#### MS4 Annual Report Cover Page

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

This cover pag	e must be completed	by the	report	preparer.
Joint reports re	equire only one cove	r page.	-	

S	PI	)ES	ID						
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#### Choose one:

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

Fill in SPDES ID in upper right hand corner.

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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)

0 A

Name of Coalition

Name of Single Entity	

#### OR

# O 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 2 1

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

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#### MS4 Municipal Compliance Certification(MCC) Form

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

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Name of MS4 Town of New Windsor	N	Y	R	2	0	A	2	4	1
Each MS4 must submit an MCC form.									
Section 1 - MCC Identification Page									

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

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

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

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#### MS4 Municipal Compliance Certification(MCC) Form

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

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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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#### MS4 Municipal Compliance Certification(MCC) Form

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

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Name of MS4	Town of New Windsor		N	Y	R	2	0	Α	2	4	1

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

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- 4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 5. Report Preparer (Consultants may provide company name in the space provided).

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

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

For each contact, select all that apply:

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

First Name	MI	Last Name
Brett		Sherman
Title		
Staff Designer		
Address		
3 3 Airport Cente	r	Drive
City	,	State Zip
City New Windsor		State Zip  N Y 1 2 5 5 3 -
New Windsor		
New Windsor		

# MS4 Municipal Compliance Certification (MCC) Form

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

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#### MS4 Municipal Compliance Certification (MCC) Form

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

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Name of MS4	Town of New Windsor	N	Y	R	2	0	A	2	4	1

#### <u>Section 4 - Certification Statement</u>

"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 N	ame	;													МЦ		Las	t Na	ame												
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MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway

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

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Name of MS4/Coalition	Town of New Windsor	N	Y	R	2	0	A	2	4	1

The information in this section is being reported (check one):  On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report?  1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One.  Yes No If Yes, choose one of the following Report(s) attached to the annual report Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page.  URL  URL  URL  URL  URL  URL								7	Wa	itei	r <b>Q</b>	)ua	lit	yТ	\[re	nd	<u>s</u>				•							
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related to stormwater? If not, answer No and proceed to Minimum Control Measure One.  O Yes No  If Yes, choose one of the following  Report(s) attached to the annual report  Web Page(s) where report(s) is/are provided below  Please provide specific address of page where report(s) can be accessed - not home page.  URL  URL  URL  URL  URL  URL  URL	On behal	fofac	coalit	ion				ted	to t	this	rej	port	t?															
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This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$ 

Name of MS4/Coalition Town of New Windsor	SPDES ID  N Y R 2 0 A 2 4 1
Minimum Control Measure 1. Public Ec	lucation 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</li> <li>How many MS4s contributed to this report?</li> </ul>	
1. Targeted Public Education and Outreach Best Managem	ent Practices
Check all topics that were included in Education and Outreach	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
○ 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:	
● Public Employees ● Contractors	
● Residential ○ Developers	
○ Businesses • General Public	
○ Restaurants ○ Industries	
Other: O Agricultural Other	

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

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

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 Town of New Windsor	N Y R 2 0 A 2 4 1
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	<del>-</del>
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
Community Day Booth and Town Hall kiosk for educational m     Public advertisements of household hazardous waste.	aterial distribution.
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
1. No pamphlets distributed due to closure during pandemic. No C 2. No clean up event due to pandemic.	Community day.
C. How many times was this observation measured or evaluate	ed in this reporting period?
D. Has your MS4 made progress toward this Measurable Goal	(ex.: samples/participants/events) I during this reporting period?
	○ Yes ● No
E. Is your MS4 on schedule to meet the deadline set forth in th	e SWMPP? ○ Yes • No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	Ç
Town Hall open to public for educational material distribution.     Optimism for Household Cleanup event advertisement.	Community Day will be hosted.

