#### **MS4 Annual Report Cover Page**

MCC form for period ending March 9, 2 0 1 7

This	cover	page	must	be comp	pleted	by the	report	preparer.
Joint	repor	rts re	quire	only one	e covei	page.		

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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

# O This report is being submitted on behalf of a Single Entity

(Per Part II.E of GP-0-10-002)

Name of		le En	tity												
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#### OR

#### 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.

Name of	Coalition	1	 			- 20	 21 - 7731			
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## MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 7

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

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MCC form for period ending March 9, 2 0 1 7

		SPL	DES I	D					
Name of MS4 Town of New Paltz		N	Y	R :	2	0 A	. 5	5	3
Each MS4 must submit an MCC form.									
Section 1 - MCC Identification Page									
Indicate whether this MCC form is being submitted to certify endorsement • An Annual Report for a single MS4	nt or ac	сер	tanc	e of	:				
○ 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 b	oinding	gag	reen	nen	ts.				
If Joint Report, enter coalition name:					_		_		
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MCC form for period ending March 9, 2 0 1 7

	SPD	ES	ID						
Name of MS4 Town of New Paltz	N	Y	R	2	0	A	5	5	3

#### **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
- O Duly Authorized Representative
- Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

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MCC form for period ending March 9, 2 0 1 7

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Name of MS4	Town of New Paltz	N	Y	R	2	0	A	5	5	3

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

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For each contact, select all that apply:

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

First Name	MI Last Name
Rebecca	A Minas
Title	
Senior Engineer	
Address	
1 Paradies Land	- Suite 200
City	State Zip
New Paltz	N Y 1 2 5 6 1 -
eMail	
rminas@bartonand	dloguidice.com
Phone	
	County

MCC form for period ending March 9, 2 0 1 7

	SPDES ID
Name of MS4 Town of New Paltz	N Y R 2 0 A 5 5 3
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all pern	nit requirements during this reporting
period?	O Yes • No
If Yes, complete information below.	p 12 800 MMSSC 100
Submit a separate sheet for each partner. Information provided	
accepted. If your MS4 cooperated with a coalition, submit one scoalition. It is not necessary to include a separate sheet for each	
If No, proceed to Section 4 - Certification Statement.	1 WIS4 III the coantion.
Partner/Coalition Name	
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
	N Y R 2 0
Address	
City Star	te Zip
eMail	
Phone	Binding Agreement in accordance
	-0-08-002 Part IV.G.? • Yes • No
What tasks/responsibilities are shared with this partner (e.g. MM1	School Programs or Multiple Tasks)
O MM1	
O MM2	
O MM3	
O MM4	
O MM5	
O MM6	
Additional tasks/responsibilities	
Watershed Improvement Strategy Best Management Practices	required for MS4s in impaired
watersheds included in GP-0-08-002 Part IX.	•

MCC form for period ending March 9, 2 0 1 7

	SPDES ID	
Name of MS4 Town of New Paltz	N Y R 2 0 A 5 5 3	3

#### **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  N e i 1	MI	Last Name Bettez
Title (Clearly print title of individual signing report)		
Town Supervisor		
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

This report is being submitted for the reporting period ending March 9,  $2 \ 0 \ 1 \ 7$  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 Paltz	N Y R 2 0 A 5 5 3											
Window One Plan Towns	u.											
Water Quality Trends												
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 are contributed to this report?</li> </ul>												
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												
O Report(s) attached to the annual report												
<ul> <li>Web Page(s) where report(s) is/are provided below</li> <li>Please provide specific address of page where report(s) of</li> </ul>	can be accessed - not home page.											
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This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 7 & 1 \end{vmatrix}$ 

