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# MS4 Annual Report Cover Page

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

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# MS4 Annual Report Cover Page

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

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 9

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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	nt or acc	eptan	ce c	of:				
● An Annual Report for a single MS4								
A Single Entity (Per Part II.E of GP-0-10-002)								
○ A Joint Report								
Joint reports may be submitted by permittees with legally b	binding.	agree	me	nts.				
If Joint Report, enter coalition name:								
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MCC form for period ending March 9, 2 0 1 9

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

Important Instructions - Please Read

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

- 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

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

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For each contact, select all that apply:

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

First Name	MI Last Name
Brett	Sherman
Title	
StaffDesigner	
Address	
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CT.	
City	State Zip
New Windsor	State Zip  N Y 1 2 5 5 3 -
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MCC form for period ending March 9, 2 0 1 9

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

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#### **Section 4 - Certification Statement**

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

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

First Name G e o r g e	MI	Last Name G r e e n
Title (Clearly print title of individual signing report)  Supervises or		
Signature Seoze a-ger		Date   2 3 / 2 2 5 @

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

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

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

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4. Evaluating Prop	gress Toward Measurab	le Goals MCM 1			
identified in your St	ort on your progress and p cormwater Management Pr tional pages as needed.		_	-	Part
A. Briefly summar	rize the Measurable Goal	l identified in the SV	VMPP in this rep	orting peri	od.
	booth and kiosk with infonent of household hazardo		rial.		
					,
B. Briefly summar Goal.	rize the observations that	indicated the overa	ll effectiveness of	f this Measi	urable
1. 21 pamphlets tak 2. Annual advertise			-		
C. How many time	es was this observation m	neasured or evaluate	ed in this reportin	ng period?	1
D. Has vour MS4 r	made progress toward th	is Measurable Goal		.: samples/para rting period	_
•			0 1	• Yes	
E. Is your MS4 on	schedule to meet the dea	ndline set forth in the	e SWMPP?	Yes	O No
	rize the stormwater activing cycle (including an in	-	<del>-</del>	MCM dur	ing
	kiosk at Community Day rtise household cleanup.	-			

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

				V	/ 11 / 11	,					
Name of MS4/Coalition Town of New Windsor				N	YR	2	0	Α	2	4	1
Minimum Control Measure 2.	Public Inv	volver	nen	t/P	arti	cipa	atio	<u>on</u>			
The information in this section is being reported (check	k one):										
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this re</li> </ul>	eport?										
1. What opportunities were provided for public development, evaluation and improvement o (SWMP) Plan during this reporting period?	f the Storm	water	Mai	nag			-	ran	1		
• Cleanup Events					#Eve	nts					2
O Comments on SWMP Received				# C	omme	nts					
• Community Hotlines	Phone#	(84	5	)	5 6	5	_	8	8	0	0
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O Community Meetings				# 1	Attend	ees					
O Plantings					Sq.	Ft.					
O Storm Drain Markings					#Dra	ins					
O Stakeholder Meetings				# 4	Attend	ees					
O Volunteer Monitoring					#Eve	nts					
Other:											
2. Was public notice of availability of this annu Program (SWMP) Plan provided?	ıal report aı	nd Sto	rmw	at€	er Ma	ınag		ent Ye		0]	No
○ List-Serve					# In I	ist					
O Newspaper Advertising				# I	Days R	un					
○ TV/Radio Notices				# I	Days R	lun					
Other: TownBoardAge	n d a										
• Web Page URL: Enter URL(s) on the following to	wo pages.										

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

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

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

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

SPDES ID

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

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

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

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Name of MS4/Coalition Town of New Windsor		N .	YR	2	0 A	. 2	4 1	
4.a. If this report was made available on the internet, what da	ate was it	pos	sted?					
Leave blank if this report was not posted on the internet.	0	6	/ 1	0	/ 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 submitt	ing a join	ıt rej	port,	ans	wer 5	.b		
5.a. Was an Annual Report public meeting held in this report	ing neric	nd?			ΟY	es	• N	n
If Yes, what was the date of the meeting?			/		1			
If No, is one planned?					O Y	es	• N	0
5.b. Was an Annual Report public meeting held for all MS4s	contribu	ting	to th	nis 1	epor	t dı	ıring	
this reporting period?					O Y	es	• N	0
If No, is one planned for each?					ОΥ	es	• N	Э
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.					ΟY	es	• N	Э