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

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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Minimum Control Measure 2.	Public I	nvo	lve	mer	ıt/F	ar	tic	ip <i>a</i>	<u>ıtic</u>	<u>on</u>			
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 re</li> </ul>	port?												
1. What opportunities were provided for public development, evaluation and improvement of (SWMP) Plan during this reporting period?	the Stor	mw	ater	Ma	nag					ran	n		
Cleanup Events						# E	ven	ts					0
O Comments on SWMP Received					# C	Comi	nen	ts					
Community Hotlines	Phone #	(	8	4 5	)	5	6	5	-	8	8	0	0
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O Community Meetings					# 2	Atte	nde	es					i
○ Plantings						S	q. F	t. [					
O Storm Drain Markings						# D	rair	ıs [					
O Stakeholder Meetings					# 1	Atte	ndee	es					
O Volunteer Monitoring						#E	ven	ts					
Other:													
2. Was public notice of availability of this annua Program (SWMP) Plan provided?	al report	and	Sto	rmv	ate	er N	1an	ag		ent Ye		0	No
O List-Serve						# Iı	ı Li	st					
O Newspaper Advertising					# ]	Days	Ru	n [					
○ TV/Radio Notices					# I	Days	Ru	n [					
● Other: TownBoardAge	n d a												
• Web Page URL: Enter URL(s) on the following tw	vo pages.												

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

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

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Name of MS4/Coalition Town of New Windsor

# MS4 Annual Report Form

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

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

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

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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	t po	sted?	•					
Leave blank if this report was not posted on the internet.	0	6	/ 0	5	/	2	0	2	1
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	nt re	port,	ans	wei	r 5.l	o		
<b>5.a.</b> Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ing perio	od?	/		o  /	Ye	s	• 7	No
If No, is one planned?					0	Ye	S	• ]	No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	tin	g to tl	his	rep	ort	du	rin	g
this reporting period?					0	Yes	S	• ]	No
If No, is one planned for each?					0	Yes	S	• ]	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.					0	Yes	S	• ]	No

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

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 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 achie identified in your Stormwater Management Program Plan (SWMPP), i III.C.1. Submit additional pages as needed.	÷ ÷
A. Briefly summarize the Measurable Goal identified in the SWM	IPP in this reporting period.
Annual Report posted on Town website.     Town Cleanup event & waste disposal	
B. Briefly summarize the observations that indicated the overall e Goal.	ffectiveness of this Measurable
Latest annual report absent from website.     No cleanup event due to pandemic.	
C. How many times was this observation measured or evaluated in	n this reporting period?
D. Has your MS4 made progress toward this measurable goal dur	<pre>(ex.: samples/participants/event ing this reporting period?</pre>
Frage transfer and an amount an amount and amount amount and amount and amount amo	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SY	WMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule	e goals of this MCM during
<ol> <li>Update online document center for MS4 reports is up to date with la public viewing.</li> <li>Resume cleanup event sponsorship as Covid restrictions gradually l</li> </ol>	•

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

Name of MS4/Coalition Town of New Windsor		SPDES ID   N   Y   R   2   0   A   2   4   1
Minimum Control Measure 3.	Illicit Discharge Detect	ion and Elimination
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 t</li> </ul>	his ropout?	
How many Wis4s contributed to t	ins report?	
1. Enter the number and approx. percent	of outfalls mapped:	8 6 # 8 5 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	•	scharges during this
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspe	ction during this
O Auto Recyclers	O Landscaping (Irrigation)	
O Building Maintenance	O 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	O Printing	
<ul><li>Cross-Connections</li></ul>	O Residential Carwashing	
O Distribution Centers	O Restaurants	
○ Food Processing Facilities	O Schools and Universities	
○ 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 Sho	pps
Other:	○ None	·
○ Sewersheds:		

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

Name of MS4/Coalition Town of New Windsor	SPDES ID  N Y R 2 0	) A 2 4 1
3.b. What types of illicit discharges have	e been found during this reporting period?	
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	○ Inflow/Infiltration	
○ 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	
	d illegal connections have been detected duri	ng this
reporting period?		0
5 How many illicit discharges have bee	en confirmed during this reporting period?	0
o. How many mich discharges have bee	en confirmed during this reporting period.	
•	onnections have been eliminated during this	reporting
period?		0
7. Has the storm sewershed mapping be		Yes O No
If No, approximately what percent was	completed in this reporting period?	1 0 0 왕
8. Is the above information available in	GIS?	⊃Yes ● No
Is this information available on the w If Yes, provide URL(s):	veb?	⊃ Yes ● No
• • • • • • • • • • • • • • • • • • • •	where map(s) can be accessed - not home page	•
		<u> </u>
URL		