Name of MSA/Coalition Town of New Paltz	SPDES ID  N Y R 2 0 A 5 5 3										
Name of MS4/Coalition Town of New Partz	N I N Z O A S S S										
Minimum Control Measure 1. Public Ed	ucation 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 d	uring this reporting period:										
O Construction Sites	O Pesticide and Fertilizer Application										
O General Stormwater Management Information	O Pet Waste Management										
<ul> <li>Household Hazardous Waste Disposal</li> </ul>	Recycling										
O Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration										
O Infrastructure Maintenance	Trash Management										
○ Smart Growth	O Vehicle Washing										
O Storm Drain Marking	O Water Conservation										
$\bigcirc$ 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											
O Businesses • General Public											
○ Restaurants ○ Industries											
Other: OAgricultural Other											

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 7$ 

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

SPDES ID

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This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 7$ 

Name of MS4/Coalition Town of New Paltz  SPDES ID  N Y R 2 0 A 5 5 3
4. Evaluating Progress Toward Measurable Goals MCM 1
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
The town continues to promote local events and makes SWMP information available on its website.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
The town promoted events on its website and facebook page: Clean Sweep, Household Hazardous Waste and Trees for Tribs. The following information is made available to the public on the Town's website: Stormwater Management Program, mapped town wetland and floodplain areas, SWPPs. The kiosk at the Town's Reuse and Recycling Center provides pamphlets promoting proper waste disposal and management and 1,200 pamphlets were printed during this period.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/events)
D. Has your MS4 made progress toward this Measurable Goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? • Yes O No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
The town will continue to publicize events on its web-site and facebook pages. MS4 information will be consolidated with a MS4 link on the town website to make information available in one place. Information should include Wetland and Floodplain Map, Catch basin, Culvert and Outfall Map, SWMP, SW and IDDE laws, information for developers, etc.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

Name of MS4/Coalition Town of New Paltz	N Y R 2 0 A 5 5 3
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieving identified in your Stormwater Management Program Plan (SWMPP), inclu III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP i	n this reporting period.
The town held public meeting to solicit input on the Stormwater and IDDI	E laws.
B. Briefly summarize the observations that indicated the overall effect Goal.	tiveness of this Measurable
Stormwater and IDDE laws were passed at a public hearing on December emphasis placed on Green Infrastructure.	22, 2016 with a strong
C. How many times was this observation measured or evaluated in thi	s reporting period?
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this Measurable Goal during	this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWM	PP? • Yes O No
F. Briefly summarize the stormwater activities planned to meet the go the next reporting cycle (including an implementation schedule).	als of this MCM during
The Town will continue to enforce the IDDE and Stormwater laws.	

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 7 \end{vmatrix}$ 

		SPDES ID					
Name of MS4/Coalition Town of New Paltz		N Y R 2	0	A	5	5	3
Minimum Control Measure 2. Public In	nvolvemen	t/Particip	atio	<u>on</u>			
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. What opportunities were provided for public participal development, evaluation and improvement of the Stori				ran	a		
(SWMP) Plan during this reporting period? Check all		_	J				
• Cleanup Events		# Events					1
O Comments on SWMP Received		# Comments	Г				
Community Hotlines Phone #	(845	) 2 5 5	]_	0	6	0	4
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O Community Meetings		# Attendees	Ī				
O Plantings		Sq. Ft.					
O Storm Drain Markings		# Drains					
O Stakeholder Meetings		# Attendees					
O Volunteer Monitoring		# Events					
Other: Planning Board Pu	b l i c	H e a	r	i	n	g	
2. Was public notice of availability of this annual report	and Stormy	vater Mana	gem	iení	t		
Program (SWMP) Plan provided?				Ye		0	No
○ List-Serve		# In List					
Newspaper Advertising		# Days Run					7
O TV/Radio Notices		# Days Run					
Other:							

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

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This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

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Name of MS4/Coalition Town of New Paltz

#### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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 A 5 5 3

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This report is being submitted for the reporting period ending March 9, 2 0 1 7