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

	SPDES ID
Name of MS4/Coalition Town of New Windsor	N Y R 2 0 A 2 4 1
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
<ol> <li>Annual Report posted to website.</li> <li>Town cleanup events waste disposal.</li> </ol>	
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
<ol> <li>Track number of comments.</li> <li>Bags of waste disposed of from events.</li> </ol>	
C. How many times was this observation measured or evaluat	ed 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	ne SWMPP?  ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheen	et the goals of this MCM during
<ol> <li>Modify website to track "hits" on stormwater Annual Report an stormwater websites.</li> <li>Continue to sponsor cleanup events and track total waste remove</li> </ol>	

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

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Nar	ne of MS4/Coalition Town of New Windsor									Y R		0	A	2	4 1
	Minimum Control Measure 3.	Illi	icit I	Discl	hai	ge D	<u>ete</u>	ecti	ion :	and	Eli	imi	nat	tio <u>r</u>	<u>1</u>
Th	e information in this section is being reported	(ch	eck on	ne):											
• (	On behalf of an individual MS4			/-											
0 (	On behalf of a coalition  How many MS4s contributed to t	this	repo	rt?											
1.	Enter the number and approx. percent	of (	outfa	lls m	ap	ped:				8	1 #		1	0	0 %
2.	How many of these outfalls have been s reporting period (outfall reconnaissance				-	weat	her	dis	scha	rges	duı	ring	g thi	is	0
3.8	.What types of generating sites/sewershoreporting period?	eds	were	e tarş	gete	ed for	ins	peo	etion	du:	ring	thi	S		
	O Auto Recyclers	С	Land	iscap	ing	(Irriga	atior	ı)							
	O Building Maintenance	С	Mari	inas											
	○ Churches	С	) Meta	al Pla	tein	g Ope	rati	ons							
	O Commercial Carwashes	С	) Quto	loor I	lui	d Stor	age								
	O Commercial Laundry/Dry Cleaners	Ç	) Park	ing L	ot l	Mainte	enan	ce							
	O Construction Vehicle Washouts	С	Print	ing					•	÷					
	<ul><li>Cross-Connections</li></ul>	С	Resid	dentia	al C	arwas	hing	3							
	O Distribution Centers	С	Resta	auran	ts										
	O Food Processing Facilities	С	Scho	ols a	nd	Unive	rsiti	es							
	O Garbage Truck Washouts		Septi	ic Ma	aint	enance	<del>)</del>								
	O Hospitals	С	Swin	nminş	g P	ools									
	O Improper RV Waste Disposal	0	Vehi	cle F	uel	ing									
	O Industrial Process Water	0	Vehi	cle N	Iain	t./Rep	air	Sho	ps						
	Other:	Q	None	e											
	Sewer Interco	n	n e	e C	t	io	n	ន							
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This report is being submitted for the reporting period ending March 9, If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID N Y R 2 0 Name of MS4/Coalition 3.b. What types of illicit discharges have been found during this reporting period? O Broken Lines From Sanitary Sewer O Industrial Connections O Cross Connections ○ Inflow/Infiltration O Failing Septic Systems O Pump Station Failure O Floor Drains Connected To Storm Sewers O Sanitary Sewer Overflows O Illegal Dumping O Straight Pipe Sewer Discharges Other: None 4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 0 0 5. How many illicit discharges have been confirmed during this reporting period? 6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0 7. Has the storm sewershed mapping been completed in this reporting period? Yes O No If No, approximately what percent was completed in this reporting period? 용 8. Is the above information available in GIS? O Yes No Is this information available on the web? O Yes No If Yes, provide URL(s): Please provide specific address of page where map(s) can be accessed - not home page. URL URL

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

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

·	SPDES ID
Name of MS4/Coalition Town of New Windsor	N Y R 2 0 A 2 4 1
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWM III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
1. Review 20% of outfalls each year	
•	
B. Briefly summarize the observations that indicated the ove Goal.	rall effectiveness of this Measurable
1. Track IDDE work on form for reporting and entry into GIS sy	stem.
C. How many times was this observation measured or evalua	
,	(ex.: samples/participants/ev.
D. Has your MS4 made progress toward this measurable goa	
E. Is your MS4 on schedule to meet the deadline set forth in t	● Yes ○ No the SWMPP?
a. 13 your 1154 on senedule to meet the dedume see for in in	● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sch	
1. 20% of outfalls to be reviewed in dry weather inspection per y 2. Inspections to be tracked in GIS system.	ear.

