MS4 Annual Report Cover Page

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

This c	over p	page 1	must be	completed	by 1	the	report	prepai	er.
Joint 1	report	ts req	uire only	y one cove	r pa	ge.			

SPL)ES	ID						
N	Y	R	2	0	A	5	⁻ 4	2

Choose one:

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

Fill in SPDES ID in upper right hand corner.

Nan	ne c	fM	[S4																						
V	i	1	ı	а	g	Ф	ន	0	u	t	h	В	1	0	0	m	i	n	g	G	r	0	v	ω	

OR

\bigcirc	This	report is	being	submitted	on	behalf	of a	Single	Entity
\smile	T TILLS	1 CPOI C IS	~ · · · · · · · · · · · · · · · · · · ·	Submittee	O AA	NO CHARL	01 44	~	Littly

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

Name of Single Entity					 	
			!			

OR

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

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

Name of Coalition		
CDDTG TO	andre to	endre id
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
NYR20A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	NYR20A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	NYR20A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A

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.

SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	NYR20A
SPDES ID	SPDES ID	SPDES ID
NYR20A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
NYR20A	NYR20A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
NYR20A	N Y R 2 O A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 O A	N Y R 2 0 A

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

	5	SPD	ES II)					
Name of MS4 Village of South Blooming Grove		N	YR	2	0	A	5	4	2
Each MS4 must submit an MCC form.									
Section 1 - MCC Identification Page									
Indicate whether this MCC form is being submitted to certify endorsement An Annual Report for a single MS4	n or acc	ept	ance	of:					
○ 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 be	oinding	agr	eem	ents					
If Joint Report, enter coalition name:				.,					

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

		SPI	DES							
Name of MS4 Village of South Blooming Grove		И	Y	R.	2	0	Α	5	4	2
2 (4/4/24 0 2 2/10 1	,									

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name	MI Last Name
James	LoFranco
Title	
Mayor	
Address	
8 1 1 Route 2 0 8	
City	State Zip
Blooming Grove	N Y 1 0 9 5 0 -
eMail	
Phone	County
(845) 782 - 2600	Orange

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

	SPI	DES	\mathbb{D}						
Name of MS4 Village of South Blooming Grove	N	Y	R	2	0	A	5	4	2

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

Firs	t Na	me														$\underline{\mathbf{M}}$	Las	t Na	me						_			_	,	1	
В	r	е	t	t													S	h	е	r	m	a	n		<u> </u>				L_		i
Title	 B																														
S	t	a	f	f		D	е	ន	i	g	n	e	r															L			
Add	ires	\ S														,								,					.—	·	
3	3		Α	i	r	р	0	r	t		C	е	n	t	е	r	D	r	i	v	е										
~.			·		-														5	tate	,	Zi	n								
(11	7																_										-	_	_	_	
Cit	e	W	_	W	ji	n	d	ន	0	r			····					_	1 Г		Y	1	2	5	5	3	-				
N	е	W		W	i	n	d	s	0	r									1 Г		$\overline{}$	Γ.		5	5	3] -				
	е	w		W	i	n	d	s	0	r									1 Г		$\overline{}$	Γ.		5	5	3] -				
N	e ail	W		W	i	n	d	s	0	r							Cor	ınty			$\overline{}$	Γ.		5	5	3] -				

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

SPDES ID

Submit a separate sheet for each partner. Information provided in o accepted. If your MS4 cooperated with a coalition, submit one sheet coalition. It is not necessary to include a separate sheet for each MS	ther et wi	forr	nats ne na	wil ame	l rlo of 1	ot b	es		g No
period? If Yes, complete information below. Submit a separate sheet for each partner. Information provided in o accepted. If your MS4 cooperated with a coalition, submit one shee coalition. It is not necessary to include a separate sheet for each MS	ther et wi	forr	nats ne na	wil ame	l rlo of 1	ot b	es		
accepted. If your MS4 cooperated with a coalition, submit one shee	et wi	th th	ne na	ame	of		е		
									
11 140, proceed to occupin 4 - Commeation Statement.	Ţ-								
Partner/CoalitionName	- 1	Т	-			1	Т	_	
					ļ <u> </u>				
Partner/Coalition Name (con't.)	- 1	-	ES P		7) - I	f app	<u>plica</u> T	ble
		N	YR	. 2	0		<u> </u>		
Address		1			1	ı	1	т	
City State	Zip	·			7		η		
eMail									T
			ļ						
Phone Legally Bind with GP-0-0						rda: > Y		0	No
What tasks/responsibilities are shared with this partner (e.g. MM1 Sch	100l	Prog	gran	is o	r M	ulti	ple	Tas	sks)?
O MM1									
O MM2									
O MM3									
O MM4						Ť			
O MM5									
O MM6									
Additional tasks/responsibilities **O Watershed Improvement Strategy Best Management Practices requatersheds included in GP-0-08-002 Part IX.**	quire	d fo	r M	S4s	in i	mp	aire	;d	

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

	<u> </u>
	SPDES ID
Name of MS4 Village of South Blooming Grove	N Y R 2 0 A 5 4 2
Section 4 - Certification Statement	
"I certify under penalty of law that this document and all attachment direction or supervision in accordance with a system designed to as properly gathered and evaluated the information submitted. Based opersons who manage the system, or those persons directly responsite the information submitted is, the best of my knowledge and belief, aware that there are significant penalties for submitting false information and imprisonment for knowing violations."	sure that qualified personnel on my inquiry of the person or ble for gathering the information, true, accurate, and complete. I am
This form must be signed by either a principal executive officer or authorized representative of that person as described in GP-0-08-00	
First Name J a m e s Last Name L o F r Title (Clearly print title of individual signing report)	anco
Mayor	
Signature Chewro	Date 05/26/2018

