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MS4 Annual Report Cover Page

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MS4 Annual Report Cover Page

MCC form for period ending March 9, 20 23

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2023

	SPDES ID
Name of MS4 Town of Montgomery	N Y R 2 0 A 0 9 6
9 3	·
Each MS4 must submit an MCC form.	
Section 1 - MCC Identification Page	
Indicate whether this MCC form is being submitted to certify endorsement of O An Annual Report for a single MS4	or acceptance of:
O A Single Entity (Per Part II.E of GP-0-10-002)	
O A Joint Report	
Joint reports may be submitted by permittees with legally bind	ding agreements.
If Joint Report, enter coalition name:	

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2023
Name of MS4 Town of Nontagemery SPDES ID N Y R 2 0 A 0 9 6
Name of MS4 Town of Montgomery N Y R 2 0 A 0 9 6 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
O Local Stormwater Public Contact
O Stormwater Management Program (SWMP) Coordinator
O Report Preparer
First Name MI Last Name
Pirst Name MI Last Name Feller
Title
Town Supervisor
Address
IIO Bracken Road State Zip
Montgomery Ny 92549-
eMail
rfelleratown of montgomery. com
Phone (Q

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 20 23

	SPDES ID
Name of MS4 Town of Montanucry	N Y R 2 0 A 096
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all perm	it requirements during this reporting
period?	○ Yes • No
If Yes, complete information below.	and of a state of
Submit a separate sheet for each partner. Information provided i accepted. If your MS4 cooperated with a coalition, submit one s	n other formats will not be heet with the name of the
coalition. It is not necessary to include a separate sheet for each	MS4 in the coalition.
If No, proceed to Section 4 - Certification Statement.	
Partner/CoalitionName	
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
	N Y R 2 0
Address	
City State	
City State	Zip
eMail	
Phone	
() - with GP-(inding Agreement in accordance 0-08-002 Part IV.G.? O Yes O No
What tasks/responsibilities are shared with this partner (e.g. MM1 S	ahaal Bragrams on Multiple Teste N
	choof r rograms of wrundpie rasks)
D MM1	
O MM2	
D MM3	
J IVIIVIS	
O MM4	
) MM5	
) MM6	
Additional tasks/responsibilities	
Watershed Improvement Strategy Best Management Practices re	equired 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, 2023

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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 Ronald	MI	Last Name FCIIC T
Title (Clearly print title of individual signing report)		
TOWN Supervisor		
Signature		
Rade Dellar		Date 0 5 / 1 5 / 2 0 2 3

The annual report form and any attachments can be sent to the DEC Central Office clicking the Submit Form link below, or by sending it directly to: MS4compliance@dec.ny.gov. All submissions must include the SPDES ID in the title and must be complete before hitting the Submit Form link below:

Submit Form

If unable to submit electronically, hardcopy submissions can be sent to:

Bureau of Water Compliance Division of Water 4th Floor 625 Broadway Albany, New York 12233-3505

This report is being submitted for the reporting period ending March 9, 2023

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

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Water Quality Trends

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The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. O Yes If Yes, choose one of the following O Report(s) attached to the annual report O Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page. URL URL URL URL URL URL URL UR																													
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This report is being submitted for the reporting period ending March 9, 2023

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Name of MS4/Coalition Town of Montgomery	N Y R 2 0 A 09 6										
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	luring this reporting period:										
	and the reporting period.										
● Construction Sites	O Pesticide and Fertilizer Application										
● General Stormwater Management Information	O Pet Waste Management										
O Household Hazardous Waste Disposal	O Recycling										
O Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration										
■ 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:	O None										
Other											
2. Specific audiences targeted during this reporting period:											
▶ Public Employees ◆ Contractors											
● Residential											
O Businesses O General Public											
○ Restaurants ○ Industries	•										
Other: Agricultural											
Other											