SPDES ID		
Name of MS4/Coalition Town of New Patlz  N Y R 2	0 A 5	5 3
4.a. If this report was made available on the internet, what date was it posted?		
Leave blank if this report was not posted on the internet.        0     4       2     7	/ 2 0	1 7
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 submitting a joint report, answ	ver 5.b	
5.a. Was an Annual Report public meeting held in this reporting period?	• Yes	O No
If Yes, what was the date of the meeting?  0 5 / 0 4	/ 2 0	1 7
If No, is one planned?	○ Yes	○ No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this r	eport dı	ıring
this reporting period?	• Yes	O 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 1 7

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 Paltz		N Y R 2 0 A 5	5 3
7. Evaluating Prop	gress Toward Measurable Goals MC	CM 2		
identified in your St	ort on your progress and project plans formwater Management Program Plan tional pages as needed.	A STATE OF THE PROPERTY OF THE		Part
A. Briefly summar	rize the Measurable Goal identified i	n the SWMPP i	in this reporting peri	iod.
The town hosts con	nmunity wide clean-up event.			
B. Briefly summar Goal.	rize the observations that indicated t	he overall effect	tiveness of this Meas	urable
received t-shirt, glo	Clean Sweep public participation event ves, snacks and garbage bags to collect ordinated by the Community Improvem	t litter from arou	and the community. The	
C. How many time	es was this observation measured or	evaluated in thi	s reporting period?	
			(ex.: samples/par	1   1   rticipants/events)
D. Has your MS4 r	made progress toward this measural	le goal during		
			Yes	○ No
E. Is your MS4 on	schedule to meet the deadline set for	th in the SWM		
	ize the stormwater activities planneding cycle (including an implementation		● Yes als of this MCM dur	○ No r <b>ing</b>
	inue to request volunteers to organize an Sweep event is scheduled for April		n the annual clean up	

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 & 1 & 7 \end{vmatrix}$ 

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 Paltz			NY	R	2 0	A	5	5 3	3
Minimum Control Measure 3.	Illicit Discharge	Detecti	on ar	nd E	Elim	ina	ıtio	<u>n</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 the</li> </ul>									
1. Enter the number and approx. percent	of outfalls mapped	l:	4 7	5	#	1	0	0 9	6
2. How many of these outfalls have been so reporting period (outfall reconnaissance	•	eather dis	scharg	ges d	lurin	g tl	nis	(	
3.a. What types of generating sites/sewershe reporting period?	ds were targeted f	for inspec	ction o	lurii	ng th	is			
O Auto Recyclers	O Landscaping (Irr	rigation)							
O Building Maintenance	O Marinas								
○ Churches	O Metal Plateing C	perations							
<ul> <li>Commercial Carwashes</li> </ul>	Outdoor Fluid St	torage							
O Commercial Laundry/Dry Cleaners	Parking Lot Mai	intenance							
Construction Vehicle Washouts	O Printing								
O Cross-Connections	O Residential Carv	vashing							
O Distribution Centers	<ul><li>Restaurants</li></ul>								
O Food Processing Facilities	O Schools and Uni	versities							
O Garbage Truck Washouts	Septic Maintenar	nce							
O Hospitals	O Swimming Pools	3							
O Improper RV Waste Disposal	• Vehicle Fueling								
O Industrial Process Water	• Vehicle Maint./R	Repair Sho	ps						
Other:	○ None					,	,		
Discharges to	r o a d s	i d e	d	i t	t c	h	е	s	
○ Sewersheds:									_

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 7$  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 Paltz	N Y R 2	2 0 A 5 5 3
3.b.What types of illicit discharges have	been found during this reporting period	!?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	○ Inflow/Infiltration	
O Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows	
O Illegal Dumping	O Straight Pipe Sewer Discharges	
Other:	● None	
4. How many illicit discharges/potentia	l illegal connections have been detected d	luring this
reporting period?		0
5 How many illisit disabours have her		10
5. How many linest discharges have bee	en confirmed during this reporting period	<b>d?</b> 0
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during t	this reporting
7. Has the storm sewershed mapping be If No, approximately what percent was		○ Yes ● No
8. Is the above information available in Is this information available on the war If Yes, provide URL(s):	veb?	<ul><li>Yes</li><li>No</li><li>Yes</li><li>No</li></ul>
Please provide specific address of page URL	where map(s) can be accessed - not home p	age.
URL		