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

if submittin	ig this form as part of a joint report on benait of	a coantion	liea	VÇ J	עזפ	ديرا	1D	Ulai	III.		
			SPI	DES	ID						
Name of MS4/Coalition	Village of South Blooming Grove		N	Y	R	2.	0	A	5	4	2
14dillo 011/10 1/ Codificon											

									V	Vat	er	Q	ual	ity	T	<u>rer</u>	ıds	<u> </u>											
The info	rmatio	on in	this	sec	tion	is	bei	ng 1	repo	orte	d (c	hec	k o	ne):															
● On be ○ On be H		fac	oalit	ion				bute	ed t	to th	nis	rep	ort	? [
1. Has	ted to	MS4 o sto	I/Co rmv	alit vat	tion er?	pı If	rod not	uce t, a	ed a	any ver	re _j No	poi an	ts (id p	doc oro	eum cee	ien d te	tin;	g w Iini	ate im	r q ım	ual Co	lity nti	trol	end Me	ası	ire Ye:		• 1	No
If Yes, o		one	of t	he f	ollo	win	ıg																						
O Repor	t(s) at	ttache	ed to	the	anı	nua	l re	por	t																				
○ Web :		s) whase p											vhe	re r	epc	ort(s	s) c	an	be :	acc	ess	ed ·	- no	ot h	om	e p	age) .	
										.]																			
			╁	<u> </u>		-						- 1						T	1							İ			
	H		\dagger													1	_										寸		_
	URL		!		<u>l</u> l		L	<u> </u>			ii	'			i				1			l				1			_
			_		[]																								
			==				<u>-</u>			<u> </u>																			
				\dagger				<u> </u>		Ī							-	_											
	URL			<u> </u>		L	L		<u> </u>	<u> </u>		l	1	1			!												_
				T	<u> </u>			Ť	Ī								•												
		$\overline{}$		 	 		 	1		1			<u> </u>						_						Ī				
	L URI	 ,				L	1	·					I				L		l						·			,! ,	
																	<u> </u>								_				
				Ī						T																			
	_		+	+=	T	i –	Ť	T	T	T -	Ì	Ť	Ī	Ť	Ī	Γ	-		<u> </u>										

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 South Blooming Grove	SPDES ID N Y R 2 0 A 5 4 2
Minimum Control Measure 1. Public Edu	ication 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	nt Practices
Check all topics that were included in Education and Outreach du	uring this reporting period:
Construction Sites	O Pesticide and Fertilizer Application
General Stormwater Management Information	O Pet Waste Management
Household Hazardous Waste Disposal	O Recycling
O Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
O Infrastructure Maintenance	O Trash Management
○ Smart Growth	O Vehicle Washing
O Storm Drain Marking	Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
O Other:	○ None
Other	
2. Specific audiences targeted during this reporting period:	
O Public Employees • Contractors	
Residential O Developers	
O Businesses • General Public	
O Restaurants O Industries	
Other: O Agricultural	
Stormshed Areas Other	

																							S	PD.	ES	D_						_
Name	of M	S4/	Coa	litic	n_V	'illag	e of	South	a Blo	omi	ng G	rove				_							Ŀ	N	Y	R	2	0 .	A !	5 4	4 2	2
3. W	/ha is r														se i	to	acl	ıie	ve :	edu	ıca	tior	an	ıd (out	rea	ch	goa	ıls o	lur	ing	,
O Cor	ıstrı	ıcti	on S	Site	Op	era	tors	Tr	ain	ed														#	Tra	ine	d					
O Dir	ect :	Ma	ilinį	gs																		,		#]	Mai	ling	gs			$\prod_{}$		
• Kio	sks	or	Oth	er I	Disp	olay	rs																	# L	oca	tion	ıs					1
O Lis	t-Se	rve	S																						# Ir	Li	st					
O Ma	iling	g Li	ist																						# Ir	ı Li:	st					
• Ne	wspa	ape	r A	ds c	or A	ırtic	eles																	# I	ays	Ru	n [1
O Pul	olic	Ev	ents	/Pr	esei	ntat	ions	3																# A	tter	ıdee	es [
O Sch	ıool	Pro	ogra	m																				# A	Atter	ndee	es					
O TV	Spe	ot/F	rog	ran	1																			# I	Days	Ru	ın					
• Pri																						То	tal #	#Di	stri	bute	ed [2	3
	Loca	itior		.g. 1	ibra a	ries,	tow	n off	fices H	, kio a	sks 1	1		Ι				Т		T												
		_				ر د					_		···		1	-	\dagger	1														•
										!				<u> </u>	<u> </u>	+	$\frac{1}{1}$	1														
						<u> </u>										Ť		-		\exists												
O Ot	her:		l		L						i									1												
																			!													
O W		'age	e:		ovi ede		spec	ific	we	eb a	ddr	esse	es -	- no	t h	on	ne p	age	e. (Con	tin	ue o	n ne	ext	pag	e if	ado	ditio	nal	spa	ace:	is
																								i .								
ប្រ	ŖĽ_		·	1	-			_		-					_				,		T					[<u>, </u>			$\overline{}$		
	_	<u> </u>		1	_			<u> </u>		_	1	<u> </u>	1		1					<u> </u>	<u> </u>	<u> </u>		<u> </u>								
		<u> </u>	<u> </u>			<u>_</u>	<u> </u>	<u> </u> _	-	<u> </u>		\downarrow	1	<u> </u> _	-				<u></u>				<u>_</u>		<u> </u>							