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

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

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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 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 (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
1. 20% of total outfall reviews annually during 5 year permit term 2. Continue pursuit of IDDE supplemental training.	n.
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
<ol> <li>2 outfalls screened during pandemic.</li> <li>Virtual training taken by relevant personnel.</li> </ol>	
C. How many times was this observation measured or evaluation	
	(ex.: samples/participants/even
D. Has your MS4 made progress toward this measurable goal	
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	he SWMPP?  ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	et the goals of this MCM during
1. Continue to implement the practice of screening 20% of mappe 2. Continue to pursue additional/supplemental training in IDDE p	

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

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

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Name of MS4/Coalition	T	Ñ	Y	R	2	0	A	2	4	1
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# Minimum Control Measures 4 and 5

	Construction Site and Post-Construction Control		
The	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a.	Has each MS4 contributing to this report adopted a law, ordinance or other remechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?		O No
1b.	.Has each Town, City and/or Village contributing to this report documented the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSDE Analysis Workbook?	Erosion	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La O 09/2004	aw. )3/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	O No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have reviewed in this reporting period?	ve been	4
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of procomments related to construction SWPPPs?  • Yes	ublic O No	O NT
	If Yes, how many public comments were received during this reporting period?		0
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	t the loca • Yes	al O 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>	#			8	O No Authority
<ul><li>Stop Work Orders</li></ul>	#			8	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
<ul><li>Administrative Orders</li></ul>	#			0	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 2 1

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

				SPDE	<u>s id</u>					
Name of MS4/Coalition	Town of New Windsor			NY	R	2	0 2	1 2	4	1
Minimum C	ontrol Measure 4.	Construction	Site Stormy	vate	R	unc	off (	<u>Con</u>	tro	<u>l</u>

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 ac	ere or	mor	·e
	during this reporting period?			3
2.	How many construction projects disturbing at least one acre were active in your	jurisd	ietic	on
	during this reporting period?			8
3.	What percent of active construction sites were inspected during this reporting pe	eriod?	т Т	NT %
4.	What percent of active construction sites were inspected more than once?		0]	NT
		1 0	0	%
5.	Do all inspectors working on behalf of the MS4s contributing to this report use t	he NY	S	
	Construction Stormwater Inspection Manual? • Yes	○ No	01	NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevent (SWPPPs) of construction projects that are subject to MS4 review and approval?		ans	
	• Yes	O No	$\circ$	NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avai			
	public review?	⊃ Yes	0]	No
	If Ver use the following mage to identify location(s) where SWPDDs can be accounted			

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,  $2 \mid 0 \mid 2 \mid 1$ 

	SPDES ID											
Name of MS4/Coalition Town of New Windsor	N Y R 2 0 A 2 4 1											
6. con't.:												
Submit additional pages as needed.												
MS4/Coalition Office												
Department												
Planning Department Address												
5 5 5 Union Avenue												
City	Zip											
New Windsor NY	1 2 5 5 3 -											
Phone												
(												
O Library												
Address												
City	Zip											
Phone												
(												
Other												
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City	Zip											
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O Web Page URL(s): Please provide specific address where SWPPPs	s can be accessed - not home page.											
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This report is being submitted for the reporting period ending March 9, 2 0 2 1