This report is being submitted for the reporting period ending March 9,  $\begin{bmatrix} 2 & 0 \end{bmatrix}$  1  $\begin{bmatrix} 7 & 1 \end{bmatrix}$ 

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This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 7 \end{vmatrix}$ 

	SPDES ID
Name of MS4/Coalition Town of New Paltz	N Y R 2 0 A 5 5 3
12. Evaluating Progress Toward Measurable Goals MCM 3  Use this page to report on your progress and project plans toward a	<u> </u>
identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	P), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
Develop program to eliminate improper disposal of waste.	
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
The Town runs its annual spring clean up at the Recycling Center promoted this event on facebook and on the Town's website and h to May 7th, 2016. At this time, Town residents were invited to drefurniture, freon unit and non-freon unit and tires.	nosted the event between April 23rd
C. How many times was this observation measured or evaluate	ed in this reporting period?
	(ex.: samples/participants/events
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 the	ne SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation scheme)	et the goals of this MCM during
The Town will continue to host its Annual Spring Clean up event Transfer Station.	at the Recycling Center and

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 7$ 

If submitting	ng this form as part of a joint report on behalf of	f a coalition leave SPDES ID bla	ınk.
		SPDES ID	
Name of MS4/Coalition	Town of New Paltz	N Y R 2 0 A	5 5 3
12. Evaluating Pro	gress Toward Measurable Goals MCM 3		
identified in your St	oort on your progress and project plans towar tormwater Management Program Plan (SWN itional pages as needed.	1. The state of th	
A. Briefly summar	rize the Measurable Goal identified in the	e SWMPP in this reporting p	period.
Develop program f	or Illicit Discharge Determination and Elimi	ination (IDDE).	
B. Briefly summar Goal.	rize the observations that indicated the ov	verall effectiveness of this M	easurable
increase awareness monitoring effort w weather conditions	s funding to the Wallkill River Watershed All of the health of the Wallkill River. Their 'Bo which uses volunteers to observe outfalls. 6 of photographs and reports were provided to the g investigation, it was determined that the out	oat Brigade' is a citizen water outfalls were observed during the Town's Building Inspector	rshed dry r.
C. How many time	es was this observation measured or evalu	nated in this reporting perio	d?
		(av. , campleo	/participants/even
D. Has your MS4	made progress toward this measurable go		
•		• Y	es O No
E. Is your MS4 on	schedule to meet the deadline set forth in		0.31
E Dwiefly gummer	rize the stormwater activities planned to n	• Ye most the goals of this MCM	
•	ing cycle (including an implementation sci		uuring
report findings to the tributaries of the W	will continue to observe outfalls to the Wallk he Building Inspector. They will also considerable also considerable and the Building Installation and will investigate reported suspect	ler expanding their monitoring spector and/or Hwy Supervise	g to

This report is being submitted for the reporting period ending March 9, 2 0 1 7

Name of MS4/Coalition	Town of New Paltz	N Y R 2 0 A 5 5 3
12. Evaluating Pro	gress Toward Measurable Goals MCM 3	
identified in your St	oort on your progress and project plans toward tormwater Management Program Plan (SWMF itional pages as needed.	_
A. Briefly summan	rize the Measurable Goal identified in the S	WMPP in this reporting period.
	for illicit discharges, and has adopted an illici December 22, 2016.	t discharge law which was passed at
B. Briefly summar Goal.	rize the observations that indicated the over	rall effectiveness of this Measurable
discharges based or	ector, Town Engineer and Highway Supervisor in site observations and complaints. The Buildi have been trained in IDDE provided by Ulster C	ng Inspector and Highway
C. How many time	es was this observation measured or evaluat	ted in this reporting period?
D II MG4		(ex.: samples/participants/events
D. Has your MS4	made progress toward this measurable goal	e Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in t	he SWMPP?
•	rize the stormwater activities planned to me ing cycle (including an implementation sche	et the goals of this MCM during
The Town will con	tinue to inspect for illicit discharges and will e	enforce their IDDE law.
	) (G) (G) (G) (G)	

