MS4 Annual Report Cover Page

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

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MS4 Annual Report Cover Page

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

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

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Each MS4 must submit an MCC form.									
Section 1 - MCC Identification Page									
Indicate whether this MCC form is being submitted to certify endorsement or ac	ссер	tano	ce o	f;					
An Annual Report for a single MS4									
○ A Single Entity (Per Part II.E of GP-0-10-002)									
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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.

- Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
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Section 4 - Certification Statement

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

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

First Name Jacquelline	MI	Last Name A n n a b	i	TT		A second of the	
Title (Clearly print title of individual signing report) Supervis sor	11						
Signature School Sylvand			Date 65 /	123	1/2	02	2

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

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

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

	SPDES ID
Name of MS4/Coalition Town of Putnam Valley	N Y R 2 0 A 3 4 5
Minimum Control Measure 1. Public Ed	lucation and Outreach
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	
1. Targeted Public Education and Outreach Best Managem	ent Practices
Check all topics that were included in Education and Outreach of	luring this reporting period:
 Construction Sites 	O Pesticide and Fertilizer Application
O General Stormwater Management Information	O Pet Waste Management
O Household Hazardous Waste Disposal	○ Recycling
Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
O Infrastructure Maintenance	O Trash Management
O Smart Growth	O Vehicle Washing
O Storm Drain Marking	O Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
Other:	○ None
2. Specific audiences targeted during this reporting period:	
Public Employees Contractors	
Residential Developers	
Businesses	
Restaurants O Industries	
Other: O Agricultural	

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

SPDES ID

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

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

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

Name of MS4/Coalition Town of Putnam Valley	SPDES ID N Y R 2 0 A 3 4 5
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.	achieving measurable goals P), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
The Town, in conjunction with the NYSDEC, has developed a Na the Town and the the public in making informed and proactive dec	tural Resources Inventory to assist cisions about its ecosystems.
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
Maps and a detailed chapter on the streams and watersheds of the Resources Inventory. The public was afforded the opportunity for community by detailing how pollutants travel into the drinking wa aquatic, and animal life, and defines flood zones for prospective how	ter system, their effects on plant
C. How many times was this observation measured or evaluate	ed in this reporting period?
	(ex.: samples/participants/event
D. Has your MS4 made progress toward this Measurable Goal	
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP? • Yes O No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation sched	t the goals of this MCM during ule).
Educational material covering topics such as illicit discharges, sept general stormwater best practices will continue to be maintained in as available on the Town websites stormwater page. Materials will be a sept a sept and the second sept and the second second sept and the second	the Town Facilities office as well

basis or as required by new NYSDEC permit regulations.

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

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Name of MS4/Coalition Town of Putnam Valley						N	Y	R :	2 0	A	3	4	5
Minimum Control Measure	2. Public	Inv	olv	em	ent	/P	art	icir	at	ion			
The information in this section is being reported (c							-						
On behalf of an individual MS4On behalf of a coalition	,	, <u> </u>	r,										
How many MS4s contributed to the	is report?												
1. What opportunities were provided for pu	ublic partici	patio	on i	n in	ıple	m	enta	atio	n,				
development, evaluation and improveme (SWMP) Plan during this reporting periods.	nt on the Sto od? Check a	rmv all th	vate iat a	er M app	lan: v:	age	eme	nt F	'ro	grai	m		
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O Comments on SWMP Received					#	C	omm	ents	Ė	T			
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O Volunteer Monitoring						#	#Eve	ents	-				
Other: Board Meeting	s - P u	b	1	i		0	Co	m	m	е	n	t	
2. Was public notice of availability of this ar Program (SWMP) Plan provided?	inual report	and	Sto	orm	wat	er	Ma	ınaş				·	
O List-Serve						-1	# In I	iet		Ye	s	0	No
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O TV/Radio Notices							ays R ays R	V		=	+	+	-
Other: Town Board Me	e t i n	g			II.	T	., J. J.	Lan.			+	+	
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This report is being submitted for the reporting period ending March 9, 2 0 2 2 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 2

