

MS4 Annual Report Cover PageMCC form for period ending March 9,

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Required Forms

- > Municipal Compliance Certification
- > Water Quality Trends
- > Minimum Measure 1
- > Minimum Measure 2
- > Minimum Measure 3
- > Minimum Measure 4
- > Minimum Measure 4 and 5
- > Minimum Measure 5
- > Minimum Measure 6
- > MS4s in impaired watersheds included in GP-0-08-002 Part IX must also complete the form *Additional Watershed Improvement Strategy Best Management Practices*.

Reporting Requirements

- * **Permittees submitting an annual report for an individual MS4 must complete and submit all required forms.**
- * **Joint reports may be submitted by permittees with legally binding agreements as follows:**
 - > *Each* MS4 contributing to a joint report must submit a Municipal Compliance Certification (MCC) form with an original signature. The MCC forms must be attached to the report.
 - > A coalition may submit information on behalf of its members as follows:
 1. Submit one form for each of the Minimum Measures (and if required, Additional Watershed Improvement Strategy Best Management Practices) on behalf of all the MS4s in the coalition, or
 2. Complete some of the required forms on behalf of all the MS4's in the coalition and for other Minimum Measures, attach completed forms from each of the MS4s.

For example, a joint report for a coalition including four permitted MS4s may contain one form for *each* of the Minimum Measures 1-5, representing the combined work of all four participating MS4s, and *in addition*, include four separate Minimum Measure 6 forms and four separate *Additional Watershed Improvement Strategy Best Management Practices* forms provided by each of the participating permittees.

The Department will *not* accept a report form from a participating MS4 *in addition to* a combined report form submitted for the same Minimum Measure.

Instructions for completing forms

These forms may be completed on a computer or by hand. If completing the forms by hand, fill in circles completely and print clearly.

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4

SPDES ID

Section 2 - Contact Information

Provide contact information for *all* of the following contacts:

1. The Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c.).
3. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
4. Report Preparer (Consultants may provide company name in the space provided).

Submit a separate sheet for each contact.

For each contact, select all that apply:

- Signatory Authority (choose one of the following)
 - Executive Officer or Ranking Elected Official
 - Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name MI Last Name

Title

Address

City State Zip -

eMail

Phone County

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4

SPDES ID

N	Y	R	2	0	A	2	2	9
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Section 2 - Contact Information

Provide contact information for *all* of the following contacts:

1. The Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c.).
3. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
4. Report Preparer (Consultants may provide company name in the space provided).

Submit a separate sheet for each contact.

For each contact, select all that apply:

- Signatory Authority (choose one of the following)
 - Executive Officer or Ranking Elected Official
 - Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name MI Last Name

Title

Address

City State Zip

eMail

Phone County

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2009

Name of MS4

SPDES ID

Section 3 - Partner Information - Submit a separate sheet for each partner.

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

If Yes, complete information below.

Yes No

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

Address

City

State

Zip

-

eMail

Phone

() -

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G?

Yes No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

MM1

MM2

MM3

MM4

MM5

MM6

Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices* required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4

SPDES ID

Section 4 - Certification Statement

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

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

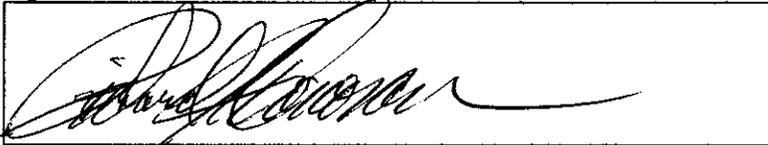
First Name

MI

Last Name

Title

Signature



Date

/ /

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator
Division of Water
4th Floor
625 Broadway
Albany, New York 12233-3505

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

- Construction Site Operators Trained # Trained

			7	5
--	--	--	---	---
- Direct Mailings # Mailings

			2	7
--	--	--	---	---
- Kiosks or Other Displays # Locations

			9	9
--	--	--	---	---
- List-Serves # In List

--	--	--	--	--
- Mailing List # In List

		5	9	6
--	--	---	---	---
- Newspaper Ads or Articles # Days Run

				4
--	--	--	--	---
- Public Events/Presentations # Attendees

--	--	--	--	--
- School Program # Attendees

--	--	--	--	--
- TV Spot/Program # Days Run

--	--	--	--	--
- Printed Materials: Total # Distributed

9	9	9	9	9
---	---	---	---	---

Locations (e.g. libraries, town offices, kiosks)

l	i	b	r	a	r	i	e	s		b	u	s	i	n	e	s	s	e	s
m	u	n	i	c	i	p	a	l	i	t	i	e	s						
s	c	h	o	o	l	/	y	o	u	t	h		g	r	o	u	p	s	