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

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

SPDES ID

Yes

 $\bigcirc$  No

 $\circ$  NT

Name of MS4/Coalition Town of New Windsor		N Y	R	2	0 2	2	4 1				
Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control											
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</li> <li>How many MS4s contributed to this report?</li> </ul>											
1a. Has each MS4 contributing to this report adopted a law, or mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?				,	_	for	O No				
1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?  • Yes • No • No											
If Yes, Towns, Cities and Villages provide date of equivalent 1		ple I 9/200			aw. 03/20	06	O NT				
2. Does your MS4/Coalition have a SWPPP review procedure	in place	?			• Y	res	O No				

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public

reviewed in this reporting period?

comments related to construction SWPPPs?

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>	#	2	O No Authority
<ul><li>Stop Work Orders</li></ul>	#	0	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, 2 0 1 9

	SPDES ID
Naı	ne of MS4/Coalition Town of New Windsor N Y R 2 0 A 2 4 1
	Minimum Control Measure 4. Construction Site Stormwater Runoff Control
Th	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 acre or more during this reporting period?
2.	How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?
3.	What percent of active construction sites were inspected during this reporting period? $\bigcirc$ NT $\boxed{1\ 0\ 0}$ %
4.	What percent of active construction sites were inspected more than once?  ONT  1 0 0 %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use the NYS  Construction Stormwater Inspection Manual?  • Yes O No O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  ● Yes ○ No ○ NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  O Yes O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

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

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

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SPDES ID

Name of MS4/Coalition Town of New Windsor	N Y R 2 0 A 2 4 1
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 (SWMIII.C.1. Submit additional pages as needed.	_
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
1. 100% review of constrution sites in MS4 and Town.	
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
1. Reduction in complaints and violations.	
C. How many times was this observation measured or evaluation	
	(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal	during this reporting period?
To Town and MCA are all aliabetes and the deadline and fought in	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	ne Swivipp:  ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
<ol> <li>Continue 100% field reviews of construction sites.</li> <li>Continue to provide trainings to relevant personnel.</li> </ol>	
	·

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

				SPDES I	D
Name of MS4/Coalition	n Town of New Windso	or		NYF	2 0 A 2 4 1
Minimum	Control Mea	sure 5. Post	-Construction	on Stormwater	Management
The information in the	his section is bein	g reported (che	ck one):		
<ul><li>On behalf of an in</li><li>On behalf of a coa</li><li>How n</li></ul>		ributed to this	report?		
1. How many and MS4/Coalition i				nnagement practice eporting period?	es has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces				•
○ Filter Systems					
O Infiltration Basins					
Open Channels		9	9	9	
○ Ponds					
○ Wetlands					
Other					
2. Do you use an BMPs, inspecti	electronic tool ( ions and mainta		abase, spreads	heet) to track pos	t-construction ● Yes ○ No
3. What types of Development/E	non-structural Better Site Desig	-		-	mpact
<ul><li>Building Codes</li></ul>	Municipal Co	omprehensive P	lans		
Overlay Districts	Open Space l	Preservation Pro	ogram		. •
<ul><li>Zoning</li></ul>	• Local Law or	Ordinance			
○ None	Land Use Re	gulation/Zoning	5		
O Watershed Plans	Other Compr	ehensive Plan			
Other:					

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

		<u>57.</u>	UED.	ענ					
Nar	ne of MS4/Coalition Town of New Windsor	N	Y	R :	2 C	A	2	4	1
<b>4</b> a.	. Are the MS4s contributing to this report involved in a regional/v	watershed v	vide	plar		g ef ● Ye			No
4b	. Does the MS4 have a banking and credit system for stormwater	manageme	nt p	acti	ices:	•			
			-		(	) <b>Y</b>	es	•	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 stor				nt p		tice	?	No
4d.	. How many stormwater management practices have been implent reporting period?	nented as p	art o	f th	is sy	sten	n in	thi 0	S
5.	What percent of municipal officials/MS4 staff responsible for pr training on Low Impace Development (LID), Better Site Design of Infrastructure principles in this reporting period?						ende	ed 5	%