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

																									SPL	ES	ID						
Nar	neo	fΜ	S4/C	loal	itio	n_V	illag	e of	South	h Blo	omi	ng G	rove												N	Y	R	2	0	Α	5	4	2
			Page	e co	on't	t.:		Pro	ovic	le s	pec	ific	c w	eb	ad	dre	ess	es	- n	ot l	ıon	ne j	pag	e.									
	URL						_												T														
			+				:	<u> </u>						<u> </u>	 	╬	Ť	İ	\exists					-									
				+	\dashv										<u> </u>	<u> </u>	+	\dashv											-				
				l												٠			i	i	l							<u> </u>			<u>i</u> 1		
	URL													<u> </u>								•											
								<u> </u>			<u> </u>	! <u> </u>			 	†	+	\exists	7					_									
			+					<u> </u>				<u> </u>	l	<u> </u>	\perp	+	+	+									<u> </u>	<u></u>					
							<u> </u>	L	<u> </u>	<u> </u>	L	1	İ	<u> </u>			L_	1						L. <u> </u>			1	Ш.	Ш.		L		
	URL														T													_					
						 :=		† -	! <u></u>		Ī	<u> </u>	<u> </u>			1	Ť			-				<u></u>					Ť				
						<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>			+-	+	\dagger					<u> </u>					<u> </u>						_
						<u> </u>	<u> </u>	J			_		1	J				I					l		L			L	1	1	<u> </u>	<u> </u>	
	URL						<u> </u>		Τ				-			1								_						_			ļ
		I				<u> </u>		+	<u> </u>		 		<u> </u>	-	+-	Ť	1	-													T		
		<u> </u>				<u> </u>	 	+-	-	<u> </u>		<u> </u>	<u> </u>	<u> </u>	+	$\frac{1}{1}$					<u> </u>							 	†		╁	<u> </u>	
	L		<u> </u>			Ĺ	<u> </u>	<u> </u>	İ	<u> </u>	_	<u> </u>	1									<u> </u>	<u> </u>		<u> </u>		i			<u> </u>		1	L
	URI					-		T			T		1		T	Ţ										ļ			T		T		
		<u> </u>			<u> </u>	<u> </u>	<u> </u>	1			\vdash	1	+-		十	$\frac{1}{1}$						<u> </u>	<u> </u>	<u> </u>			-		T	 	T		T
	-	<u> </u>			 	<u> </u>	+-	 	+	<u> </u>	+-			t	\dagger	╁			<u>-</u>		<u> </u>	"	-				 	\vdash	†		╁		
	L	l	<u> </u>		1	<u>L</u> ,	<u>.</u>	1		<u> </u>		<u> </u>	1							<u> </u>	<u></u>	l	<u> </u>		1					i		1	
	URI	L				Τ			T		T	Τ			T	Τ		_				T	1		T		T	T		Γ-	T	Τ	
			 		<u> </u>	+-		+	+		+	 -	\dagger	$\frac{1}{1}$	$\frac{\perp}{\parallel}$	+			! <u> </u>		\vdash	╁	 	$\frac{\perp}{\parallel}$	 	$^{\perp}$	<u> </u>	T			\dagger	T	T
	<u></u>	$\frac{\bot}{\Box}$	1	<u> </u>	<u> </u>	<u> </u>	+-	1	╁	+	+	1	<u> </u>	+-	+	+			_	<u> </u>	<u> </u>		+-	<u> </u>	 	<u> </u>	 	 	1	+	\dagger	†	t
	L_		<u> </u>		<u>L.</u>		_ _	_ _					Ш						<u>L</u>	<u> </u>		Ь.				<u> </u>	1	. .				1_	
	UR	L 	T		Τ-		Τ	-	T	Т	T	Ţ-	T			T			ļ	T			1	Γ		T	Ţ			-		Τ	Τ
	F	-	_	<u>L</u>	<u> </u>	<u> </u>	1	1_	$\frac{1}{1}$	1	1	 	+	+	+	<u> </u>				t	 -		†	t	$\frac{\perp}{\parallel}$		+	╁	t	+	十	+	+
	F	<u> </u>	1	<u> </u>	<u> </u>	+	<u> </u>	+	+	\perp	+-	+-	 	+	<u></u>	<u> </u>	-		<u>L</u>	$\frac{\perp}{1}$	$\frac{1}{1}$	+	<u> </u>	$\frac{1}{1}$	+	+	 	<u> </u>	<u> </u>	-	$\frac{1}{1}$	+	\dagger
			1							1								L		L.,	L		1_	L			_l_	丄				\perp	$oldsymbol{\perp}$

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

		SPDES ID
Name of MS4/Coalition	Village of South Blooming Grove	N Y R 2 0 A 5 4 2
4. Evaluating Pro	ogress Toward Measurable Goals MCM	1
identified in your S	port on your progress and project plans towatormwater Management Program Plan (SW itional pages as needed.	
A. Briefly summa	rize the Measurable Goal identified in th	he SWMPP in this reporting period.
Distribute educa Public Hearings Adopt a road pro		
B. Briefly summa Goal.	rize the observations that indicated the o	overall effectiveness of this Measurable
2. Track number of 3. Track number of	r of school children exposed to stormwater f brochures/flyers distributed. f people at cleanup day. f material from road cleanup.	issues.
C. How many tim	es was this observation measured or eval	1
D. Has your MS4	made progress toward this Measurable	
E. Is your MS4 or	n schedule to meet the deadline set forth	in the SWMPP? • Yes • No
	rize the stormwater activities planned to ting cycle (including an implementation s	
2. Track number o	rt of school programs and document attender people at cleanup event(s) and weight of of brochures distributed.	
D. Has your MS4 or E. Is your MS4 or F. Briefly summa the next report 1. Continue support 2. Track number of	made progress toward this Measurable on schedule to meet the deadline set forth arize the stormwater activities planned to ting cycle (including an implementation set of school programs and document attended people at cleanup event(s) and weight of the set of school programs and document attended to the school programs attended to the school programs and the school programs attended to the school programs attended to the school programs attended to the school programs attended to the school programs attended to the school programs at the school programs attended to the school programs attended to the school programs attended to the school programs attended to the school programs at the school programs at the school programs at the school programs at the school program attended to the school program at the school program attended to the school program at the school program attended to the school program at the school program at the school program at the school program at the school program at the school program at the school program at the school program at the school program at the school program at the school program at the school program at the school program at the scho	(ex.: samples/participants/of Goal during this reporting period? Yes O No in the SWMPP? Yes O No o meet the goals of this MCM during schedule).