	SPDES ID
Name of MS4/Coalition Town of Putnam Valley	N Y R 2 0 A 3 4 5
4.a. If this report was made available on the internet, what date	te was it posted?
Leave blank if this report was not posted on the internet.	
4.b. For how many days was/will this report be posted?	3 0
If submitting a report for single MS4, answer 5.a If submitti	ng a joint report, answer 5.b
5.a. Was an Annual Report public meeting held in this reporti	ng period? • Yes • No
If Yes, what was the date of the meeting?	0 4 / 2 1 / 2 0 2 2
If No, is one planned?	• Yes O No
5.b. Was an Annual Report public meeting held for all MS4s c	contributing to this report during
this reporting period?	O Yes No
If No, is one planned for each?	○ Yes ● No
6. 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.	

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

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 Putnam Valley		N Y R 2 0 A 3	3 4 5
7. Evaluating Pro	gress Toward Measurable Goal	s MCM 2		
identified in your St III.C.1. Submit addi	port on your progress and project p tormwater Management Program l itional pages as needed.	Plan (SWMPP), incl	uding requirements in	
A. Briefly summar	rize the Measurable Goal identif	fied in the SWMPP	in this reporting per	tiod.
Maximizing public	involvement and participation.			
B. Briefly summar Goal.	rize the observations that indica	ted the overall effec	tiveness of this Meas	surable
on the Town website channels of 18 and 2 pandemic attendance	ngs are being held in-preson and verte and in the local paper. Meetings 20. Meeting attendance is typicall be level. Should a large crowd be can be accommodated.	s can also be viewed by twenty (20) people	on the Putnam Valley which is close to the	y TV pre
C. How many time	es was this observation measure	d or evaluated in thi	is reporting period?	
		a or or manage in the		8
D. Has your MS4 n	made progress toward this meas	gurable goal during		rticipants/events) 19
Jour Man I	mas progress to war a time means	diable goal daling		○ No
E. Is your MS4 on	schedule to meet the deadline se	et forth in the SWM	PP?	
			Yes	O No
	ize the stormwater activities pla ng cycle (including an implemen		als of this MCM du	ring
Public meetings will continue to be posted televised.	I continue to be held in person and on the Town website and in the	d via Zoom. Meeting local paper. Meeting	g times and minutes w gs will continue to be	vill

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

Name of MS4/Coalition Town of Putnam Valley	SPDES ID N Y R 2 0 A 3 4 5
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported	l (check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to 	
1. Enter the number and approx. percent	t of outfalls mapped: 4 1 2 # 1 0 0 %
2. How many of these outfalls have been seporting period (outfall reconnaissand	screened for dry weather discharges during this ce inventory)?
3.a. What types of generating sites/sewersh reporting period?	neds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
Other:	○ None
• Sewersheds: W O O D S T R E E T B	BASIN

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

Name of MS4/Coalition Town of Petnam Valley		N Y R 2	2 0 A 3	4 5
3.b. What types of illicit discharges have	been found during this repor	ting period	?	
O Broken Lines From Sanitary Sewer	O Industrial Connections			
O Cross Connections	O 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 Discharge	es		
Other:	O None			
4. How many illicit discharges/potential reporting period?	l illegal connections have been	detected d	luring thi	s 0
5. How many illicit discharges have bee	n confirmed during this repo	rting period	1?	
6. How many illicit discharges/illegal coperiod?	nnections have been eliminate	ed during t	his repor	ting
7. Has the storm sewershed mapping be If No, approximately what percent was			O Yes	• No
8. Is the above information available in Is this information available on the w If Yes, provide URL(s):			YesYes	O No No
Please provide specific address of page v	where map(s) can be accessed -	not home pa	age.	
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This report is being submitted for the reporting period ending March 9, 2 0 2 2 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 2

