

Progress Report for Part IX.C

Pathogen Impaired Watershed Improvement Strategy Areas

PERMIT #

Waterbody Name

MS4 Name

Reporting Period Ending (mm/dd/yyyy) / /

Reaffirmation for No Discharge

- The Municipal Seperate Storm Sewer System as defined in 40 CFR 122.26(b)(8) and (16) including roads with drainage systems, municipal streets, catch basins, curbs, gutters, ditches, man-made channels, or storm drains that the owns or operates does not have any outfalls that discharge directly or indirectly through another MS4, into the

Watershed Status

Please describe what your stormwater management program is doing to address the source of pathogens to the impaired waterbody

The Village of Bellport continues to provide residents with educational materials regarding pet waste goose feeding and maintenance of septic systems Information is disseminated on the Village s web site as well as through hard copy materials The Village regularly inspects its infrastructure for illicit discharges and performs frequent street sweeping and storm sewer maintenance The Village has adopted local law prohibiting pet waste on municipal properties and prohibiting goose feeding

If you suspect the sources of pathogens that contribute a load to this watershed through the MS4 are something other than the sources listed in the TMDL, please state what you believe to be the suspected sources and how they were determined.

Pathogens levels may be resulting from high groundwater and septic systems in proximity to the coast

Public Education & Outreach of Pathogens as the Pollutant of Concern

1. Description of the education program.

Pathogens educational materials target pet waste goose feeding and maintenance of septic systems

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

Residents are the target audience Messages caution residents not to feed geese and encourage proper pet waste disposal and maintenance of septic systems

3. How are behavior changes being measured?

Inspections of Village property are conducted and clean conditions are prevalent Village residents are dedicated to protecting public health and their behaviors reflect that

MS4 Semi Annual Report Form Certification

Semi Annual Report form for period ending

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 (MMDDYYYY)

Name of MS4

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SPDES ID

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

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

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

First Name

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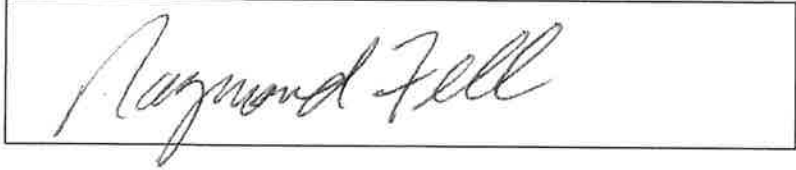
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 Last Name

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Title (Clearly print title of individual signing report)

M	a	y	o	r															
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Signature


Date

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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

Permit #

4. What are the education plans and goals for the next 6 months?

To continue to distribute educational information to residents regarding pet waste goose feeding and maintenance of septic systems

Illicit Discharge Detection and Elimination

5. What has been done to actively look in these watersheds for Illicit discharges? Describe procedures and staff that are involved in this reconnaissance.

All outfalls were inspected at least 48 hours after a rainfall event Highway Dept staff conduct inspections in accordance with the Center for Watershed Protection IDDE Guidance manual

Answer Either 6a. or 6b.

6a. No Illicit Discharges were discovered during this reporting period Explain how the determination for No Illicit Discharges was made

No pathogens illicit discharges were found No dry weather flow and no staining odor or floatables were observed

6b. Illicit Discharges were discovered during this reporting period What has the municipality determined from the illicit discharges that have been found?

Complete Either 7a. (Map) or 7b. (Written Response)

7a. Attach a map showing where IDDE outfall inspections have occurred this reporting period, which outfalls have illicit discharges, and if the discharge has been removed, where the illicit connection is in the system and how it is entering the system (i.e. Direct connection to the MS4, overland connection, structural failure of the MS4 piping network)

7b. Give the number of inspections performed during this reporting period. # Inspections
(Provide municipal identification #s for all outfalls inspected)

State which outfalls have illicit discharges and whether or not the illicit discharge has been removed. Also describe where the illicit discharge is in the system and how it is entering the system (i.e. Direct connection to the MS4, overland connection, structural failure of the MS4 piping network)

No pathogens illicit discharges were observed

Permit #

Post Construction Stormwater Management

8. Number of Post Construction Stormwater Management Practices (SMPs) that discharge to an MS4 that drains to the listed waterbody # SMPs