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			ID bla	nk.	
Name of MS4/Coalition Village of South Blooming Grove		PDES ID I Y R 2	0 A	5	4 2
Minimum Control Measure 2. Public Inv	olvement/	Participa	tion		
The information in this section is being reported (check one):					
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 					:
1. What opportunities were provided for public participation development, evaluation and improvement of the Storms (SWMP) Plan during this reporting period? Check all the	water Mana			n	
Cleanup Events		# Events			1
O Comments on SWMP Received	ŧ	Comments			
● Community Hotlines Phone # (8 4 5	7 8 2	- 2	6	0 0
Phone # (Phone # () 🔲	-		
Phone # (Phone # () 📗	-		
Phone # (Phone # () []	-		
Phone # (Phone # () 📗	-		
Phone # (Phone # () 📗	-		
O Community Meetings		# Attendees			
○ Plantings		Sq. Ft.			
Storm Drain Markings		# Drains			8
○ Stakeholder Meetings		# Attendees			
O Volunteer Monitoring		# Events			
Other:					
2. Was public notice of availability of this annual report as Program (SWMP) Plan provided?	nd Stormw	ater Manag	gemen O Y	ı t Tes	O No
○ List-Serve		# In List			
Newspaper Advertising		# Days Run			1
○ TV/Radio Notices		# Days Run			
Other: Village Board ager	n d a				

MCM 2 Page 1 of 6

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

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.

SPDES ID

Nar	ne o	fΜ	S4/0	Coa	litio	n V	illag	e of	South	ı Blo	omii	ng G	rove											N	Y	R	2	0	Α	5	4	2
2.	UF	RL((s)	con	't.:	}									e no	otic	e(s) ca	an I	e 2	acc	esso	ed ·	- no	ot b	on	ıe p	ag	e.			
	h	t	t	р	:	1	/	v	i	1	1	a	g	е	0	f	ន	0	u	t	h	b	1	0	0	m	i	n	g	g	r	0
	v	е		С	0		<u> </u>																									
						<u> </u>							Ī					-														
•	URI			<u> </u>	ł			i	L		l	L	l	!			·	l		L												
				<u> </u>														İ														
	URL															•											<u> </u>					
·																										<u> </u>						
URL																																
																							_			<u> </u>						
				Ī					Ţ															<u> </u>								
						T																										
	UR	 L																				,										.
																 												L	<u> </u>			
																							<u> </u>									
					Ī					T																						
	UR	L																-		_		,		, <u> </u>			1				_	
										<u> </u>												<u> </u>	1	<u> </u>		L					<u> </u>	
																				<u> </u>		<u> </u>						L		L		_
	ſ	"			T		Ī																					_				
	UF	<u>L</u>										_			1		_	1		_							-	1-	_			1
											<u> </u>				1			_		1		<u> </u>	<u> </u>					<u> </u>	1	<u> </u>	<u> </u>	
																<u> </u>						<u> </u>		<u> </u>					\perp		<u> </u>	
	F	T	T	T	T	Ī	T	T	T							T																

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 8 \end{bmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

Nar	neo	fΜ	S4/0	Coa	litio	n V	illag	e of	Sout	h Bk	omi	ng G	rove											N	Y	R	2	0	A	5	4	2
2.																																
	Pk	eas	e p	rov	ide	sp	eci	fic	ad	dre	ess(es)	wh	ere	e no	tic	es	can	be	ac	ces	sec	i - 1	not	ho	me	pa	ge.				
	URL				-			_		}	Ι		<u> </u>											Т								П
								<u></u>		<u> </u>	<u> </u>		<u> </u>																			
									<u> </u>	<u></u>												_										
										<u></u>					٠																	
	URL										1													1								
			_																											_		
									<u> </u>																							
	URL							_													ı								· .			
																																<u> </u>
										<u> </u>			L																			
										,																						
	URL																															
		·																														
				-																												
	url				<u> </u>	·	i	L		j	J	i)			l								L					<u> </u>	
									<u> </u>																<u> </u>							
		<u> </u>	 					<u> </u>	<u> </u>	 	1						<u> </u>			<u> </u>						L	L					
	L URI	L	L		<u> </u>		<u> </u>		<u> </u>	L	L	l		<u> </u>	<u> </u>	!	l	<u> </u>	•	l	L	L	<u> </u>	Li	I	!		!	,			
	OKL	ĺ						Ţ			T				ľ									Ī							•	
			<u> </u>	<u> </u>			<u> </u>								-		<u>: </u>					<u> </u>				ļ						╁
			<u></u>	<u> </u>		<u> </u> 		<u> </u>	1	<u> </u> 	<u> </u>	<u> </u>			<u> </u>	-	L					l 	<u>!</u> _	<u> </u>		<u> </u>	<u> </u>	<u> </u>				一
	L	L.	L				<u>L</u>	<u> </u>	<u></u>		<u> </u>	<u> </u>		}			<u> </u>					L	<u></u>		<u> </u>			<u> </u>		Ш	<u> </u>	
	URI	ĺ				Ţ			Γ				<u> </u>				T		Γ			<u> </u>			_						ľ	Г
	<u></u>		<u></u>	<u>L</u>		<u> </u>	<u> </u>	<u> </u>	 	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>		Н	<u> </u>	_
	<u></u>	<u> </u>		<u> </u>		$\frac{1}{1}$	<u> </u>	<u> </u>	_	<u> </u>	<u> </u> 	<u> </u>	1		<u> </u>	<u> </u>		<u> </u>	<u> </u>		<u> </u> 	<u> </u>	 			<u> </u>	<u> </u>		H	L		
	_	l T					 			<u> </u> 	<u> </u> 				<u> </u>							 	 	<u> </u> 		<u> </u>						