		SPDES ID
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 4	
Use this page to rep	ort on your progress and project plans toward	d achieving measurable goals
identified in your S	tormwater Management Program Plan (SWM itional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the	SWMPP in this reporting period.
	all SWPPPs submitted to the MS4. review per year on all construction sites w/ a	swppp.
B. Briefly summar Goal.	rize the observations that indicated the over	erall effectiveness of this Measurable
	wed this reporting period.	
	ed by Town/Consulting Engineer. s issued to sites out of compliance.	
3. SWO and NOVS	s issued to sites out of compitance.	
C How many time	es was this observation measured or evalu	ated in this reporting period?
C. How many and	to was this observation measured or evaluation	
		(ex.: samples/participants/events
D. Has your MS4	made progress toward this measurable go	
		● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in	
F Rejoffy summer	rize the stormwater activities planned to m	
· ·	ing cycle (including an implementation sch	<del>-</del>
1. Continue SWPP	P reviews.	
2. Continue to revie	ew all active sites w/ SWPPPs in municipal b	pounds.
3. Continue trackin	g enforcement actions.	

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

Name of MS4/Coalition	Town of New Windso	or .		SPDES I	D R 2 0 A 2 4 1
Minimum	Control Mea	sure 5. Post	-Construction	on Stormwater	Management
The information in the	nis section is bein	g reported (che	ck one):		
● On behalf of an in ○ On behalf of a coa How m		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	3	3	
○ Ponds					
○ Wetlands					
Other					
2. Do you use an BMPs, inspecti	electronic tool ( ions and mainta		abase, spreads	heet) to track pos	et-construction ○ Yes • No
3. What types of Development/E	non-structural ; Better Site Desig	-		<del>-</del>	Impact
<ul><li>Building Codes</li></ul>	Municipal Co	omprehensive P	lans		
Overlay Districts	Open Space I	Preservation Pro	ogram		
Zoning	Local Law or	Ordinance			
○ None	Land Use Re	gulation/Zoning	2		
O Watershed Plans	Other Compr	ehensive Plan			
Other:					

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

		SPDES ID								
Nan	ne of MS4/Coalition Town of New Windsor	N	Y	R	2	0	A 2	2	4	1.
<b>4</b> a.	Are the MS4s contributing to this report involved in a regional/water	rshed <sup>,</sup>	wide	e pla	nn	_	effo Yes			No
4b.	Does the MS4 have a banking and credit system for stormwater man	ıageme	ent p	orac	tice		Yes		01	No
4c.	Do the SWMP Plans for each MS4 contributing to this report includ and approval of banking and credit of alternative siting of a stormw	_				t pr		e?	0]	No
4d.	How many stormwater management practices have been implement reporting period?	ed as p	art	of t	his	sys1	tem	in t	th is	;
5.	What percent of municipal officials/MS4 staff responsible for progratraining on Low Impace Development (LID), Better Site Design (BSI Infrastructure principles in this reporting period?	-					itten		_	%

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

Name of MS4/Coalition	Town of New Windsor		SPDES ID N Y R 2 0	A 2 4 1
6. Evaluating Prop	gress Toward Measurable G	oals MCM 5		
identified in your St	ort on your progress and projectormwater Management Progrational pages as needed.			
A. Briefly summar	rize the Measurable Goal ide	ntified in the SWI	MPP in this reporting	g period.
2. Conduct and reco	of Post Construction Infrastruction inspections & maintenance in to outline maintenance respons	of inventoried Pos		
B. Briefly summar Goal.	rize the observations that ind	icated the overall	effectiveness of this	Measurable
	as necessary. implementation of standardize ring enforceable map notes wi			1
C. How many time	es was this observation measu	ired or evaluated		riod?
D. Has your MS4 1	made progress toward this m	easurable goal du	ring this reporting	
E. Is your MS4 on	schedule to meet the deadlin	e set forth in the S		Yes O No
_	rize the stormwater activities ing cycle (including an imple	-	the goals of this MC	
	g and BMP inventory. ze forms for Highway use.			

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

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

		SPI	DES	$\mathbb{D}$						
Name of MS4/Coalition	Town of New Windsor	N	Y	R	2	0	А	2	4	1

#### Minimum Control Measure 6. Stormwater Management 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

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

stormwater management training?