This report is being submitted for the reporting period ending March 9, 2 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 Montgonery	N Y R 2	0 A	096
3. What strategies did your MS4/Coalition use to achieve education this reporting period? Check all that apply:	eation and outreac	h goals	during
Construction Site Operators Trained	# Trained		8
O Direct Mailings	# Mailings		
O Kiosks or Other Displays	# Locations		
O List-Serves	# In List		
O Mailing List	# In List		
O Newspaper Ads or Articles	# Days Run		
O Public Events/Presentations	# Attendees		
O School Program	# Attendees		
○ TV Spot/Program	# Days Run		
• Printed Materials:	Total # Distributed	0	
Locations (e.g. libraries, town offices, kiosks)		·	
Town Hall	}		
Other:			
O Web Page: Provide specific web addresses - not home page. Continuous needed.	ue on next page if add	ditional	space is
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This report is being submitted for the reporting period ending March 9, 2 0 23

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This report is being submitted for the reporting period ending March 9, 2023

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 Montgomery SPDES ID N Y R 2 0 A 0 9 C
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.
Effort was made to dissemmate information to the public.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
Material was made available to the public at town hall, nothing was taken.
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? • 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).
Who will advise the public of the availability of Stormweler Control measures via public outreach over the next year.

This report is being submitted for the reporting period ending March 9, 20 23

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID 0 A 096 of Montgomery Y R 2 Name of MS4/Coalition Town Minimum Control Measure 2. Public Involvement/Participation 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 participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply: Cleanup Events # Events Comments on SWMP Received #Comments O Community Hotlines Phone# 0 0 Phone # Phone # 0 0 Phone# Phone# 0 0 Phone # Phone # 0 0 Phone# Phone # 0 0 Phone # Phone# O Community Meetings # Attendees Plantings 5000 Sq. Ft. Storm Drain Markings #Drains O Stakeholder Meetings # Attendees O Volunteer Monitoring # Events Other: 2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? Yes O No O List-Serve # In List O Newspaper Advertising # Days Run O TV/Radio Notices # Days Run Other:

● Web Page URL: Enter URL(s) on the following two pages.

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This report is being submitted for the reporting period ending March 9, 20 23

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This report is being submitted for the reporting period ending March 9, 2023

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Name of MS4/Coalition Town of Montgomery	N	Y R	2	0	A	9	6
4.a. If this report was made available on the internet, what date wa	s it pa	sted:	?				
Leave blank if this report was not posted on the internet.	0 5	/ [9	//	20	2	3
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 j	oint re	port,	ans	wei	5.b		
5.a. Was an Annual Report public meeting held in this reporting pe	riod?			_	Yes	\circ	NT.
If Yes, what was the date of the meeting?	A TOU:		Т.	_	168		No
17 100, what was the date of the meeting:	0 5	/ 0	9	I	20	2	3
If No, is one planned?				0	Yes	0	No
5.b. Was an Annual Report public meeting held for all MS4s contri	buting	g to t	his 1	rep	ort d	uri	ng
this reporting period?	`				Yes		No
If No, is one planned for each?				0	Yes	0	No
6. Were comments received during this reporting period?				0	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

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 Montgomery NYR20A096
7. Evaluating Progress Toward Measurable Goals MCM 2
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.
Incorporate public comments into SWPP and Annual Report.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
No Comments received.
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 ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
 Yes ○ No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
Continue to receive public comments.