Name of MS4/Coalition	Town of Putnam Valley		DES ID YR20A3	4 5
12. Evaluating Prop	gress Toward Measurable Goals M	ICM 3		
identified in your St	ort on your progress and project plans formwater Management Program Plan tional pages as needed.			Part
A. Briefly summar	rize the Measurable Goal identified	in the SWMPP in t	this reporting per	iod.
Continue illicit disc	harge and detection program			
B. Briefly summar Goal.	ize the observations that indicated	the overall effective	eness of this Meas	urable
	t discharges found or reported. Illicit who oversees the correction of the di		ted to the County	
C. How many times	s was this observation measured or	evaluated in this r	eporting period?	
D. Has your MS4 n	nade progress toward this measura	ble goal during this	s reporting period	12
E. Is your MS4 on	schedule to meet the deadline set fo	orth in the SWMPP	Yes ?	
F. Briefly summari the next reporting	ize the stormwater activities plannong cycle (including an implementat	ed to meet the goals ion schedule).	389	
Any new outfalls con Illicit discharges can	s to inventory and address issues of enstructed or discovered will be mapped be reported to the Town or via the Tounty Health Department for correction	ed and included in the found in	he Town GIS datab	oase.

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

Na	rme of MS4/Coalition Town of Putnam Valley	ES ID	0 A 3	4 5
	Minimum Control Measures 4 and 5. Construction Site and Post-Construction Cont	rol		
Th	he 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	a. Has each MS4 contributing to this report adopted a law, ordinance or omechanism that provides equivalent protection to the NYS SPDES Gen Stormwater Discharges from Construction Activities?			O No
1b	b. Has each Town, City and/or Village contributing to this report docume equivalent to a NYSDEC Sample Local Law for Stormwater Managem Sediment Control through either an attorney cerfification or using the Analysis Workbook?	ent and	Erosion	w is and O NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample 09/20		aw. 03/2006	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 (SWP reviewed in this reporting period?	PPs) ha	ve been	8
4.	Does your MS4/Coalition have a mechanism for receipt and considerati comments related to construction SWPPPs?	on of p	ublic No	O NT
	If Yes, how many public comments were received during this reporting periods	od?		0
5.	Does your MS4/Coalition provide education and training for contractor SWPPP process?	's about	the loca	l • 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:

2	-	
#		O No Authority
#	4	O No Authority
#		
#		O No Authority
	# # # # # # # # # # # # # # # # # # # #	# 4 # # # # # # # # # # # # # # # # # #

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

		SPDES ID		
Na	me of MS4/Coalition Town of Putnam Valley	NYR2	0 A 3	4 5
	Minimum Control Measure 4. Construction Site Story	nwater Run	off Con	trol
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 disturbing this reporting period?	rbances of one	acre or	more
2.	How many construction projects disturbing at least one acre welduring this reporting period?	re active in you	ır jurisd	iction 2
3.	What percent of active construction sites were inspected during	this reporting	period?	© NT
4.	What percent of active construction sites were inspected more th	ıan once?	1 0	○ NT
5.	Do all inspectors working on behalf of the MS4s contributing to Construction Stormwater Inspection Manual?	this report use Yes	the NY	
6.	Does your MS4/Coalition provide public access to Stormwater P (SWPPPs) of construction projects that are subject to MS4 review	w and approva	al?	
	If your MS4 is Non-Traditional, are SWPPPs of construction propublic review?			or
	If Yes, use the following page to identify location(s) where SWPPPs	can he accesse	○ Yes	O No

This report is being submitted for the reporting period ending March 9, 2 0 2 2 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 Putnam Valley N Y R 2 0 A 3 4 5 6. con't.: Submit additional pages as needed. O MS4/Coalition Office Department Address City Zip Phone O Library Address City Zip Phone Other Address P Office i r d n o a n g City Zip P 1 e y NY 1 0 5 7 9 u t n a Phone 6 - 3 7 4 0 5 2 8 O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