Other:

I	D	D	E	/	S	W	P	P		T	r	a	i	n	i	n	g
---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---

Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	c	n	y	r	p	d	b	.	o	r	g	/	s	t	o	r	m	w	a	t	e	r	-	p	h	a	s	e
2	/	m	s	4																											

URL

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2	/	m	s	4	/	A	d	d	R	e	g	s	O	n	o	n	W	S	.	a	s	p									

URL

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2	/	m	s	4	/	a	n	n	u	a	l	r	e	p	o	r	t	i	n	g	.	a	s	p							

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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

Name of MS4/Coalition

SPDES ID

3. Web Page cont.: Provide specific web addresses - not home page.

URL

MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

3. Web Page cont.: Provide specific web addresses - not home page.

URL

MS4 Annual Report Form

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

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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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4. Evaluating/Measuring Progress MCM 1

What indicators do you use to evaluate the overall effectiveness of your Education and Outreach Program, how long have you been tracking them and at what frequency?

Example:*

Indicator:

Public phone survey

Began Tracking:

2005

Frequency:

Annual

(year) *(ex.: annual, monthly, biweekly)*

#

1000

(ex.: samples/participants/events)

Results:

Increased awareness of issues related to use of fertilizers

** This indicator is provided as an example only.*

Indicator:

Number of target groups identified in the 2007 SUA Stormwater Public Survey reached

Began Tracking:

2008

Frequency:

Annual

(year) *(ex.: annual, monthly, biweekly)*

#

eight (8) that received educational materials for their specific interests and expertise.

(ex.: samples/participants/events)

Results:

By focusing education and outreach efforts toward specific groups with the highest capacity to effect the changes needed to address known stormwater problems, a greater understanding of issues and corrective/protective measures was achieved as a prerequisite to bringing about desired public behavior changes.

Submit additional pages as needed.

MS4 Annual Report Form

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

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Name of MS4/Coalition

SPDES ID

4. Evaluating/Measuring Progress MCM 1

What indicators do you use to evaluate the overall effectiveness of your Education and Outreach Program, how long have you been tracking them and at what frequency?

Example*:

Indicator:

Began Tracking:

(year)

Frequency:

(ex.: annual, monthly, biweekly)

#

(ex.: samples/participants/events)

Results:

** This indicator is provided as an example only.*

Indicator:

Began Tracking:

(year)

Frequency:

(ex.: annual, monthly, biweekly)

#

(ex.: samples/participants/events)

Results:

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

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4. Evaluating/Measuring Progress MCM 1

What indicators do you use to evaluate the overall effectiveness of your Education and Outreach Program, how long have you been tracking them and at what frequency?

Example*:**Indicator:**

Public phone survey

Began Tracking:

2005

(year)

Frequency:

Annual

(ex.: annual, monthly, biweekly)

#

1000

(ex.: samples/participants/events)

Results:

Increased awareness of issues related to use of fertilizers

* This indicator is provided as an example only.

Indicator:

Number of written materials distributed to specific user groups.
--

Began Tracking:

2008

(year)

Frequency:

Annual

(ex.: annual, monthly, biweekly)

#

109,350 brochures, fact sheets, letters, posters, maps, guidance manuals, program monitoring documents and training materials were distributed.

(ex.: samples/participants/events)

Results:

This sustained educational initiative delivered appropriate messages to specific key target audiences resulting in improved understanding of stormwater pollution issues and remedies which promoted desired behavioral changes that lead to improved stormwater runoff quality.
--

Submit additional pages as needed.

MS4 Annual Report Form

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2	0	0	9
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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 MINOA

SPDES ID

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4. Evaluating/Measuring Progress MCM 1

What indicators do you use to evaluate the overall effectiveness of your Education and Outreach Program, how long have you been tracking them and at what frequency?

Example*:**Indicator:**

Public phone survey

Began Tracking:

2005

*(year)***Frequency:**

Annual

(ex.: annual, monthly, biweekly)

#

1000

*(ex.: samples/participants/events)***Results:**

Increased awareness of issues related to use of fertilizers

** This indicator is provided as an example only.*

Indicator:

Widespread distribution of basic, common messages.

Began Tracking:

2008

*(year)***Frequency:**

Annual

(ex.: annual, monthly, biweekly)

#

103,779 editions of the "Syracuse Post Standard" containing a multi-page stormwater primer were sold in three (3) CNY counties.