Name of MS4/Coalition Town

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2023

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

of Montgomery

SPDES ID

N Y R 2 0

Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
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 the 	his report?
1. Enter the number and approx. percent	of outfalls mapped: 28 # 100%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	creened for dry weather discharges during this inventory)?
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this
● Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	O Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
• Other:	O None
ALL Generatin	a sites
O Sewersheds:	7

	SPDE	S ID
Name of MS4/Coalition Town of	Montgomery	R 2 0 1 09 6
3.b. What types of illicit discharges ha	eve been found during this reporting j	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 Sewer	s O Sanitary Sewer Overflows	
O Illegal Dumping	O Straight Pipe Sewer Discharges	
Other: 4. How many illicit discharges/poten	None tial illegal connections have been dete	ected during this
5. How many illicit discharges have t6. How many illicit discharges/illegal period?		
 7. Has the storm sewershed mapping If No, approximately what percent w 8. Is the above information available Is this information available on the If Yes, provide URL(s): 	as completed in this reporting period? in GIS?	Yes ○ No Yes ○ No Yes ○ No Yes ○ No
Please provide specific address of pag	ge where map(s) can be accessed - not he	ome page.
URL		

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This report is being submitted for the reporting period ending March 9, 20 23

me of MS4/Coalition Town of Montagnery SPDES ID N Y R 2 0 A 09 6
Evaluating Progress Toward Measurable Goals MCM 3
e this page to report on your progress and project plans toward achieving measurable goals entified in your Stormwater Management Program Plan (SWMPP), including requirements in Part C.1. Submit additional pages as needed.
Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.
Identify, Map and inspect new outfalls within the Jesigned MS4 Area.
Briefly summarize the observations that indicated the overall effectiveness of this Measurable al.
outfall map is part of SWPP.
How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants
Has your MS4 made progress toward this measurable goal during this reporting period?
■ Yes ○ No Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
● Yes ○ No Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
ontinue dry Weather surveying of existing outfalls.

This report is being submitted for the reporting period ending March 9, 2023

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 Wontymen SPDES ID

N Y R 2 0 A 0 9 C

<u>Minimum Control Measures 4 and 5.</u> <u>Construction Site and Post-Construction Control</u>

Th	ne 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 other reg mechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?	gulatory mit for	, O No
1b	o. Has each Town, City and/or Village contributing to this report documented that equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSDEC Analysis Workbook?	t the la Erosion	w is
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La • 09/2004 • 0	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?	e been	8
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs?	ıblic 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	al

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	#	O No Authority

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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			<u>S</u> :	PDE	S ID)				
Name of MS4/Coalition Town	ot	Montepmery	<u> </u>	Y	R	2	0	40	9	4

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

Th	e information in this section is being reported (check one):		
•	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one during this reporting period?	acre or	more
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	ır jurisd	liction
3.	What percent of active construction sites were inspected during this reporting	F	ONT
4.	What percent of active construction sites were inspected more than once?		ONT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual?	the NY	
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevention (SWPPPs) of construction projects that are subject to MS4 review and approved	al?	
	Yes If your MS4 is Non-Traditional, are SWPPPs of construction projects made av public review?	○ No ailable f ○ Yes	O NT for O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	d.	

Name of MS4/Coalition Town of Montgomery	N Y		0 A	896
9)	L			
6. con't.:				
Submit additional pages as needed.				
O MS4/Coalition Office				
Department				
	_			
Address	· , , , , , , , , , , , , , , , , , , ,			
				_
City	Zip	T T '' 1	F	
	0		-	
Phone (0) 0 _				
O Library Address				
Address	- [<u> </u>	
City	7:			
	Zip O		П	
Phone		<u> </u>	_	
(0))0 -				
Other				
Address		T T	- 1- -	
			_	
	Zip	T	Г	
	0		-	
Phone (0) 0				
O Web Page URL(s): Please provide specific address where SWPPPs can be	e accesse	d - not l	home p	age.
URL		· · · ·		
			++	+
		<u></u>		
URL		<u> </u>		
			-	

be effective.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2023

Name of MS4/Coalition Town of Montgomery	N Y R 2 0 A 0 9 G
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward achie identified in your Stormwater Management Program Plan (SWMPP), in III.C.1. Submit additional pages as needed.	÷ -
A. Briefly summarize the Measurable Goal identified in the SWM	. 01
Keep records of a 11 construction activity. Represented by proyects designated professional Meetings with site contractors and owners properties.	eview SWPP reports 1. Cenduct pre-construction or to release of
B. Briefly summarize the observations that indicated the overall ef Goal.	
All parties understand their responsibil	lities in regards
All parties understand their responsibile to stormwater management.	9
C. How many times was this observation measured or evaluated in	this reporting period?
	1
D. Has your MS4 made progress toward this measurable goal duri	(ex.: samples/participants/events ng this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SV	VMPP?
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule)	
Continue the current procedures since the	u have found to

