

### Progress Report for Part IX.B

Permit #	NYR20A345	Watershed Name	East of Hudson
MS4 Name	Town of Putnam Valley	Reporting Period Ending (mm/dd/yyyy)	03 / 09 / 2017

#### Watershed Improvement Strategy

Describe the strategy to reduce the discharge of phosphorous to this waterbody. Include new sources that may have been identified and any modifications to the strategy to better address new sources.

The Town of Putnam Valley has constructed two stormwater retrofits to help reduce the phosphorus discharge to Lake Oscawana and the surrounding watershed. Cleaning, sampling, inspection and maintenance of streets, parking lots and appurtenances are routine tasks of the Town and Town Engineer to reduce the amount of phosphorus entering the watershed. No new sources of phosphorus have been identified and the constructed retrofits show no sign of failure.

#### Public Education & Outreach

1. Description of the education program

Outreach materials and events are added regularly to the Town website as well as distributed via Town mailings and displayed at the Town Hall and Town Library. The Town partners with the Putnam County Stormwater Advisory Committee to broaden its education and outreach program.

2. Who is the target audience and what is the message delivered to each target audience?

Target audiences include residents, students, contractors, businesses, policy makers, elected officials and municipal staff. Target audiences are advised of the sensitivity of the watershed and instructed on best management practices.

3. Identify how many educational materials have been developed and distributed \_\_\_\_\_ 2

4. Identify how many educational materials have been developed and distributed that focus on:

a. understanding the Phosphorous issues \_\_\_\_\_ 1

b. Septic systems as a source of Phosphorous \_\_\_\_\_ 0  
 Non-Traditional MS4

c. Phosphorous concerns with fertilizer use \_\_\_\_\_ 1

d. Phosphorous concerns with grass clippings and leaves entering the MS4 \_\_\_\_\_ 0

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5. Education plan and goals for the next 6 months

**Illicit Discharge Detection and Elimination**

- Non-Traditional MS4 (skip Questions 6-6e)
- Onondaga Lake Watershed (skip Questions 6-6e)

6. Number of On-Site Wastewater Treatment Systems (OWTS) with a design capacity of less than 1000gpd that are located in sewersheds that drain to the listed waterbody 8 9 4

a. Number of OWTS inspected in this reporting 1 5 6

b. Number of OWTS in need of maintenance or rehabilitation 1

c. Number of OWTS where maintenance or rehabilitation has been performed in this reporting period. 1

d. State the plan for OWTS that have not been addressed in 6c this reporting period

e Describe the OWTS inspection program: Who is responsible for performing OWTS inspections? (eg:Septage Haulers, DOH, engineer, consultant); What methods are used? Are there trends in systems that need maintenance vs systems that need rehabilitation?

7. Number of Illicit Discharges detected within sewershed of listed waterbody in this reporting period. 1

a. Number reported in 7 that have been eliminated 1

b. List of Illicit Discharge locations that have not been eliminated in this reporting period and the target date for elimination

Location	Target Date (mmddyyyy)
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**Post Construction Stormwater Management**

- 8. Number of Stormwater Management Practices (SMPs) located in sewersheds that drain to the listed waterbody \_\_\_\_\_ 2
- a. Number reported in 8 that have been inspected in this reporting period \_\_\_\_\_ 0
- b. Number of SMPs in need of maintenance or rehabilitation \_\_\_\_\_
- c. Number of SMPs where maintenance or rehabilitation has been performed in this reporting period. \_\_\_\_\_
- d. Number of SMPs where phosphorus pollutant problems have been identified. \_\_\_\_\_
- e. Number reported in 8d where the pollutant problem has been addressed. \_\_\_\_\_
- f. Who is responsible for performing SMP inspections?

Inspections are performed by the Town Engineer.

- g. Is the criteria in Chapter 5, 6, and 10 of the NYS Stormwater Management Design Manual being applied? (If no, please describe any deviations) Y  N

- h. State procedures to identify sites with post construction controls that are not functioning as designed (ie, rill erosion, pollutant bypass)

The inspection and maintenance standards adopted by the Town are derived from the NYSDEC and are intended to be protective and proactive.

- 9. Describe the retrofit program. Include the funding sources and design description of retrofits. Identify all retrofits that have been constructed and maintained during this reporting period.

Two retrofit projects have been constructed. Said retrofits remove over 7.9 kg of Total Phosphorus annually. Inspections are performed semi-annually or as needed . There are no plans at the present time for further retrofits in the Town.

- 10. Post-Construction Stormwater Management plan and goals for the next 6 months

The Town will continue with its permitting process which provides for long term operations and maintenace responsibilites of stormwater facilities. The Town will begin its review of the new permit.

**Municipal Operations Pollution Prevention/Good Housekeeping**

- 11. Amount by weight in pounds of turf fertilizer containing phosphorous that was applied on municipally owned lands in this reporting period. \_\_\_\_\_ 0

- 12. Describe other turf management practices implemented during this reporting period.

None

**MS4 Semi Annual Report Form Certification**

Semi Annual Report form for period ending 0 3 0 9 2 0 1 7 (MMDDYYYY)

Name of MS4 Town of Putnam Valley

SPDES ID

NYR20A 3 4 5

**Certification Statement** - MS4 Official (Principal Executive Officer or Ranking Elected Official) or a Duly Authorized Representative of the MS4 Official

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

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-15-003 Part VI.J.

First Name

S A M

MI

Last Name

O L I V E R I O J R

Title (Clearly print title of individual signing report)

S U P E R V I S O R

Signature



Date

0 5 / 1 8 / 2 0 1 7

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