*(ex.: samples/participants/events)***Results:**

Through the use of core messages and simple graphics, the primer provided a good first exposure and reenforced basic stormwater educational messages to a substantial percentage of the general public.

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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Name of MS4/Coalition

VILLAGE OF MINOA

SPDES ID

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4. Evaluating/Measuring Progress MCM 1

What indicators do you use to evaluate the overall effectiveness of your Education and Outreach Program, how long have you been tracking them and at what frequency?

Example:*

Indicator:

Public phone survey

Began Tracking:

2005

(year) **Frequency:**

Annual

(ex.: annual, monthly, biweekly)

1000

(ex.: samples/participants/events)

Results:

Increased awareness of issues related to use of fertilizers

** This indicator is provided as an example only.*

Indicator:

Number of regional stormwater website pages viewed.

Began Tracking:

2006

(year) **Frequency:**

Bi-annual (Will be Annual)

(ex.: annual, monthly, biweekly)

13,099 users of the CNY Regional stormwater website viewed a total 13,099 pages during the report period.

(ex.: samples/participants/events)

Results:

Visitors to the stormwater website during 2007-08 increased by 107% over 2006. The high number of pages viewed, demonstrates the website's effectiveness as an information resource and suggests that other targeted and general public education efforts conducted over the same time period were successful in creating awareness and spurring public interest in responsible stormwater management.
--

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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4. Evaluating/Measuring Progress MCM 1

What indicators do you use to evaluate the overall effectiveness of your Education and Outreach Program, how long have you been tracking them and at what frequency?

Example:*

Indicator:

Public phone survey

Began Tracking:

2005

(year) **Frequency:**

Annual

(ex.: annual, monthly, biweekly)

1000

(ex.: samples/participants/events)

Results:

Increased awareness of issues related to use of fertilizers

** This indicator is provided as an example only.*

Indicator:

Seasonal newspaper articles.

Began Tracking:

2008

(year) **Frequency:**

Annual

(ex.: annual, monthly, biweekly)

Three seasonally focused articles were prepared and submitted to 73 local and regional media outlets.

(ex.: samples/participants/events)

Results:

It was difficult to accurately track which outlets published each article, making it impossible to estimate how many people were exposed to the messages. Because of the inconsistency in records available to assess each article's usage, stormwater articles were determined not to be a reliable and effective means of reaching the general public and will not be continued as part of a regional public education program.

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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4. Evaluating/Measuring Progress MCM 1

What indicators do you use to evaluate the overall effectiveness of your Education and Outreach Program, how long have you been tracking them and at what frequency?

Example*:**Indicator:**

Public phone survey

Began Tracking:

2005

(year)

Frequency:

Annual

(ex.: annual, monthly, biweekly)

#

1000

(ex.: samples/participants/events)

Results:

Increased awareness of issues related to use of fertilizers

* This indicator is provided as an example only.

Indicator:

Number of recommendations made in the 2007 SUA Stormwater Public Survey that were addressed.
--

Began Tracking:

2008

(year)

Frequency:

Annual

(ex.: annual, monthly, biweekly)

#

Nine of ten recommendations were addressed.

(ex.: samples/participants/events)

Results:

By addressing information and resource needs by the public, understanding about stormwater pollution (pollutants, sources, causes, impacts) and management (control/prevention) was improved. By shaping messages to fit the formats requested by the public, distributed information had greater appeal to the targeted audience and was more likely to be heeded, resulting in an increase in desired behavioral changes.

Submit additional pages as needed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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 MINOA

SPDES ID

N Y R 2 0 A 2 2 9

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

HTTP://villageofminoa.com/stormwater.html

URL

URL

URL

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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 MINOA

SPDES ID

NYR20A229

3. Where can the public access copies of the 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.

MS4/Coalition Office

Annual Report SWMP Plan Comments

Department

Village of Minoa Office

Address

240 North Main Street

City

Minoa

Zip

NY

13116

Phone

(315) 656-3100

Library

Annual Report SWMP Plan Comments

Address

City

Zip

Phone

() -

Other

Annual Report SWMP Plan Comments

Address

City

Zip

Phone

() -

Web Page URL:

Annual Report SWMP Plan Comments

http://villageofminoa.com/storm

water.html

Please provide specific address of page where report can be accessed - not home page.

eMail

Comments

Rgreen@villageofminoa.com

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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4. Were comments received during this reporting period? Yes No
If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period? Yes No
If Yes, what was the date of the meeting?