- As part of the RFI sent by the Department in August 2016, the information in #8 has already been submitted
 - a. Describe the municipality's policy on post construction stormwater management

The Village s policy is to be fully compliant with MS4 Minimum Measure 5 and to verify that stormwater practices are inspected maintained and properly functioning

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

To continue to ensure that stormwater practices are inspected maintained and properly functioning

Municipal Operations Pollution Prevention/Good Housekeeping

- Non-Traditional MS4 (skip Question 10)

10a. Is pet waste an issue in the MS4 areas? If pet waste is not an issue please describe, in the box below, the reasoning behind this viewpoint.

Pet waste is not an issue Village residents pick up after their pets as a rule

10b. If pet waste is a problem, where has it been found to be a problem? Are there any areas where pets are known to frequent (such as parks, road ends, boat launches, marinas, trails). Are there any indications that pet waste is being disposed of improperly (ie. dumped into a catch basin)?

See 10a above

10c. What strategies are in place to manage the proper disposal of pet waste? What strategies are planned to improve pet waste disposal practices in areas identified in need of improvement?

The Village has a pet waste bag program to ensure that pet waste is properly disposed of Bags are replenished regularly

PERMIT #

10d. What measurable indicators are being used to help determine the effectiveness of these strategies?

Depletion rates of pet waste bags Absence of pet waste on Village property

11a. Is the goose population an issue in the MS4 areas? If the goose population is not an issue please describe, in the box below, the reasoning behind this viewpoint.

No the goose population is not an issue in the Bellport Bay Beaverdam Creek storm sewershed There are no municipal properties with geese populations that discharge to the storm sewer system in the Bellport Bay Beaverdam Creek storm sewershed

11b. If the geese are a problem, where has it been found to be a problem? Provide a description of the location or a map showing the areas of high population density of geese.