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. SPDES ID NYR 0 A 2 2 Village of South Blooming Grove Name of MS4/Coalition 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents? Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed. ● Annual Report ● SWMP Plan ○ Comments MS4/Coalition Office Department V i 1 1 C 1 k а е e r g Address 2 9 5 2 0 0 В 0 x 8 1 1 S t t R t 8 Ρ a е 0 u е G NY 1 0 9 1 4 i n B 1 0 0 m g r 0 v е Phone 2 2 0 0 7 8 6 8 5 O Library Address O SWMP Plan O Comments O Annual Report Zip City Phone ○ SWMP Plan ○ Comments O Annual Report O Other Address City Zip Phone Comments SWMP Plan Annual Report Web Page URL: i 1 1 f o|u|t|h|b 1 \circ 0 m n g g i a g е 0 S h| t t p v o | vе c o m Please provide specific address of page where report can be accessed - not home page. O Comments O eMail

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

		SPL	תו כת	<u>' </u>			
Name of MS4/Coalition Village of South Blooming Grove		N	YR	2	0 A	. 5	4 2
4.a. If this report was made available on the internet, what da	ate was i	t po	sted?	,			
Leave blank if this report was not posted on the internet.	0	6	/ 0	5	/ 2	0	1 7
4.b. For how many days was/will this report be posted?						3	6 5
If submitting a report for single MS4, answer 5.a If submitt	ting a joi	nt re	eport,	ans	wer 5	.b	
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting peri	od?	1		0 Y / _	es	• No
If No, is one planned?					O Y	es	O No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	ıtin	g to t	his :	repoi	rt dı	ıring
this reporting period?					O Y	'es	No
If No, is one planned for each?					O Y	es	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.					O Y	es	No

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.

SPDES ID

Name of MS4/Coalition	Village of South Blooming Grove	N	Y R 2 0	A 5 4 2
7. Evaluating Prog	gress Toward Measurable Goals MC	M 2		
identified in your Sto	ort on your progress and project plans t ormwater Management Program Plan (tional pages as needed.			
A. Briefly summar	ize the Measurable Goal identified in	the SWMPP in t	this reportin	ng period.
1. Public review at	Village Board meeting.			
B. Briefly summar Goal.	rize the observations that indicated th	e overall effective	eness of this	Measurable
	rided to public at board meetings. Storm ssues addressed at Planning Board Mee		issed regardi	ng local
C. How many time	es was this observation measured or	evaluated in this r	eporting pe	eriod?
			_	1
D. Hos your MS4	made progress toward this measural	le goal during thi		ples/participants/events
D. Has your Mist	made progress toward this measurar	ic goar during an		Yes O No
E. Is your MS4 on	schedule to meet the deadline set for	th in the SWMPI		Yes O No
	rize the stormwater activities planned ing cycle (including an implementati		s of this MC	CM during
2. Inform public of	ort on Village website. Sannual report at Village Hall meetings es reviewed at public hearing with Plar	ning Board.		

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

Name of MS4/Coalition Village of South Blooming Grove	N Y R 2 0 A 5 4 2
Minimum Control Measure 3. I	Ilicit Discharge Detection and Elimination
The information in this section is being reported (c	check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	is report?
1. Enter the number and approx. percent o	f outfalls mapped: 38# 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	reened for dry weather discharges during this inventory)?
3.a. What types of generating sites/sewershed reporting period?	ls were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	O Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	○ None
O Sewersheds: Residential W	atersheds

	SPDES ID
Name of MS4/Coalition Village of South Bloomin	g Grove N Y R 2 0 A 5 4 2
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 Sev	wers O Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
Other:	● None
4. How many illicit discharges/pot reporting period?	ential illegal connections have been detected during this
5. How many illicit discharges have	ve been confirmed during this reporting period?
6. How many illicit discharges/ille period?	gal connections have been eliminated during this reporting
	ing been completed in this reporting period? O Yes O No t was completed in this reporting period?
8. Is the above information availal Is this information available on If Yes, provide URL(s):	the web? • Yes • No
Please provide specific address of URL	page where map(s) can be accessed - not home page.
URL	