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 /

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 /

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If No, is one planned? Yes No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period? Yes No

If No, is one planned for each? Yes No

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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6. Evaluating/Measuring Progress MCM 2

What indicators do you use to evaluate the overall effectiveness of your Public Involvement/Participation Program, how long have you been tracking them and at what frequency?

Example*:**Indicator:**

Number of attendees at public events

Began Tracking:

2005

*(year)***Frequency:**

Annual

(ex.: annual, monthly, biweekly)

#

1000

*(ex.: samples/participants/events)***Results:**

Attendance at public events has increased 200% since 2005.

** This indicator is provided as an example only.*

Indicator:

Number of attendees at public events.

Began Tracking:

2008

*(year)***Frequency:**

Annual

(ex.: annual, monthly, biweekly)

#

Zero response

*(ex.: samples/participants/events)***Results:**

No stewardship activities reported. Stewardship organizations will be alerted to the existing web-based promotional opportunity and receive additional information on stormwater pollutants, impacts and management.

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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12. Evaluating/Measuring Progress MCM 3

What indicators do you use to evaluate the overall effectiveness of your Illicit Discharge Elimination Program, how long have you been tracking them and at what frequency?

Example*:**Indicator:**

Number of illicit discharges identified/eliminated
--

Began Tracking:

2005

(year)

Frequency:

Monthly inspections

(ex.: annual, monthly, biweekly)

#

25 illicit discharges identified/24 eliminated
--

(ex.: samples/participants/events)

Results:

Since 2005, the number of annual inspections has doubled. We have developed a tracking system and illicit discharges that have been identified are being eliminated, on average, within a week of discovery.
--

* This indicator is provided as an example only.

Indicator:

Number of municipal staff attending regional training program.
--

Began Tracking:

2008

(year)

Frequency:

Annual

(ex.: annual, monthly, biweekly)

#

IDDE training provided to staff from 18 regulated SUA MS4's, 1 non-regulated MS4 and 4 consulting firms representing 18 regulated SUA

(ex.: samples/participants/events)

Results:

Increased awareness of field procedures for identifying and tracking illicit discharges; improved MS4 program consistency.
--

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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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 M(INOA)

SPDES ID

N	Y	R	2	0	A	2	2	9
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Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

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
--	--	---

1. Has each Town, City and/or Village contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equal protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

If Yes, provide date of equivalent NYS Sample Local Law. 09/2004 03/2006

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

		1
--	--	---

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No

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 the local SWPPP process? 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:

- Notices of Violation #

				0
--	--	--	--	---

 No Authority
- Stop Work Orders #

				0
--	--	--	--	---

 No Authority
- Criminal Actions #

				0
--	--	--	--	---

 No Authority
- Termination of Contracts #

				0
--	--	--	--	---

 No Authority
- Administrative Fines #

				0
--	--	--	--	---

 No Authority
- Civil Penalties #

				0
--	--	--	--	---

 No Authority
- Administrative Orders #

				0
--	--	--	--	---

 No Authority
- Other #

--	--	--	--	--

 No Authority

MS4 Annual Report Form

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2	0	0	9
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Name of MS4/Coalition

VILLAGE OF MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
 On behalf of a coalition

How many MS4s contributed to this report?

--	--	--

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

		1
--	--	---

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

		1
--	--	---

3. What percent of active construction sites were inspected during this reporting period?

1	0	0
---	---	---

 %

4. What percent of active construction sites were inspected more than once?

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 No

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

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

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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 MINOA

SPDES ID: NYR 20A 229

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

Office of Code Enforcement

Address

240 North Main Street

City

Minoa

Zip

NY

13116 -

Phone

(315) 656 - 3100

○ Library

Address

City

Zip

-

Phone

() -

○ Other

Address

City

Zip

-

Phone

() -

○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

MS4 Annual Report Form

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

2	0	0	9
---	---	---	---

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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
---	---	---	---	---	---	---	---	---

7. Evaluating/Measuring Progress MCM 4

What indicators do you use to evaluate the overall effectiveness of your Construction Site Stormwater Management Program, how long have you been tracking them and at what frequency?

Example*:**Indicator:**

Percent SWPPPs reviewed

Began Tracking:

2005

(year)

Frequency:

Upon submission

(ex.: annual, monthly, biweekly)

#

50 SWPPPs

(ex.: samples/participants/events)

Results:

100% of SWPPPs were reviewed. 50% of the SWPPPs reviewed were returned with comments. All of these were returned with modifications reflecting NYS Standards.