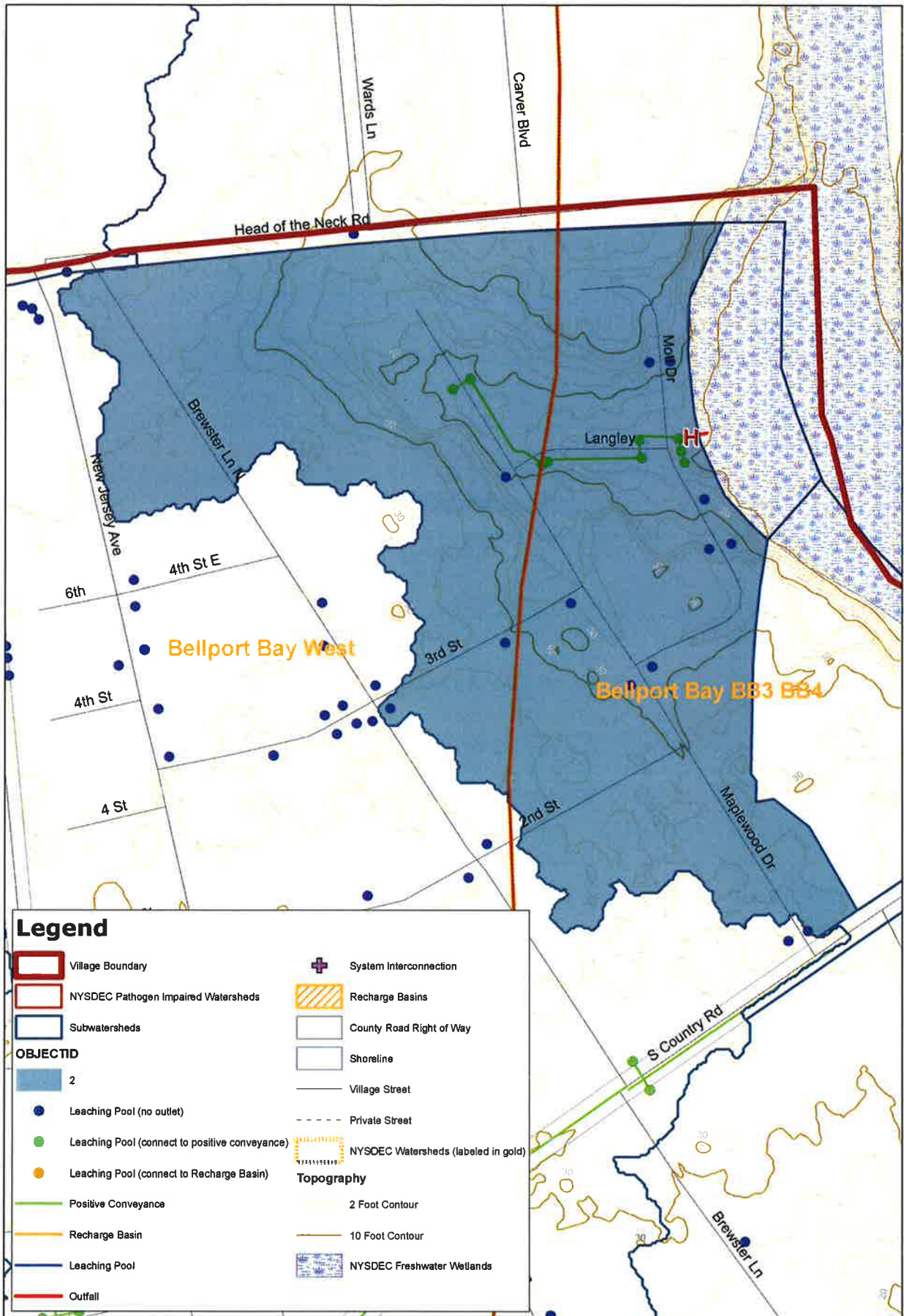
See 11a above

11c. What strategies are in place to manage the population of geese on municipal properties?

See 11a above Community members are advised to refrain from feeding geese through the Village s MS4 educational program The Village has adopted a local law that prohibits feeding geese

11d. What measurable indicators are being used to help determine the effectiveness of these strategies?

See 11a above



Legend

- | | | | |
|-----------------|--|-------------------|-------------------------------------|
| | Village Boundary | | System Interconnection |
| | NYSDEC Pathogen Impaired Watersheds | | Recharge Basins |
| | Subwatersheds | | County Road Right of Way |
| OBJECTID | | | Shoreline |
| | 2 | | Village Street |
| | Leaching Pool (no outlet) | | Private Street |
| | Leaching Pool (connect to positive conveyance) | | NYSDEC Watersheds (labeled in gold) |
| | Leaching Pool (connect to Recharge Basin) | Topography | |
| | Positive Conveyance | | 2 Foot Contour |
| | Recharge Basin | | 10 Foot Contour |
| | Leaching Pool | | NYSDEC Freshwater Wetlands |
| | Outfall | | |

FIGURE
MS4 STORMWATER SEWERSHED
TO BELLPORT BAY/BEAVERDAM CREEK



Scale: 1 inch = 200 feet



Bellport Bay
Beaverdam Creek

MS4

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2017

Name of MS4

Village of Bellport

SPDES ID

N Y R 2 0 A 3 6 3

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for *each* 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
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name

E i l e e n

MI

Last Name

K e e n a n

Title

S e n i o r E n v i r o n m e n t a l P l a n n e r , N P V

Address

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City

M e l v i l l e

State

N Y

Zip

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eMail

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Phone

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County

S u f f o l k

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 8

Name of MS4 Village of Bellport

SPDES ID
N Y R 2 0 A 3 6 3

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- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
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For each contact, select all that apply:

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

First Name MI Last Name

R a y m o n d F e l l

Title

M a y o r

Address

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City State Zip

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eMail

C L E R K @ B E L L P O R T V I L L A G E . O R G

Phone County

(6 3 1) 2 8 6 - 0 3 2 7 S u f f o l k

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 8

Name of MS4

SPDES ID
N Y R 2 0 A 3 6 3

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? Yes No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet 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/Coalition Name

Partner/Coalition Name (con't.) SPDES Partner ID - If applicable
N Y R 2 0

Address

City State Zip -

eMail

Phone () -

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? Yes No

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

- MM1
- MM2
- MM3
- MM4
- MM5
- MM6

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 8

Name of MS4

SPDES ID

Section 4 - Certification Statement

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

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

First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature

Date

/ /

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

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

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 8

**This cover page must be completed by the report preparer.
Joint reports require only one cover page.**

SPDES ID
N Y R 2 0 3 6 3

Choose one:

This report is being submitted on behalf of an individual MS4.