This report is being submitted for the reporting period ending March 9, 2023

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 Wonkener

SPDES ID

N Y R 2 0

		C	,		
Minimum	Control Mea	asure 5. Post	t-Constructi	on Stormwater	r Management
The information in t On behalf of an ir On behalf of a con How r	ndividual MS4	• • •	,		
1. How many and MS4/Coalition				anagement practic reporting period?	es has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces				
O Filter Systems					
O Infiltration Basins					
Open Channels		28	4	4	
Ponds		28	26	4	
○ Wetlands					
O Other					
2. Do you use an BMPs, inspect			abase, spreads	heet) to track po	st-construction ○ Yes ● No
3. What types of Development/I	non-structural Better Site Desi	practices hav gn/Green Infr	e been used to astructure pri	implement Low nciples?	Impact
O Building Codes	O Municipal C	omprehensive P	lans		
O Overlay Districts	O Open Space	Preservation Pre	ogram		
O Zoning	Local Law o	r Ordinance			
○ None	O Land Use R	egulation/Zoning	7		
O Watershed Plans	Other Comp	rehensive Plan			
Other:					

	SPDES ID	<u> </u>	
Na	ame of MS4/Coalition Town of Monteponen NYR	2 0 4	96
4 a	a. Are the MS4s contributing to this report involved in a regional/watershed wide pl	anning effor	t?
		○ Yes	No
4b	b. Does the MS4 have a banking and credit system for stormwater management pra	ctices?	
		○ Yes	No
40	c. Do the SWMP Plans for each MS4 contributing to this report include a protocol f and approval of banking and credit of alternative siting of a stormwater managen	or evaluation nent practice O Yes	n e? ● No
4d	d. How many stormwater management practices have been implemented as part of t reporting period?	this system in	this
		<u> </u>	P

This report is being submitted for the reporting period ending March 9, 2023

Name of MS4/Coalition Town of Montgon	N Y R 2 0 A 09 C
6. Evaluating Progress Toward Measurable Goals	MCM 5
Use this page to report on your progress and project plidentified in your Stormwater Management Program P III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identifi	ed in the SWMPP in this reporting period.
Maintain inventory of Structural	SWMPS
B. Briefly summarize the observations that indicate Goal.	ed the overall effectiveness of this Measurable
We have requested that large common Maintenance activities and review 4 Storm water practices.	their effectiveness of their
C. How many times was this observation measured	1
D. Has your MS4 made progress toward this measu	(ex.: samples/participants/events) urable goal during this reporting period? • Yes ○ No
E. Is your MS4 on schedule to meet the deadline set	t forth in the SWMPP? Yes O No
F. Briefly summarize the stormwater activities planthe next reporting cycle (including an implement	nned to meet the goals of this MCM during
Expand upon inventory of SNUPS	; utilizing Management Software.