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

.		ovid				}												_	-				Γ	<u> </u>				
																	L						l	<u>-</u>				
					<u> </u>						·							L					L <u> </u>					<u> </u>
JRL					<u></u>	1			·	L	<u> </u>		l	l!		L	l	1	<u> </u>				<u> </u>	I	!_	<u> </u>	L	I <u>. </u>
JRL											1	1								1					1	1		
																											<u></u>	
			1	i		<u> </u>																	<u> </u>	ļ <u>.</u>				
													l												<u> </u>			ļ
URL						т	_			1		1					T—						ſ	Т	1		1	
_		+										<u> </u>				<u> </u>	<u> </u>		<u> </u>						<u> </u>		<u> </u>	
		<u> </u>	<u> </u>			<u> </u>				<u> </u>	<u> </u>				i i	<u>L</u>	<u> </u>	<u> </u>		L		i i			<u> </u>	<u></u>	<u> </u>	
			<u> </u>	l																			<u>. </u>	<u>L</u> .				
URL			1		Т	Τ.	Ţ	Ţ	T	1		1	1				Τ	Τ	Τ-				· [Ţ	Т	Τ.	Ţ.	-
	1 1		<u> </u>		<u> </u>	<u> </u>		<u> </u>	<u>l</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u> 	<u> </u>			<u> </u>	<u> </u>	<u> </u>				<u> </u>	<u>1 </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
	1	_	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u> 	<u> </u>		1	 	<u> </u>	1	<u>l.</u>		<u> </u>	L
							<u>l</u>					<u>L.</u> .	<u> </u>			<u> </u>		<u>.</u>	<u>_</u>		<u>L</u>						<u> </u>	L.

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

SPDES ID	_
Name of MS4/Coalition Village of South Blooming Grove N Y R 2 0 A 5 4 2	2
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.	
 All outfalls and tributary areas have been mapped in GIS format. Training for IDDE provided to Highway Department personnel. 	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurab Goal.	ole
1. 20% per year minimum to be re-evaluated to assure all inspected at least once over a 5-year period.	
C. How many times was this observation measured or evaluated in this reporting period?	1
D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes O	
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes O	
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	
 Adopt procedures for IDDE inspections and tracking. Continue training municipal employees. Track IDDE inspections in GIS system. 	

SWPPP process?

MS4 Annual Report Form

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.

Name of MS4/Coalition Village of South Blooming Grove	SPDES ID N Y R 2 0 A 5 4 2
Minimum Control Measures 4 an	d <u>5.</u>
Construction Site and Post-Construction	n Control
The information in this section is being reported (check one):	i.
 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, ordina mechanism that provides equivalent protection to the NYS SPI Stormwater Discharges from Construction Activities?	ance or other regulatory DES General Permit for Yes O No
1b. Has each Town, City and/or Village contributing to this report equivalent to a NYSDEC Sample Local Law for Stormwater M Sediment Control through either an attorney cerfification or us Analysis Workbook?	[anagement and Erosion and
If Yes, Towns, Cities and Villages provide date of equivalent NYS	Sample Local Law. ○ 09/2004 ● 03/2006 ○ NT
2. Does your MS4/Coalition have a SWPPP review procedure in	place? Se Yes O No
3. How many Construction Stormwater Pollution Prevention Planereviewed in this reporting period?	ns (SWPPPs) have been
4. Does your MS4/Coalition have a mechanism for receipt and co comments related to construction SWPPPs?	nsideration of public ● Yes ○ No ○ NT
If Yes, how many public comments were received during this repo	rting period?
5. Does your MS4/Coalition provide education and training for c	ontractors about the local

● 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:

O Notices of Violation	#	O No Authority
O Stop Work Orders	#	O No Authority
O Criminal Actions	#	O No Authority
O Termination of Contracts	#	O No Authority
O Administrative Fines	#	O No Authority
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, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 8 & 1 \end{vmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPI	DE <u>S</u>	ID			٠			
Name of MS4/Coalition Village of South Blooming Grove	N	Y	R	2	0	A	5	4	2

Minimum Control Measure 4. Construction Site Stormwater Runoff 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?		
1.	How many construction projects have been authorized for disturbances of one during this reporting period?	acre or 1	more 2
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 2
3.	What percent of active construction sites were inspected during this reporting	period?	● NT 2 %
4.	What percent of active construction sites were inspected more than once?		• NT 2 %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? Yes	the NY	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preve (SWPPPs) of construction projects that are subject to MS4 review and approved Yes		ans ONT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made as public review?	ailable i O Yes	for O No
	If Yes use the following page to identify location(s) where SWPPPs can be accessed	d.	

	SPDES ID												
Name of MS4/Coalition Village of South Blooming Grove	N Y R 2 0 A 5 4 2												
6. con't.: Submit additional pages as needed.													
MS4/Coalition Office													
Department													
Building Department													
Address													
8 1 1 State Route 2 0 8	, PO box 295												
City	Zip												
Blooming Grove NY	1 0 9 1 4 -												
Phone													
(8 4 5) 7 8 2 - 2 6 0 0													
O Library													
Address													
City	Zip												
City													
Phone													
/ Indie													
O Other													
Address													
City	Zip												
City													
Phone													
(
CANAL DE LANGUA DE LA CANAL DE	Do son he assessed not home nece												
O Web Page URL(s): Please provide specific address where SWPPl	es can be accessed - not nome page.												
URL													
URL													

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.

SPDES ID

Name of MS4/Coalition Village of South Blooming Grove	N	Y R 2) A 5	4 2
7. Evaluating Progress Toward Measurable Goals MCM 4				
Use this page to report on your progress and project plans toward dentified in your Stormwater Management Program Plan (SWMI).C.1. Submit additional pages as needed.				Part
A. Briefly summarize the Measurable Goal identified in the S	WMPP in	this reporti	ng peri	od.
1. Village Planning Board requires 100% of projects submit SWI evaluation. SWPPPs are reviewed by Planning Board engineer.	PPP for rev	ew of Plann	ing Boa	ard
B. Briefly summarize the observations that indicated the over Goal.	rall effectiv	eness of thi	s Meas	urable
 1. 100% of review of projects village has adopted. 2. Project Tracking by Planning Board engineer coordinated with 	n Building l	Department (officials	.
C. How many times was this observation measured or evalua	ted in this	reporting p	eriod?	
		(24. 4. 27		1 rticipants/even
D. Has your MS4 made progress toward this measurable goa	ıl during th			
			Yes	○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	the SWMP	P?	Yes	○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sch	eet the goa edule).	ls of this M	CM du	ring
 Continue 100% SWPPP review. Continue 100% site inspection of all construction sites within 	village if tl	ney are activ	e.	
	<u>.</u>			