This report is being submitted for the reporting period ending March 9, 2 0 1 7

		SPI	DES	ID						
Name of MS4/Coalition	Town of New Paltz	N	Y	R	2	0	A	5	5	3

	Minimum Control Measures 4 and 5.											
	<b>Construction Site and Post-Construction Control</b>											
	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 reg mechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?		○ No									
1b	1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap											
	Analysis Workbook?   • Yes	○ No	$\circ$ NT									
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La  0 09/2004 • 02	w. 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	3									
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs?  • Yes	blic O No	O NT									
	If Yes, how many public comments were received during this reporting period?											
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	the loca	ıl • 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:

O Notices of Violation	#		O No Authority
O Stop Work Orders	#		O No Authority
O Criminal Actions	#		O No Authority
O Termination of Contracts	#		O No Authority
O Administrative Fines	#		O No Authority
O Civil Penalties	#		O No Authority
O Administrative Orders	#		O No Authority
O Enforcement Actions or Sanctions	#		
• Other	#	1	O No Authority

This report is being submitted for the reporting period ending March 9, 2 0 1 7

Name of MS4/Coalition Town of New Paltz  SPDES ID  N Y R 2 0	A 5 5 3
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 acreduring this reporting period?	re or more
2. How many construction projects disturbing at least one acre were active in your juduring this reporting period?	urisdiction 3
3. What percent of active construction sites were inspected during this reporting per	
4. What percent of active construction sites were inspected more than once?	0 0 %  ONT
5. Do all inspectors working on behalf of the MS4s contributing to this report use the Construction Stormwater Inspection Manual? • Yes •	e NYS No ONT
6. Does your MS4/Coalition provide public access to Stormwater Pollution Preventio (SWPPPs) of construction projects that are subject to MS4 review and approval?	
If your MS4 is Non-Traditional, are SWPPPs of construction projects made availa	No ONT  able for  Yes ONo
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,  $\begin{bmatrix} 2 & 0 & 1 \end{bmatrix}$  7

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This report is being submitted for the reporting period ending March 9, 2 0 1 7

Name of MS4/Coalition	Town of New Paltz		SPDES ID N Y R 2 0 A 5	5 3
7. Evaluating Prog	gress Toward Measurable Goals M	ICM 4		
identified in your Sto	ort on your progress and project plan ormwater Management Program Pla tional pages as needed.			Part
A. Briefly summar	ize the Measurable Goal identified	l in the SWMPP in	ı this reporting peri	iod.
The Town will cont control measures.	inue to review SWPPPs, undertake o	construction site ins	pections and enforce	;
B. Briefly summar Goal.	ize the observations that indicated	the overall effecti	veness of this Meas	urable
acre or more. Active active construction p	and/or Building Inspector review S e construction sites are inspected by projects in this reporting period and spection failed and was remedied im	the Town's Buildin these sites were all	g Inspector. There w inspected every 1 to	rere 3
C. How many times	s was this observation measured o	r evaluated in this	reporting period?	
			(ex.: samples/par	3
D. Has your MS4 n	nade progress toward this measur	able goal during t		
E. Is your MS4 on	schedule to meet the deadline set f	forth in the SWMI	PP?  ● Yes	○ No
	ize the stormwater activities plann ng cycle (including an implementa			
The Town Engineer active construction s	and Town Building Inspector will c sites.	continue to review S	SWPPPs and inspect	