This report is being submitted for the reporting period ending March 9, 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 Montequery	N Y R 2 0 A 0 9 L	p
	•	

<u>ons</u>

The information in this section is being reported (ch				<u>peratic</u>
,				
	heck one):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this 	s report?			
1. Choose/list each municipal operation/facil Pollutants of Concern to the MS4 system. operation/facility has been addressed in the Program(SWMP) Plan and whether a self-reporting period. A self-assessment is perpotentially generated by the permittee's of effectiveness of existing programs and 3) that will be addressed by the pollution pronot done already.	For each op he MS4's/Coaf-assessment formed to: 1 perations and identify the	eration/fac alition's Sto has been p) determind d facilities; municipal	cility indicate wheth ormwater Managen erformed during the e the sources of poll 2) evaluate the operations and facil	er the nent e utants
			Self-Assessme Operation/Activity/ performed within th	Facility Example
Operation/Activity/Facility	Addressed i		Operation/Activity/ performed within the years?	Facility Example
Street Maintenance	• Yes	○ No	Operation/Activity/ performed within the years? Yes	Facility Example
Street Maintenance		○ No ○ No	Operation/Activity/ performed within the years? Yes Yes Yes	Facility te past 3
Street Maintenance Bridge Maintenance Winter Road Maintenance	• Yes • Yes • Yes • Yes	○ No ○ No ○ No	Operation/Activity/ performed within the years? Yes Yes Yes Yes	Facility te past 3
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage.	 Yes Yes Yes Yes 	O No O No O No	Operation/Activity/ performed within the years? Yes Yes Yes Yes Yes Yes Yes Yes	Facility te past 3 No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management	 Yes Yes Yes Yes Yes 	○ No ○ No ○ No ○ No	Operation/Activity/ performed within the years? Yes Yes Yes Yes Yes Yes Yes Y	Pacility Le past 3 No No No No No No No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage Solid Waste Management. New Municipal Construction and Land Disturba	 Yes Yes Yes Yes Yes Yes Yes 	O No O No O No O No O No	Operation/Activity/ performed within the years? Yes Yes Yes Yes Yes Yes Yes Y	Facility te past 3 No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturba Right of Way Maintenance	 Yes Yes Yes Yes Yes Yes Yes Yes Yes 	O No O No O No O No O No O No O No O No	Operation/Activity/ performed within the years? Yes Yes Yes Yes Yes Yes Yes Y	Pacility Le past 3 No No No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturba Right of Way Maintenance Marine Operations	 Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes 	O No O No O No O No O No O No O No O No O No	Operation/Activity/performed within the years? Yes Oyes Oyes Oyes Oyes Oyes Oyes Oyes Oy	No No No No No No No No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage Solid Waste Management. New Municipal Construction and Land Disturba Right of Way Maintenance. Marine Operations. Hydrologic Habitat Modification.	 Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes 	O No O No O No O No O No O No O No O No O No	Operation/Activity/ performed within the years? Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	Pacility Le past 3 No No No No No No No No No
Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management. New Municipal Construction and Land Disturba Right of Way Maintenance Marine Operations Hydrologic Habitat Modification. Parks and Open Space	 Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes 	O No O No O No O No O No O No O No O No O No O No O No O No O No	Operation/Activity/ performed within the years? Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O	Pacility Le past 3 No No No No No No No No No No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage Solid Waste Management. New Municipal Construction and Land Disturba Right of Way Maintenance. Marine Operations. Hydrologic Habitat Modification.	 Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes 	O No O No O No O No O No O No O No O No O No O No O No O No O No	Operation/Activity/ performed within the years? Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES Yes COYES	No No No No No No No No No No No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage. Solid Waste Management. New Municipal Construction and Land Disturba Right of Way Maintenance. Marine Operations. Hydrologic Habitat Modification. Parks and Open Space. Municipal Building. Stormwater System Maintenance.	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No O No O No O No O No O No	Operation/Activity/ performed within the years? Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O Yes O	No No No No No No No No No No No No
Street Maintenance. Bridge Maintenance. Winter Road Maintenance. Salt Storage. Solid Waste Management. New Municipal Construction and Land Disturba Right of Way Maintenance. Marine Operations. Hydrologic Habitat Modification. Parks and Open Space. Municipal Building.	• Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes • Yes	O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No O No	Operation/Activity/ performed within the years? Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	Pacility Le past 3 No No No No No No No No No No No No No