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

				SPDES ID	
Name of MS4/Coalition	Village of South Bloo	ming Grove		N Y R	2 0 A 5 4 2
<u>Minimum (</u>	Control Mea	sure 5. Post	-Construction	on Stormwater N	<u> Ianagement</u>
The information in th	is section is bein	g reported (che	ck one):	:	
On behalf of an indOn behalf of a coalHow m		ributed to this	report?		
•	• • •			anagement practices leporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practice	es				
O Filter Systems					
O Infiltration Basins					
Open Channels					
• Ponds		2	2	0	
O Wetlands					
Other					
2. Do you use an o BMPs, inspecti			abase, spreads	sheet) to track post-	construction ○ Yes • No
3. What types of Development/E		-		o implement Low In inciples?	ipact
O Building Codes	O Municipal C	omprehensive I	Plans		
Overlay Districts	Open Space	Preservation Pr	ogram		
Zoning	● Local Law o	r Ordinance			
O None	O Land Use R	egulation/Zonin	g		
O Watershed Plans	Other Comp	rehensive Plan			
Other:					

		SPI	DES I	\mathbb{D}						_
Nar	me of MS4/Coalition Village of South Blooming Grove	N	Y	R	2	0	A	5	4	2
	. Are the MS4s contributing to this report involved in a regional/wate					•	eff Ye			No
4b	b. Does the MS4 have a banking and credit system for stormwater man	ageme	nt pi	rac	tic		Υe	es	•	No
4c	2. Do the SWMP Plans for each MS4 contributing to this report includ and approval of banking and credit of alternative siting of a stormw	e a pro ater ma	toco mag	l fo	or e ien	t pı	uat act Ye	ice	?	No
4.3	i. How many stormwater management practices have been implement	ed as p	art o	f t	his	sys	ten	a in	thi	s
40	reporting period?	٠							0	

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

Name of MS4/Coalition Village of South Blooming Grove SPDES ID N Y R 2 0 A 5 4 2
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.
 1. 100% site review by Building Department and Village engineer prior to Certificate of Occupancy. Require enforceable map notes for maintenance of BMP's.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
100% site review completed.
C. How many times was this observation measured or evaluated in this reporting period?
1 1 1
(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
1. Continue requiring map notes for site plans with certification as to construction compliance and long term maintenance.

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.

	SPL	ES	Ш						
Name of MS4/Coalition Village of South Blooming Grove	N	Y	R	2	0	A	5	4	2

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	<u></u>			
How many MS4s contributed to this rep	ort?			
4 00 00 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	41 - 4 4	:14		mtwihuto
1. Choose/list each municipal operation/facility	tnat contr	ibutes or n	nay potentiany co	ther the
Pollutants of Concern to the MS4 system. For operation/facility has been addressed in the M	r each ope (SA!s/Cos	rauon/rac lition!s Sto	mny murcate when	ment
Program(SWMP) Plan and whether a self-ass	154 S/CUA. Facemant l	ias peen na	erformed during	the
reporting period. A self-assessment is perform	nod to 1)	determine	the sources of no	llutants
potentially generated by the permittee's opera	ations and	facilities:	2) evaluate the	, II II VIII XX VIII
effectiveness of existing programs and 3) ide	ntify the r	nunicinal (onerations and fa	cilities
that will be addressed by the pollution preven	ntion and s	good house	ekeening program	ı. if it's
not done already.	inon unu	5000 11000		
not done an eady.				
			Self-Assessn	<u>nent</u>
			A 11 / A - 45	L-110 21-4
			Operation/Activity	
Operation/Activity/Facility Ac	ldressed i	n SWMP?	performed within	the past 3
		n SWMP?	performed within years?	the past 3
Street Maintenance	• Yes	○ No	performed within years? • Yes	the past 3 O No
Street Maintenance		○ No • No	performed within years? Yes Yes Yes	• No • No
Street Maintenance Bridge Maintenance Winter Road Maintenance	• Yes • Yes • Yes	○ No ● No ○ No	performed within years? Yes Yes Yes Yes	the past 3 O No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage.	• Yes • Yes • Yes • Yes • Yes	O No No O No O No	performed within years? Yes Yes Yes Yes Yes Yes Yes	O No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management	• Yes • Yes • Yes • Yes • Yes	O No O No O No O No	performed within years? Yes Yes Yes Yes Yes Yes Yes Yes	No No No No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance	• Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No	performed within years? Yes Yes Yes Yes Yes Yes Yes Yes Yes	• No • No • No • No • No • No • No • No
Street Maintenance	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No	performed within years? Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	No No No No No No No No No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance Marine Operations	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No	performed within years? Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	 the past 3 ○ No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance Marine Operations Hydrologic Habitat Modification	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No No No	performed within	 the past 3 No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance Marine Operations Hydrologic Habitat Modification Parks and Open Space	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No	performed within	 the past 3 No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance Marine Operations Hydrologic Habitat Modification Parks and Open Space Municipal Building	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No	performed within	 the past 3 No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance Marine Operations Hydrologic Habitat Modification Parks and Open Space Municipal Building Stormwater System Maintenance	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No	performed within	 the past 3 No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbance Right of Way Maintenance Marine Operations Hydrologic Habitat Modification Parks and Open Space Municipal Building	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No	performed within	 the past 3 No

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.