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 7 & 1 \end{vmatrix}$ 

	SPDES ID
Name of MS4/Coalition Town of New Paltz	N Y R 2 0 A 5 5 3
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward as identified in your Stormwater Management Program Plan (SWMPF III.C.1. Submit additional pages as needed.	-
A. Briefly summarize the Measurable Goal identified in the SW	VMPP in this reporting period.
The Town will complete and adopt a stormwater local law that con and meets additional requirements of the Town.	afirms with the State's model law
B. Briefly summarize the observations that indicated the overa Goal.	ll effectiveness of this Measurable
The Town adopted the "Stormwater Management and Erosion and passed at a public hearing on December 22, 2016 with a focus on C based on the 2016 Draft NYSDEC Manual which was issue for pul	Green Infrastructure. The law was
C. How many times was this observation measured or evaluate	d in this reporting period?
D. Has your MS4 made progress toward this measurable goal of	(ex.: samples/participants/even
2. 1140 your 1/10 i mado progress to war a time measurance gour t	• Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP? ● Yes ○ 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
The Town Engineer and Town Building Inspector will continue to meet requirements of the local law and undertake site inspections f The Town Building Inspector will continue to enforce the local law post-construction SMPs.	or active construction activities.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

		3		SDDES ID	
Name of MS4/Coalition	Town of New Paltz			SPDES ID N Y R	
Minimum	Control Mea	sure 5. Post-	-Constructio	on Stormwater I	<u>Management</u>
The information in the	nis section is bein	g reported (chec	ck one):		
<ul><li>On behalf of an inc</li><li>On behalf of a coa</li><li>How m</li></ul>		ributed to this 1	report?		
1. How many and MS4/Coalition i				nnagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces				
O Filter Systems					
O Infiltration Basins					
Open Channels					
Ponds		3	3	3	
O Wetlands					
Other		1			
2. Do you use an BMPs, inspecti			base, spreads	heet) to track post	-construction ○ Yes • No
3. What types of a Development/B		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		. 197	npact
<ul><li>Building Codes</li></ul>	O Municipal C	omprehensive Pl	lans		
<ul><li>Overlay Districts</li></ul>	Open Space	Preservation Pro	gram		
<ul><li>Zoning</li></ul>	O Local Law or	r Ordinance			
○ None	Land Use Re	egulation/Zoning	;		
O Watershed Plans	Other Compi	rehensive Plan			
Other:					

This report is being submitted for the reporting period ending March 9, 2 0 1 7

		SPI	DES	D						
Nar	me of MS4/Coalition Town of New Paltz	N	Y	R	2	0	A	5	5	3
4a.	. Are the MS4s contributing to this report involved in a regional/waters	hed w	ide	pla	ann	_	effe Ye			No
4b.	. Does the MS4 have a banking and credit system for stormwater mana	geme	nt pi	ac	tice	es?				
						0	Ye	S		No
4c.	Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormwat	_							,	
	and approvar or banking and credit of afternative siting of a stormwat	CI III	mug		CIII	-	Ye			No
4d.	. How many stormwater management practices have been implemented reporting period?	l as pa	art o	f t	his	sys	tem	in	thi	s
5.	What percent of municipal officials/MS4 staff responsible for program training on Low Impace Development (LID), Better Site Design (BSD)						itte	nde	ed	
	Infrastructure principles in this reporting period?							3	3	%