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

						SPDES ID		
Name o	f MS4/Coalition	Town of New Windson	-		]	NYR2	0 A 2	4 1
6. Ev	aluating Pro	gress Toward N	Aeasurable Go	als MCM 5			,	
identif	fied in your S	ort on your prog tormwater Mana tional pages as r	gement Progran					art
A. Br	iefly summa	rize the Measur	able Goal iden	tified in the S	SWMPP i	n this report	ting perio	od.
2. Red		public infrastructulate map notes. ersonnel.	cture.					
B. Br Goal.	iefly summaı	rize the observa	tions that indi	cated the over	rall effect	iveness of th	is Measu	rable
2. Con	ntinue the pur	apping and distr suit of employee of SWPPP with	training.	construction m	naintenand	ce.		
C. Ho	w many time	es was this obse	rvation measu	red or evaluat	ted in this			1
D. Ha	s your MS4	made progress (	toward this me	asurable goal	l during t		g period?	
E. Is y	your MS4 on	schedule to me	et the deadline	set forth in t	he SWM	PP?	Vog	∩ Na
		rize the stormwa ng cycle (includ				als of this M		○ No ng
2. Do		g update. ctions and field r submitted to To		ment.	·	·		

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

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Name of MS4/Coalition Town of New Windsor	SPDES ID           N         Y         R         2         0         A         2         4         1
Minimum Control Measure 6. Stormwater Manager	ment for Municipal Operations
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</li> <li>How many MS4s contributed to this report?</li> </ul>	

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

•		berrarm	cu withii	i the past 3
<b>Operation/Activity/Facility</b>	Addressed in	n SWMP?	years?	•
Street Maintenance	● Yes	○ No	• Yes	○ No
Bridge Maintenance	• Yes	○ No	• Yes	$\circ$ No
Winter Road Maintenance	• Yes	○ No	• Yes	O No
Salt Storage	• Yes	○ No	Yes	○ No
Solid Waste Management	○ Yes	• No	○ Yes	• No
New Municipal Construction and Land Disturba	nce O Yes	• No	○ Yes	No
Right of Way Maintenance	● Yes	○ No	Yes	O No
Marine Operations		• No	○ Yes	No
Hydrologic Habitat Modification	○ Yes	● No	○ Yes	No
Parks and Open Space	○ Yes	● No	O Yes	No
Municipal Building		○ No	<ul><li>Yes</li></ul>	O No
Stormwater System Maintenance	● Yes	○ No	Yes	O No
Vehicle and Fleet Maintenance		○ No	Yes	O No
Other	○ Yes	● No	O Yes	<ul><li>No</li></ul>

This report is being submitted for the reporting period ending March 9, 2 0 1 9 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

Town of New Windsor

N Y R 2 0 A 2 4 1

Name of MS4/Coalition Town of New Windsor	N Y R 2	UA	2	4	Ι
2. Provide the following information about municipal operation	ns good housekeep	oing p	rogi	ran	ıs:
• Parking Lots Swept (Number of acres X Number of times swept)	# Acres				3
• Streets Swept (Number of miles X Number of times swept)	# Miles			2	4
Catch Basins Inspected and Cleaned Where Necessary	#		2	2	1
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#				9
O Phosphorus Applied In Chemical Fertilizer	#Lbs.				
O Nitrogen Applied In Chemical Fertilizer	#Lbs.				
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Num times applied to the nearest tenth.)</li> </ul>	mber of # Acres			].[	
3. How many stormwater management trainings have been pro	ovided to municipa	ıl emp	loy	ees	
during this reporting period?					0
4. What was the date of the last training?	0 2 / 2 8	/ 2	0	1	8
5. How many municipal employees have been trained in this re	porting period?				0
6. What percent of municipal employees in relevant positions a stormwater management training?	nd departments re	ceive	1 1	0	%

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

Name of MS4/Coalition	Town of New Windsor	N Y R 2 0 A 2 4 1
7. Evaluating Pro	gress Toward Measurable Goals MCM 6	
identified in your St	ort on your progress and project plans toward formwater Management Program Plan (SWMI tional pages as needed.	
A. Briefly summan	rize the Measurable Goal identified in the S	WMPP in this reporting period.
On-site evaluatio     Review road mai	n of Town facilities. ntenance activities.	
B. Briefly summar Goal.	rize the observations that indicated the over	all effectiveness of this Measurable
1. Increase record k	eeping, document site evaluation.	
C. How many time	s was this observation measured or evaluat	ted in this reporting period?
		(ex.: samples/participants/event
D. Has your MS4 1	nade progress toward this measurable goal	
E. Is your MS4 on	schedule to meet the deadline set forth in the	he SWMPP? ● Yes ○ No
*	ize the stormwater activities planned to me ng cycle (including an implementation sche	•
1. Continue periodic 2. Continue training	c (quarterly) review of municipal facilities. of personnel.	
	·	