#### **MS4 Annual Report Form**

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 2. Provide the following information about municipal operations good housekeeping programs: # Acres Parking Lots Swept (Number of acres X Number of times swept) 4 # Miles Streets Swept (Number of miles X Number of times swept) 1 0 0 # Catch Basins Inspected and Cleaned Where Necessary 4 1 Post Construction Control Stormwater Management Practices 9 Inspected and Cleaned Where Necessary #Lbs. O Phosphorus Applied In Chemical Fertilizer #Lbs. O Nitrogen Applied In Chemical Fertilizer 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? 5 4. What was the date of the last training? 1 2 2 2 0 2 1 5. How many municipal employees have been trained in this reporting period? 1 8 6. What percent of municipal employees in relevant positions and departments receive

0 %

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

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 Town of New Windsor	N Y R 2 0 A 2 4 1
7. Evaluating Progress Toward Measurable Goals MCM 6	
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	WMPP in this reporting period.
<ol> <li>Self administered evaluations of municipal facilities.</li> <li>Inventory of measurable municipal duties.</li> </ol>	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
<ol> <li>1. 100 miles of roads swept.</li> <li>2. 41 catch basins inspected and serviced.</li> <li>3. Municipal staff trained.</li> </ol>	
C. How many times was this observation measured or evalua	ted in this reporting period?
	(ex.: samples/participants/events,
D. Has your MS4 made progress toward this measurable goal	during this reporting period?
E. Is your MS4 on schedule to meet the deadline set forth in t	● Yes ○ No
E. 18 your MIS4 on schedule to meet the deadline set for the in t	• Yes O No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
<ol> <li>Continue to update and pursue training for municipal staff.</li> <li>Improve upon the quantities of basins and street miles maintain</li> </ol>	ned.

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

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

Town of N	lew Windsor		SPDES ID N Y R 2 0 A 2 4
ame of MS4/Coalition Town of N	CW WINDSU		NIKZURZ
Additional Wate	rshed Improvemer	nt Strategy Best M	anagement Practices
he information in this section	n is being reported (check	k one):	
On behalf of an individual M		/-	
On behalf of a coalition  How many MS4	4s contributed to this re	eport?	
110 () 1110111/ 1(10		-Poxer	
IS4s must answer the qu	estions or check NA a	s indicated in the tab	e 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	1467. 18.0		
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1.2.3.4.74.74.10.11.12	5,6,8a,8b,10,11,12	Pathogens

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

		SPDES ID		
Na	ame of MS4/Coalition Town of New Windsor	N Y R 2	0 A	2 4 1
3.	Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (infrastructi ○ Yes	ıre) Ins <sub> </sub> ● No	pection
4.	Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report		n inspe	cted 0 %
5.	Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Dischars (GP-0-08-001) to reduce pollutants in stormwater runoff fredisturb five thousand square feet or more?	ges from Constructi	on Activ	vities
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 Actithe New York State Stormwater Design Manual Enhanced Standards?	that disturb greater NYS DEC SPDES vities (GP-0-08-001)	than of General , includ	r I
7a	a. Does your MS4/Coalition have a retrofitting program to re phosphorus/nitrogen/pathogen loading?	educe erosion or • Yes	O No	• N/A
7b	o. How many projects have been sited in this reporting period	d?		0
	. What percent of the projects included in 7b have been com		ing per	iod?
		• No	Projects	Planned
8a.	.Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper fertilizer applicati lands?			® N/A
8b	e. Has your MS4/Coalition developed and implemented a turing procedures policy that addresses proper disposal of grass comunicipally owned lands?	÷ .		I ● N/A

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

			SEDES ID						
Name of MS4/Coalition Town of New Windsor	N	Y	R	2	0 A	2	4	1	
9. Has your MS4/Coalition developed and implemented a progra	m of na		_		ing? ○ N	0	• N	J/A	
10. Has your MS4/Coalition enacted a local law prohibiting pet was prohibiting goose feeding?	iste on :	mun	icij	pal		per	ties	and	
11. Does your MS4/Coalition have a pet waste bag program?		0	Ye	S	• N	0	ΟN	√A	
12. Does your MS4/Coalition have a program to manage goose populations?		0	Yes	S	O N	0	• N	J/A	