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 7$ 

			SPDES ID	
Name of MS4/Coalition	Town of New Paltz		N Y R 2 0 A 5	5 5 3
6. Evaluating Pro	gress Toward Measurable Goal	s MCM 5		
identified in your St	ort on your progress and project program at tormwater Management Program at tional pages as needed.			Part
A. Briefly summan	rize the Measurable Goal identi	fied in the SWMPP	in this reporting per	riod.
The Highway Depa stormwater districts	artment staff inspect and maintain	all stormwater syste	ms that are within Tov	wn
B. Briefly summar Goal.	rize the observations that indica	ted the overall effec	ctiveness of this Meas	surable
I .	IPs in stormwater districts include ways for proper functioning.	ed mowing grass arou	und ponds, checking o	putlet
C. How many time	es was this observation measure	ed or evaluated in th	nis reporting period?	3
D. Has your MS4	made progress toward this mea	surable goal during	NOORA ARRES ARRES ARRES ARRES ARRES ARRES ARRES	rticipants/events) <b>d?</b>
D. Has your 17104	made progress toward this mea	sur unite gour uniting		
E. Is your MS4 on	schedule to meet the deadline s	et forth in the SWN	MPP?	○ No
	rize the stormwater activities pl ing cycle (including an impleme	_		
	estigate opportunities for funding			cts.

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 7$ 

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

	SPI	)ES	עו		,				
Name of MS4/Coalition Town of New Paltz	N	Y	R	2	0	A	5	5	3
Minimum Control Measure 6. Stormwater Management for	or N	Лu	nic	<u>cip</u>	al	Оp	era	ati (	ons

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></ul>	
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.

Self-Assessment

Operation/Activity/Facility performed within the past 3 Operation/Activity/Facility Addressed in SWMP? vears? Street Maintenance..... 9 Yes ○ No ...... • Yes O No Bridge Maintenance. 

• Yes ○ No ..... • Yes O No Winter Road Maintenance..... ○ No ...... • Yes O No Salt Storage..... O Yes No ..... O Yes No Solid Waste Management..... 

Yes ○ No ...... • Yes O No New Municipal Construction and Land Disturbance.. 

Yes ○ No ...... • Yes O No Right of Way Maintenance..... 

Yes ○ No ..... • Yes O No Marine Operations..... O Yes ● No ..... ○ Yes No Hydrologic Habitat Modification..... O Yes ● No ..... ○ Yes No ○ No • Yes O No Parks and Open Space..... Yes Municipal Building.... • Yes O No ○ No • Yes Stormwater System Maintenance..... • Yes ○ No ..... • Yes O No O No Vehicle and Fleet Maintenance..... Yes O No Ses Other..... O Yes ● No ○ Yes No

This report is being submitted for the reporting period ending March 9, 2 0 1 7

	SPDES ID				
Name of MS4/Coalition Town of New Paltz	NYR2	0 A	5	5	3
Traine of 1425 if Countrols		<u> </u>	1 1		
2. Provide the following information about municipal operation	s good housekeep	ing p	rogi	ran	1S:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres				3
O Streets Swept (Number of miles X Number of times swept)	# Miles				
Catch Basins Inspected and Cleaned Where Necessary	#			2	1
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#				3
O Phosphorus Applied In Chemical Fertilizer	# Lbs.				
O Nitrogen Applied In Chemical Fertilizer	# Lbs.				
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Num times applied to the nearest tenth.)	# Acres			]•[	
3. How many stormwater management trainings have been prov	vided to municipa	ıl emr	olov	ees	
during this reporting period?	1				0
4. What was the date of the last training?	0 2 / 0 4	/ 2	0	1	6
5. How many municipal employees have been trained in this rep	oorting period?				1
6. What percent of municipal employees in relevant positions an stormwater management training?	nd departments re	eceive 1	0	0	%

This report is being submitted for the reporting period ending March 9, 2 0 1 7

Name of MS4/Coalition Town of New Paltz  N Y R 2 0 A 5 5 3
7. Evaluating Progress Toward Measurable Goals MCM 6
Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Reports of all post-construction stormwater management practices inspection as well as maintenance activities including sweeping are kept.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Highway Department swept 3 acres of parking lots and inspected 21 catch basins.
C. How many times was this observation measured or evaluated in this reporting period?
D. Has your MS4 made progress toward this measurable goal during this reporting period?  • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
<ul> <li>Yes ○ No</li> <li>F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).</li> </ul>
Sweeping and catch basin inspection will continue to aid in preventing sediment transport into water courses and water bodies.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