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

Name of MS4/Coalition Town of Putnam Valley	N Y R 2 0 A 3 4 5
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward acidentified in your Stormwater Management Program Plan (SWMPP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
Site enforcement and inspection	
B. Briefly summarize the observations that indicated the overal Goal.	ll effectiveness of this Measurable
Two construction projects were underway during the reporting peri the Town Engineer's office were onsite witnessing construction act construction was halted and the Contractor was advised that activity conformance with the approved site plans and/or required maintenant practices on the property.	ivities. In four instances, ies on the site were not in
C. How many times was this observation measured or evaluated	d in this reporting period?
	[] 1 2 5 (ex.: samples/participants/events.
D. Has your MS4 made progress toward this measurable goal d	uring this reporting period? Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the	
23. 25 your 122 to 2 spaceano to most the delication of noting in	● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedu	~
The Town 's current site inspection and enforcement practices will evaluated per project, on an as needed basis, and/or per NYSDEC r	

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

Name of MS4/Coalitio	Town of Putnam Val	ley		SPDES ID N Y R	2 0 A 3 4 5
Minimum	Control Mea	sure 5. Post	-Constructio	on Stormwater N	Aanagement
The information in the	his section is beir	ng reported (chec	ck one):		
On behalf of an inOn behalf of a coaHow n		ributed to this	report?		
				nagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces			Top the Prince Con.	
O Filter Systems					
O Infiltration Basins					
Open Channels					
O Ponds			100 Maria 100 Ma		
O Wetlands					
Other		1 1	1	0	
2. Do you use an BMPs, inspecti			base, spreadsl	heet) to track post-	construction O Yes No
3. What types of a Development/E				implement Low In nciples?	1pact
O Building Codes	O Municipal Co	omprehensive P	lans		
Overlay Districts	Open Space	Preservation Pro	gram		
O Zoning	O Local Law or	Ordinance			
O None	O Land Use Re	gulation/Zoning			
Watershed Plans	Other Compr	ehensive Plan			
Other:					

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			21	JE2 I	ע				
Nar	me of MS4/Coalition Town of Pulnam Valley		N	Y	2	0	A 3	4	5
40	Ano the MCAs contributing to this year at involved in		م الم		_1		65	49	
48.	a. Are the MS4s contributing to this report involved in	i a regional/watersn	ea v	vide	piain		Yes		No
4b.	o. Does the MS4 have a banking and credit system for	stormwater manage	eme	nt pr	actic	es?			
						0	Yes	•	No
4c.	 Do the SWMP Plans for each MS4 contributing to t and approval of banking and credit of alternative si 								
	and approvaror banking and crout or atternative of	ing of a stormwater	1 1114	mag	7884-A1		Yes		No
4d.	l. How many stormwater management practices have	been implemented a	ıs p	art o	f this	sys	tem i	n th	ı is
	reporting period?					ĺ		0	
5.	What percent of municipal officials/MS4 staff responsioning on Low Impace Development (LID), Better						attend	led	
	Infrastructure principles in this reporting period?							0	%

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

Name of MS4/Coalition Town of Putnam Valley	N Y R 2 0 A 3 4 5
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III, C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Identify existing or potential new conditions that may require a populutant discharges.	ost construction structure to reduce
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Presently there is no development being proposed in the Town wh post construction stormwater practice.	nich would trigger the need for a
C. How many times was this observation measured or evaluate	ed in this reporting period?
	0
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events)
21 140 Jour 1154 made progress toward this measurable goar	• Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	ie SWMPP?
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheduler).	
The Town will continue to be proactive in its post constructions st post construction stromwater practices if needed.	andards and will develop and fund