* This indicator is provided as an example only.

Indicator:

Percent of SWPPP's reviewed.

Began Tracking:

2004

(year)

Frequency:

Weekly

(ex.: annual, monthly, biweekly)

#

Number of weekly SWPPP reviews: 312

(ex.: samples/participants/events)

Results:

100% of all SWPPP's were reviewed and returned to the developers.

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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Name of MS4/Coalition:

VILLAGE OF MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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7. Evaluating/Measuring Progress MCM 4

What indicators do you use to evaluate the overall effectiveness of your Construction Site Stormwater Management Program, how long have you been tracking them and at what frequency?

Example:*

Indicator:

Percent SWPPPs reviewed

Began Tracking:

2005

Frequency:

Upon submission

(year) *(ex.: annual, monthly, biweekly)*

50 SWPPPs

(ex.: samples/participants/events)

Results:

100% of SWPPPs were reviewed. 50% of the SWPPPs reviewed were returned with comments. All of these were returned with modifications reflecting NYS Standards.

** This indicator is provided as an example only.*

Indicator:

Number of attendees at regional workshop for SWPPP development and review.
--

Began Tracking:

2008

Frequency:

Annual

(year) *(ex.: annual, monthly, biweekly)*

Training and info needed to develop and review SWPPP's was provided to 17 practitioners (consultants, agencies, developers) and 22 MS4's.

(ex.: samples/participants/events)

Results:

Improved understanding of SWPPP components and design criteria, enhanced phosphorus removal standards and SWPPP review considerations laid the foundation for improved SWPPP design and implementation.

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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Name of MS4/Coalition

VILLAGE OF MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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7. Evaluating/Measuring Progress MCM 4

What indicators do you use to evaluate the overall effectiveness of your Construction Site Stormwater Management Program, how long have you been tracking them and at what frequency?

Example*:**Indicator:**

Percent SWPPPs reviewed

Began Tracking:

2005

(year)

Frequency:

Upon submission

(ex.: annual, monthly, biweekly)

#

50 SWPPPs

(ex.: samples/participants/events)

Results:

100% of SWPPPs were reviewed. 50% of the SWPPPs reviewed were returned with comments. All of these were returned with modifications reflecting NYS Standards.

* This indicator is provided as an example only.

Indicator:

Attendance at regional erosion and sediment control and construction activity training workshops.

Began Tracking:

2005

(year)

Frequency:

Bi-annual

(ex.: annual, monthly, biweekly)

#

Three (3) regional workshops held over 5 years provided training and education for construction site operators and inspectors.
--

(ex.: samples/participants/events)

Results:

Workshop attendance remains relatively stable within room capacity limits. Attendees receive consistent, DEC approved training and information resulting in higher compliance with contractor and site inspector responsibilities. As of 2009, attendees satisfied the 4-hour training requirement to qualify as an on-site trained individual or as a site inspector.
--

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
---	---	---	---	---	---	---	---	---

4. Evaluating/Measuring Progress MCM 5

What indicators do you use to evaluate the overall effectiveness of your Post-Construction Stormwater Management Program, how long have you been tracking them and at what frequency?

Example*:

Indicator:

Number of reports of flooding during storm events from business district
--

Began Tracking:

2005

Frequency:

Annual Summary

(year) (ex.: annual, monthly, biweekly)

18

(ex.: samples/participants/events)

Results:

During this reporting period, we experienced average rainfall, but DPW records show that the number of incidences of flooding in the business district fell 25%. This is attributable to increased inspection and maintenance of post construction BMPs.
--

** This indicator is provided as an example only.*

Indicator:

--

Began Tracking:

--

Frequency:

--

(year) (ex.: annual, monthly, biweekly)

--

(ex.: samples/participants/events)

Results:

--

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

N	Y	R	2	0	A	0	0	1
---	---	---	---	---	---	---	---	---

7. Evaluating/Measuring Progress MCM 6

What indicators do you use to evaluate the overall effectiveness of your Municipal Stormwater Management and Good Housekeeping Program, how long have you been tracking them and at what frequency?

Example:*

Indicator:

Catch basins inspected and cleaned

Began Tracking:

2005

(year)

Frequency:

monthly

(ex.: annual, monthly, biweekly)

#

40 catch basins cleaned

(ex.: samples/participants/events)

Results:

In this reporting period scheduled inspections were increased by 50%. Maintenance was performed 50% more often than last year. This resulted in a 40% decrease in deployment of personnel during storm events to perform emergency maintenance.