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

w Paltz		SPDES ID           N         Y         R         2         0         A         5         5	
shed Improvemen	t Strategy Best Ma	anagement Practices	
is being reported (check	c one):		
IS4 s contributed to this re	eport?		
		e below.	
Answer	Check NA	(POC)	
-	-	-	
1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus	
		Phosphorus	
1,2,77a-d,8a,80,9	3,4,3,10,11,12	Phosphorus	
1.6.7a-d.8a.9	2.3.4.5.8b.10.11.12	Phosphorus	
		Phosphorus	
1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus	
-	-	-	
1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	
1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	
1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	
1 4 7- 10 10 11 12	2.2.5.6.001-	Deth	
		Pathogens	
		Pathogens Pathogens	
1,4,7a-u,9	2,3,4,3,68,60,10,11,12	- Tathogens	
1.4.7a-d.8a.9.10.11.12	2.3.5.6.8b	Pathogens and Nitrogen	
1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen	
1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen	
-	-	-	
1,4,6,7a-d,8a,9		Phosphorus	
1,4,6,7a-d,8a,9		Phosphorus	
1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	
-		Pathogens	
1 2 3 4 7a-d 9 10 11 12	5 6 8a 8h		
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	
	shed Improvemen  is being reported (check  [S4]  s contributed to this restions or check NA as  Answer  1,2,3,4,5,6,7a-d,8a,8b,9 1,2,77a-d,8a,8b,9 1,2,77a-d,8a,8b,9 1,6,7a-d,8a,9 1,6,7a-d,8a,9 1,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,7a-d,9,10,11,12 1,4,7a-d,9,10,11,12 1,4,7a-d,9 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,7a-d,8a,9 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9 1,4,6,7a-d,8a,9	shed Improvement Strategy Best Mais  is being reported (check one):  [S4]  s contributed to this report?  stions or check NA as indicated in the table  Answer Check NA	

Estimate what percentage was mapped in this reporting period.

This report is being submitted for the reporting period ending March 9, 2 0 1 7

	SPDES ID		
Name of MS4/Coalition Town of New Paltz	N Y R 2	0 A 5	5 3
3. Does your MS4/Coalition have a Stormwater Conveyance Syste and Maintenance Plan Program?	em (infrastructu O Yes	re) Insp ○ No	ection N/A
4. Estimate the percentage of on-site wastewater treatment system and maintained or rehabilitated as necessary in this reporting p		n inspec	ted %
5. Has your MS4/Coalition developed a program that provides pro NYSDEC SPDES General Permit for Stormwater Discharges from (GP-0-08-001) to reduce pollutants in stormwater runoff from coalisturb five thousand square feet or more?	com Constructio	on Activ	ities
6. Has your MS4/Coalition developed a program to address post-or runoff 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 O Yes	○ No	• N/A
7b. How many projects have been sited in this reporting period?			
7c. What percent of the projects included in 7b have been complete	ed in this report	ing peri	od?
7d. What percent of projects planned in previous years have been c	-		%
8a. Has your MS4/Coalition developed and implemented a turf man procedures policy that addresses proper fertilizer application or lands?	nagement practi	wned	● N/A
8b.Has your MS4/Coalition developed and implemented a turf man procedures policy that addresses proper disposal of grass clippi municipally owned lands?			• N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 7

Name of MS4/Coalition Town of New Paltz	SPDES ID N Y R 2	0 A 5	5 5 3
9. Has your MS4/Coalition developed and implemented a program of	native plan	_	• N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste of prohibiting goose feeding?	-		rties and N/A
11. Does your MS4/Coalition have a pet waste bag program?	O Yes	O No	• N/A
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	O No	• N/A