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					SPDES	ID		
Name of MS4/Coalition Town of Putnam Valley					NY	R 2	0	A 3 4 5
Minimum Control Measure 6. Stormwate	r N	<u>Iana</u>	gem	ent	for Mu	nicip	al (Operations
The information in this section is being reported (check or	ne):							
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this repo 	·							
1. Choose/list each municipal operation/facility the Pollutants of Concern to the MS4 system. For operation/facility has been addressed in the MS4 Program(SWMP) Plan and whether a self-asses reporting period. A self-assessment is perform potentially generated by the permittee's operate effectiveness of existing programs and 3) identificated will be addressed by the pollution prevention not done already.	eac 84's essn ed t ions	h oper //Coali nent ha to: 1) o s and f the m	ation tion as be leter acili unic	n/fac s Sto en p mino ties; ipal	ility indi ormwate erformed e the sou 2) evalu operation ekeeping	cate very many many many many many many many man	whenage ing of pole de d fa gran	ther the ement the ollutants cilities a, if it's
		-			perform			the past 3
,	2000	sed in					rs?	
Street Maintenance.					************			O No
Bridge Maintenance								• No
Winter Road Maintenance					**********			○ No
Salt Storage.								No
Solid Waste Management	Ο.		No	1000000		A 37	es	110
New Municipal Construction and Land Disturbance								• No
Th' 14 CART BE' 4	0.		• No		***********	\bigcirc Y	es	
Right of Way Maintenance	100	Yes	No No) ,,,,,,	************	O Y	es es	NoNoNo
Marine Operations		Yes (No No No))	************	O Y O Y O	es es es	No No
Marine Operations	0	Yes (No No No))	************	O Y O Y O	es es es	NoNoNo
Marine Operations	0.	Yes Yes	No No No No)))	************	O Yo O Yo O Yo	es es es	No No No No
Marine Operations	0.0	Yes (Yes Yes Yes	No No No No No No		*************	O Y O Y O Y O	es es es es	NoNoNoNoNoNo

No

Vehicle and Fleet Maintenance.O YesNoO YesOther.O YesO NoO Yes

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Name of MS4/Coalition Town of Putnam Valley	N Y R 2	0 A 3	4 5
2. Provide the following information about municipal operations a	good housekeepii	ng prog	rams:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres		1 2
Streets Swept (Number of miles X Number of times swept)	# Miles	1	0 0
 Catch Basins Inspected and Cleaned Where Necessary 	#	2	0 0
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	# [2
Phosphorus Applied In Chemical Fertilizer	# Lbs.	and the same of th	0
Nitrogen Applied In Chemical Fertilizer	# Lbs.		0
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.) 	# Acres		0.0
3. How many stormwater management trainings have been provid during this reporting period?	led to municipal	employ	ees
4. What was the date of the last training?			
5. How many municipal employees have been trained in this repor	ting period?		
6. What percent of municipal employees in relevant positions and stormwater management training?	departments rec	eive	0 %

Due to COVID-19, there were no opportunities for training during the reporting period. The Town will make every effort to provide training during the 22-23 reporting period

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

Name of MS4/Coalition	Town of Pulnam Valley	N Y R 2 0 A 3 4 5
7. Evaluating Pro	gress Toward Measurable Goals MCM 6	*
identified in your St	ort on your progress and project plans toward ormwater Management Program Plan (SWM tional pages as needed.	d achieving measurable goals IPP), including requirements in Part
A. Briefly summar	ize the Measurable Goal identified in the S	SWMPP in this reporting period.
Record and compare	e yearly data.	
B. Briefly summar Goal.	ize the observations that indicated the ove	rall effectiveness of this Measurable
One hundred percen	t (100%) of the Town catch basins were clea	ned during the reporting period.
C. How many times	s was this observation measured or evalua	5 2 5
D. Has your MS4 m	nade progress toward this measurable goal	(ex:: samples/participants/ever l during this reporting period? • Yes • No
E. Is your MS4 on s	schedule to meet the deadline set forth in t	
F. Briefly summari	ze the stormwater activities planned to me ag cycle (including an implementation sche	● Yes ○ No eet the goals of this MCM during edule).
basins are cleaned tw	nue to sweep its streets, parking areas routing vice a year. Comparison of yearly data will popin point trouble spots.	ely or on an as needed basis. Catch oint out any severe changes