** This indicator is provided as an example only.*

Indicator:

Attendance at regional Municipal Good Housekeeping Training Workshops

Began Tracking:

2003

(year)

Frequency:

sporadically

(ex.: annual, monthly, biweekly)

#

Three full-day, multi-issue training workshops were held (2003, 2004 and 2009)

(ex.: samples/participants/events)

Results:

A variety of municipal department staff representatives receive training and information about a variety of pollution prevention and municipal good housekeeping practices from recognized regional and state experts resulting in increased opportunities for networking and cost sharing and improved municipal training capacities. Despite a 22% drop in attendance between 2003 and 2004, attendance at the 2009 workshop was up 86% from 2004.

Submit additional pages as needed.

MS4 Annual Report Form

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Name of MS4/Coalition: VILLAGE OF MINOA

SPDES ID
N Y R 2 0 A 2 2 9

7. Evaluating/Measuring Progress MCM 6

What indicators do you use to evaluate the overall effectiveness of your Municipal Stormwater Management and Good Housekeeping Program, how long have you been tracking them and at what frequency?

Example:*

Indicator: Catch basins inspected and cleaned

Began Tracking: 2005 (year) **Frequency:** monthly (ex.: annual, monthly, biweekly)

40 catch basins cleaned (ex.: samples/participants/events)

Results: In this reporting period scheduled inspections were increased by 50%. Maintenance was performed 50% more often than last year. This resulted in a 40% decrease in deployment of personnel during storm events to perform emergency maintenance.

* This indicator is provided as an example only.

Indicator: Catch-Basins cleaned and inspected.

Began Tracking: 2008 (year) **Frequency:** Annually (ex.: annual, monthly, biweekly)

107 catch-basins cleaned and inspected plus 18 repaired. (ex.: samples/participants/events)

Results: All road-side catch-basins are cleaned and inspected during late spring to late summer. Repairs are made as needed during the same period. Doing this every summer allows us to avoid failure emergencies.

Submit additional pages as needed.

MS4 Annual Report Form

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

2	0	0	9
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Name of MS4/Coalition

VILLAGE OF MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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Additional Watershed Improvement Strategy Best Management Practices

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?

--	--	--

MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed			
Traditional Land Use	1,2,3,4,5,6,7,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,7,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed			
Traditional Land Use	1,6,7,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed			
Traditional Land Use	1,4,6,7,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay			
Traditional Land Use	1,4,7,8a,9,10,11,12	2,3,5,6,8b	Pathogens
Traditional Non-Land Use	1,4,7,8a,9,10,11,12	2,3,5,6,8b	Pathogens
Non-Traditional	1,4,7,8a,9	2,3,4,5,8b,10,11,12	Pathogens
Peconic Estuary			
Traditional Land Use	1,4,7,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? Yes No N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes No N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

--	--	--	--

 %

Estimate what percentage was mapped in this reporting period.

--	--	--	--

 %

3. Does your MS4/Coalition have a Stormwater Conveyance System(infrastructure) Inspection and Maintenance Plan Program? Yes No N/A

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

--	--	--

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.

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

MS4 Annual Report Form

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

2	0	0	9
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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 MINOA

SPDES ID

N	Y	R	2	0	A	2	2	9
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2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept # Acres

				3
--	--	--	--	---
- Streets Swept # Miles

			1	0
--	--	--	---	---
- Catch Basins Inspected and Cleaned Where Necessary #

		1	2	5
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

--	--	--	--	--
- Phosphorus Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs.

--	--	--	--	--
- Pesticide/Herbicide Applied As Pure Product # Lbs.

--	--	--	--	--

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?

0	7	/	2	4	/	2	0	0	8
---	---	---	---	---	---	---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	1	0
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

	3	0
--	---	---

 %

MS4 Annual Report Form

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

2	0	0	9
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SPDES ID

N	Y	R	2	0	A	2	2	9
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- 4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?

1	0	0
---	---	---

 %

- 5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? Yes No N/A

- 6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? Yes No N/A

- 7. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? Yes No N/A

- 8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes No N/A

- 8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? Yes No N/A

- 9. Has your MS4/Coalition developed and implemented a program of native planting? Yes No N/A

- 10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding? Yes No N/A

- 11. Does your MS4/Coalition have a pet waste bag program? Yes No N/A

- 12. Does your MS4/Coalition have a program to manage goose populations? Yes No N/A