months?
Illio	cit Discharge Detection and Elimination
5.	What has been done to actively look in these watersheds for Illicit discharges?
	Describe procedures and staff that are involved in this reconnaissance.
Ans	swer Either 6a. or 6b.
6a.	<ul> <li>No Illicit Discharges were discovered during this reporting period</li> <li>Explain how the determination for No Illicit Discharges was made</li> </ul>
	Explain flow the determination for No finicit discharges was made
6b.	<ul> <li>Illicit Discharges were discovered during this reporting period</li> <li>What has the municipality determined from the illicit discharges that have been found?</li> </ul>
	Trinat had the manierpanty acternation the mish alcoharges that have seen realia.
<u>Co</u> 7a.	mplete Either 7a. (Map) or 7b. (Written Response)  Attach a map showing where IDDE outfall inspections have occurred this reporting period,
Гa.	which outfalls have illicit discharges, and if the discharge has been removed, where the illicit
	connection is in the system and how it is entering the system (i.e. Direct connection to the MS4, overland connection, structural failure of the MS4 piping network)
76	
7b.	Give the number of inspections performed during this reporting period. # Inspections           (Provide municipal identification #s for all outfalls inspected)
	State which outfalls have illicit discharges and whether or not the illicit discharge has been
	removed. Also describe where the illicit discharge is in the system and how it is entering the system (i.e. Direct connection to the MS4, overland connection, structural failure of
	the MS4 piping network)

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# **Post Construction Stormwater Management**

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9.	Describe the Post-Construction Stormwater Management plan and goals for the	e next 6 months
<u>Μι</u> 10a	unicipal Operations Pollution Prevention/Good Housekeeping  □ Non-Traditional MS4 (skip Question 10)  a. Is pet waste an issue in the MS4 areas? If pet waste is not an issue please describe, in the box below, the reasoning behind this viewpoint.	
101	b. If pet waste is a problem, where has it been found to be a problem? Are the areas where pets are known to frequent (such as parks, road ends, boat lau marinas, trails). Are there any indications that pet waste is being disposed comproperly (ie. dumped into a catch basin)?	unches,
100	c. What strategies are in place to manage the proper disposal of pet waste? We strategies are planned to improve pet waste disposal practices in areas iden	
	in need of improvement?	

PERM	/    # NYR20A407
10d.	What measurable indicators are being used to help determine the effectiveness of these strategies?
11a.	Is the goose population an issue in the MS4 areas? If the goose population is not an issue please describe, in the box below, the reasoning behind this viewpoint.
11b.	If the geese are a problem, where has it been found to be a problem? Provide a description of the location or a map showing the areas of high population density of geese.
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"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, to 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 of 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-0-15-003 Part VI.J.

First Name	MI	Last Nan	ne							
Michael	S	L e v	i i	n e						
Title (Clearly print title of individual signing report)										
M a y o r										
Signature				Da	te	] /		] /		

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