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e information in this section in the behalf of an individual MS on behalf of a coalition How many MS4s		() ()	
On behalf of a coalition		mart2	
	contributed to this re	20042	
How many MS4s	contributed to this re	242 0440	
		sport:	
SAs would answow the supe	tions on cheek NA o	a indicated in the table	halam
84s must answer the ques	mons of check NA a	s indicated in the table	e below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	**	Citeria	(roc)
raditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
raditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
lon-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed			
raditional Land Use raditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus
Ion-Traditional	1,6,7a-d,8a,9 1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	1,0,78-0,58,9	2,3,4,5,8b,10,11,12	Phosphorus
raditional Land Use	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
raditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
lon-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay	•		
raditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
raditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
lon-Traditional Peconic Estuary	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Fathogens
raditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
raditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
on-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	To the second se		
raditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
raditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
on-Traditional	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
LI 27 Embnyments raditional Land Use	1 2 2 4 7 5 4 0 10 11 12	5 6 90 96	Dark results
raditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b 5,6,8a,8b	Pathogens Pathogens
Ion-Traditional	1,2,3,4,7a-d,9	5,6,80,86,10,11,12	Pathogens

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		SPDES ID		
Na	ame of MS4/Coalition Town of Putnam Valley	NYR2	0 A	3 4 5
3.	Does your MS4/Coalition have a Stormwater Conveyance Syste and Maintenance Plan Program?	m (infrastructi Yes	ı re) Ins ı O No	oection O N/A
4.	Estimate the percentage of on-site wastewater treatment system and maintained or rehabilitated as necessary in this reporting p		n inspec	
5.	Has your MS4/Coalition developed a program that provides pro NYSDEC SPDES General Permit for Stormwater Discharges for (GP-0-08-001) to reduce pollutants in stormwater runoff from coalisturb five thousand square feet or more?	om Constructi	on Activ	ities
6.	Has your MS4/Coalition developed a program to address post-orunoff from new development and redevelopment projects that equal to one acre that provides equivalent protection to the NYS Permit for Stormwater Discharges from Construction Activities the New York State Stormwater Design Manual Enhanced Phos Standards?	disturb greater S DEC SPDES s (GP-0-08-001)	than or General , includi	•
7a	. Does your MS4/Coalition have a retrofitting program to reduce phosphorus/nitrogen/pathogen loading?	erosion or Yes	O No	O N/A
7b	.How many projects have been sited in this reporting period?			0
	What percent of the projects included in 7b have been complete. What percent of projects planned in previous years have been complete.		ing peri	%
		020	Projects	
8a.	Has your MS4/Coalition developed and implemented a turf man procedures policy that addresses proper fertilizer application or lands?		wned	O N/A
	Has your MS4/Coalition developed and implemented a turf man procedures policy that addresses proper disposal of grass clippin municipally owned lands?			O N/A

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				SPDES ID								
Name of MS4/Coalition Town of Putnam Valley	N	Y	R	2	0	A	3	4	5			
9. Has your MS4/Coalition developed and implemented a program of	f na	tive	e pl	ant	ine	?						
, and a property of the control of t			_		_	No	(O N	I/A			
10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and												
prohibiting goose feeding?		C	Ye	es	0	No	i	D N	I/A			
11 Dogg your MG//Coolition have a not much have												
11. Does your MS4/Coalition have a pet waste bag program?		C	Ye	S	\bigcirc	No	.0	₽ N	/A			
12. Does your MS4/Coalition have a program to manage goose												
populations?		С	Ye	s	0	No		N	[/A			