R 2 0 Α 5 Υ Village of South Blooming Grove Name of MS4/Coalition 2. Provide the following information about municipal operations good housekeeping programs: # Acres Parking Lots Swept (Number of acres X Number of times swept) # Miles Streets Swept (Number of miles X Number of times swept) 3 0 # 5 Catch Basins Inspected and Cleaned Where Necessary 5 Post Construction Control Stormwater Management Practices 1 Inspected and Cleaned Where Necessary #Lbs. 0 O Phosphorus Applied In Chemical Fertilizer #Lbs. O Nitrogen Applied In Chemical Fertilizer 0 0 0 O Pesticide/Herbicide Applied # Acres (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) 3. How many stormwater management trainings have been provided to municipal employees during this reporting period? 1 4. What was the date of the last training? 2 5. How many municipal employees have been trained in this reporting period? 1 6. What percent of municipal employees in relevant positions and departments receive stormwater management training? 5 %

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

Name of MS4/Coalition Village of South Blooming Grove N Y R 2 0 A 5 4 2
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.
 Salt storage and maintenance addressed- program to cleanup after storms. DPW personnel trained in housekeeping practices. All catch basins cleaned at least once annually. Street sweeping program - each road swept numerous times per year. Documentation of street sweeping be implemented.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
 Salt storage areas cleaned after storms. 100% of catch basins cleaned 100% street sweeping. DPW personnel trained.
C. How many times was this observation measured or evaluated in this reporting period? (ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal during this reporting period? ● Yes ○ No
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).
Adopt housekeeping practices and record keeping. Additional tracking of maintenance activities. Continue to train municipal employees.

		SPE	DE <u>S</u>	ID						
Name of MS4/Coalition Village of South Blooming Grove	N	Y	R	2	0	A	5	4	2	

ontributed to this re ons or check NA as	port?	below.
ons or check NA as		below.
ons or check NA as		below.
	s indicated in the table	below.
	s indicated in the table	below.
		2010 111
Answer		
	Check NA	(POC)
•		<u> </u>
1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
		Phosphorus
.,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
-	0.2.4.5.95.10.13.12	Phosphorus
		Phosphorus
		Phosphorus
1,0,7a-0,6a,9	2,3,4,3,80,10,11,12	- I nospitorus
1 4 6 7a-d 8a 9	2 3 5 8h 10 11 12	Phosphorus
		Phosphorus
		Phosphorus
-		-
1.4.7a-d.9.10.11.12	2,3,5,6,8a,8b	Pathogens
		Pathogens
1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
<u> </u>		-
1,4,7a-d,8a,9,10,11,12		Pathogens and Nitrogen
1,4,7a-d,8a,9,10,11,12		Pathogens and Nitrogen
1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
	-	
		Phosphorus
		Phosphorus
1,4,6,7a-d,8a,9	2,3,5,85,10,11,12	Phosphorus
1 2 2 4 7a 4 0 10 11 13	5.6.20.25	Pathogens
		Pathogens
		Pathogens
	1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9 -1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9,10,11,12	,2,77a-d,8a,8b,9 3,4,5,10,11,12 ,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 ,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 ,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 ,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 ,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 ,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 ,4,7a-d,9,10,11,12 2,3,5,6,8a,8b ,4,7a-d,9,10,11,12 2,3,5,6,8a,8b ,4,7a-d,9 2,3,4,5,8a,8b,10,11,12 ,4,7a-d,8a,9,10,11,12 2,3,5,6,8b ,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 ,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 ,5,6,8a,8b 5,6,8a,8b ,5,6,8a,8b 5,6,8a,8b ,5,6,8a,8b 5,6,8a,8b

		SPDES ID		
Naı	ne of MS4/Coalition Village of South Blooming Grove	N Y R 2	0 A 5	4 2
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (infrastructu Yes	re) Insp O No	ection O N/A
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report		n inspec	ted 0 %
5.	Has your MS4/Coalition developed a program that provid NYSDEC SPDES General Permit for Stormwater Dischar (GP-0-08-001) to reduce pollutants in stormwater runoff for disturb five thousand square feet or more?	ges from Constructi	on Activ	ities
6.	Has your MS4/Coalition developed a program to address prunoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Act the New York State Stormwater Design Manual Enhanced Standards?	s that disturb greater e NYS DEC SPDES ivities (GP-0-08-001)	than or General , includi	
7a	Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?	educe erosion or ○ Yes	O No	• N/A
7b	.How many projects have been sited in this reporting perio	od?		0
7c	. What percent of the projects included in 7b have been con	npleted in this repor	ting peri	od?
7 d	l.What percent of projects planned in previous years have b		D : .	0 %
		₩ No	Projects	Planned
8a	Has your MS4/Coalition developed and implemented a ture procedures policy that addresses proper fertilizer applicate lands?	rf management praction on municipally (○ Yes	wned	O N/A
81	o.Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper disposal of grass			l
	municipally owned lands?	○ Yes	No	O N/A

Name of MS4/Coalition Village of South Blooming Grove	N Y R 2 0 A 5 4 2	:]
9. Has your MS4/Coalition developed and implemented a pro-	ogram of native planting? • Yes O No O N/	A
10. Has your MS4/Coalition enacted a local law prohibiting population prohibiting goose feeding?	et waste on municipal properțies a ● Yes ○ No ○ N/A	
11. Does your MS4/Coalition have a pet waste bag program?	O Yes ● No O N/.	4
12. Does your MS4/Coalition have a program to manage goose populations?	e ○ Yes • No ○ N/.	A