	SPDES ID
Name of MS4/Coalition Town of Montesmen	N Y R 2 0 A 0 9 6
2. Provide the following information about municipal operations	good housekeeping programs:
O Parking Lots Swept (Number of acres X Number of times swept)	# Acres
Streets Swept (Number of miles X Number of times swept)	# Miles 1 3 8
Catch Basins Inspected and Cleaned Where Necessary	# 3 1 8
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#
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 Numb times applied to the nearest tenth.)	er of # Acres 0 0
3. How many stormwater management trainings have been providuring this reporting period?	ded to municipal employees
4. What was the date of the last training?	03/17/2022
5. How many municipal employees have been trained in this repo	orting period?
6. What percent of municipal employees in relevant positions and stormwater management training?	l departments receive

This report is being submitted for the reporting period ending March 9, 2 0 2 3

Name of MS4/Coalition Town of Montgomery	N Y R 2 0 A 0 9 G
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward achievir identified in your Stormwater Management Program Plan (SWMPP), incl. III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP	
Roadside litter removal. Staff educat	₹1 6∨ 1
B. Briefly summarize the observations that indicated the overall effection.	ctiveness of this Measurable
Readways cleaned through-out the yea	c .
C. How many times was this observation measured or evaluated in th	nis 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 SWM	APP? ◆Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the gethe next reporting cycle (including an implementation schedule).	oals of this MCM during
Implementation Strategy.	

This report is being submitted for the reporting period ending March 9, 2023

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	Mon-	facuera	N	Y	R	2	0	A	٥	9	4
				\mathcal{O}									

Additional Watershed Improvement Strategy Best Management Practices

Answer	s indicated in the table		
7 (113 17 (1		/BOO	
	- Onton I I	(POC)	
1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus	
		Phosphorus	
		Phosphorus	
-		- A HOSPHOTUS	
1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus	
1,6,7a-d,8a,9		Phosphorus	
1,6,7a-d,8a,9		Phosphorus	
-		-	
1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	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	
	-	-	
	2,3,5,6,8a,8b	Pathogens	
		Pathogens	
1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens	
	-	-	
		Pathogens and Nitrogen	
<u> </u>		Pathogens and Nitrogen	
1,4,7a-0,8a,9	2,3,4,5,86,10,11,12	Pathogens and Nitrogen	
1467-48-0	22581 1211 12		
		Phosphorus	
		Phosphorus	
1,7,0,74-0,84,9	2,3,3,60,10,11,12	Phosphorus	
1 2 3 4 7a ₀ d 9 10 11 12	5.6.9a.9h		
		Pathogens	
1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens	
	1,2,3,4,7a-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	1,2,3,4,7a-d,8a,8b,9 5,10,11,12 1,2,77a-d,8a,8b,9 3,4,5,10,11,12 1,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,6,8a,8b 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 <td< td=""></td<>	

Estimate what percentage was mapped in this reporting period.

Na	me of MS4/Coalition Town of Monteynus SPDES ID N Y R 2 0 A 0 8 G
3.	Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? ○ Yes ○ No ◆N/A
4.	Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period? %
5.	Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
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? O Yes No O N/A
7a.	Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? O Yes No O N/A
7b.	How many projects have been sited in this reporting period?
7c.	What percent of the projects included in 7b have been completed in this reporting period?
7d.	What percent of projects planned in previous years have been completed?
	O No Projects Planned 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
	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? O Yes No O N/A

Name of MS4/Coalition Town of Mculsomer	N Y R 2	0 🛕	596						
9. Has your MS4/Coalition developed and implemented a program of native planting?									
	O Yes	No	O N/A						
10. Has your MS4/Coalition enacted a local law prohibiting pet waste prohibiting goose feeding?	on municipa O Yes		rties and O N/A						
11. Does your MS4/Coalition have a pet waste bag program?	♦ Yes	O No	O N/A						
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	● No	O N/A						