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

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			SPDES ID
me of MS4/Coalition Town of N	ew Windsor		N Y R 2 0 A 2
Additional Wate	rshed Improvemen	nt Strategy Best M	anagement Practice
he information in this section	n is being reported (check	c one):	
On behalf of an individual M On behalf of a coalition How many MS	4s contributed to this re		le below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	-	-	
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	-	-	-
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	-		
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay	-	-	-
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary		-	
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	-	-	-
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments	-	-	
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1.2.3.4.7a-d.9	5.6.8a.8b.10.11.12	Pathogens

Traditional Non-Land Use	itional Non-Land Use 1,2,3,4,7a-d,9,10,11,12 5,6,8a,8b Path		iogens		
Non-Traditional				nogens	
1. Does your MS4/Coa	lition have an education	program addressing	impacts of		
phosphorus/nitroger	1/pathogens on waterboo	lies?	O Yes	○ No	• N/A
2. Has 100% of the MS	S4/Coalition conveyance	system been mapped	in GIS?	● No	O N//
If N/A, go to question	13.		O ICS	@ 110	0 107
If No, estimate what p	percentage of the conveya	nce system has been m	apped so far.		%
Estimate what percent	tage was mapped in this r	eporting period.			%
	Additional B	MPs Page 1 of 3			

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

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

	·	SPDE	SID		
Name or	MS4/Coalition Town of New Windsor	N Y	R 2	0 A	2 4 1
3 Do	es your MS4/Coalition have a Stormwater Conveyance S	Systom (infras	truatus	·a) Inci	anation .
	Maintenance Plan Program?	•	Yes	No No	O N/A
*****	Transcond Light Lings will		J 165	● INO	∪ IV/A
4. Est	imate the percentage of on-site wastewater treatment sy	stems that ha	ve been	inspec	eted
	maintained or rehabilitated as necessary in this report				0 %
	•	<b>.</b>	÷		
5. Ha:	s your MS4/Coalition developed a program that provide	es protection e	anivale	nt to t	he
5. Has your MS4/Coalition developed a program that provides protection equivalent NYSDEC SPDES General Permit for Stormwater Discharges from Construction A					
	2-0-08-001) to reduce pollutants in stormwater runoff fr	•			
-	urb five thousand square feet or more?		⊃ Yes	O No	• N/A
6 На	your MS4/Coalition developed a program to address p	ost aanstruati	on stor	mxxata	
	off from new development and redevelopment projects				
	al to one acre that provides equivalent protection to the	_			
	mit for Stormwater Discharges from Construction Acti				
	New York State Stormwater Design Manual Enhanced				<del>-</del>
	ndards?	_	Yes	O No	• N/A
7a. Do	s your MS4/Coalition have a retrofitting program to re	duce erosion o	or		
pho	sphorus/nitrogen/pathogen loading?	. (	) Yes	O No	• N/A
7b.Hov	v many projects have been sited in this reporting period	1?			0
•				L_	
7c. Wh	at percent of the projects included in 7b have been com	pleted in this	reporti	ng neri	od?
	p	process in this	фотч		
					0 %
7d.Wh	at percent of projects planned in previous years have be	een completed	?		0 %
			• No I	Projects	Planned
8a.Has	your MS4/Coalition developed and implemented a turf	management	practic	es and	
pro	cedures policy that addresses proper fertilizer applicati	on on municip	ally ow	ned	
lane	ls?		Yes	O No	• N/A
	•				
8b.Has	your MS4/Coalition developed and implemented a turi	management	practio	es and	
pro	cedures policy that addresses proper disposal of grass c	lippings and l	eaves fr	om	
mu	nicipally owned lands?		) Yes	O No	• N/A

populations?

#### MS4 Annual Report Form

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

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

SPDES ID NYR2 0 A Town of New Windsor Name of MS4/Coalition 9. Has your MS4/Coalition developed and implemented a program of native planting? O Yes  $\circ$  No N/A 10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding? Yes O No O N/A 11. Does your MS4/Coalition have a pet waste bag program? O Yes O N/A No 12. Does your MS4/Coalition have a program to manage goose

O Yes O No

N/A