Fill in SPDES ID in upper right hand corner.

Name of MS4

V i l l a g e o f B e l l p o r t

OR

This report is being submitted on behalf of a Single Entity

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

Name of Single Entity

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

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MS4 Annual Report Cover Page

MCC form for period ending March 9,

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

SPDES ID
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Name of MS4/Coalition Village of Bellport

SPDES ID
N Y R 2 3 6 3

Minimum Control Measure 1. Public Education 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 Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- Construction Sites
General Stormwater Management Information
Household Hazardous Waste Disposal
Illicit Discharge Detection and Elimination
Infrastructure Maintenance
Smart Growth
Storm Drain Marking
Green Infrastructure/Better Site Design/Low Impact Development
Other:
Pesticide and Fertilizer Application
Pet Waste Management
Recycling
Riparian Corridor Protection/Restoration
Trash Management
Vehicle Washing
Water Conservation
Wetland Protection
None

Septic systems, pesticide disposal

2. Specific audiences targeted during this reporting period:

- Public Employees
Contractors
Residential
Developers
Businesses
General Public
Restaurants
Industries
Other:
Agricultural

Other

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018

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

Name of MS4/Coalition

Village of Bellport

SPDES ID

N Y R 2 0 3 6 3

3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

Construction Site Operators Trained

Trained

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Direct Mailings

Mailings

					2
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Kiosks or Other Displays

Locations

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List-Serves

In List

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Mailing List

In List

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Newspaper Ads or Articles

Days Run

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Public Events/Presentations

Attendees

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School Program

Attendees

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TV Spot/Program

Days Run

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Printed Materials:

Total # Distributed

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

Other:

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Bellport

SPDES ID

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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.

Provide educational materials focused on reduction of nitrogen and pathogens discharges.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

A variety of educational materials were provided through the village web site and hard copy materials. The Bellport Village Newsletter continued to provide information pertaining to community cleanliness and beautification.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

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).

Materials will be distributed on the web site, at Village Hall, and at other public paces as appropriate. The Village Newsletter will continue to provide residents with pollution prevention information.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018

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

Name of MS4/Coalition

Village of Bellport

SPDES ID

NYR 20263

2. URL(s) con't.:

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

URL

http://www.bellportvillage.org/
ny/stormwater-management/

URL

URL

URL

URL

URL

URL

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018

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

Name of MS4/Coalition SPDES ID

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3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

- MS4/Coalition Office Annual Report SWMP Plan Comments

Department

V	i	l	l	a	g	e		H	a	l	l	-		C	l	e	r	k	'	s		O	f	f	i	c	e				
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City

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Phone

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- Library Annual Report SWMP Plan Comments

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- Other Annual Report SWMP Plan Comments

Address

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- Web Page URL: Annual Report SWMP Plan Comments

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n	y	/	s	t	o	r	m	w	a	t	e	r	-	m	a	n	a	g	e	m	e	n	t	/											

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

- eMail Comments

MS4 Annual Report Form

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

2	0	1	8
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Bellport

SPDES ID

N	Y	R	2	0	3	6	3
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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	6
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0	1
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2	0	1	8
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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, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

Yes No

If Yes, what was the date of the meeting?

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If No, is one planned?

Yes No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

Yes No

If No, is one planned for each?

Yes No

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.

MS4 Annual Report Form

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

2	0	1	8
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID

N	Y	R	2	0	3	6	3	
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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.

Work with various community groups on public outreach projects.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

(NEED ANSWER HERE)

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

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 work with community groups and businesses on public participation events.
 (ANYTHING PLANNED FOR THIS SUMMER?)

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 8

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

Name of MS4/Coalition Village of Bellport

SPDES ID
N Y R 2 0 A 3 6 3

3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other: None

Grid for other discharge types

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

4

5. How many illicit discharges have been confirmed during this reporting period?

4

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

4

7. Has the storm sewershed mapping been completed in this reporting period? Yes No
If No, approximately what percent was completed in this reporting period?

%

8. Is the above information available in GIS? Yes No
Is this information available on the web? Yes No

If Yes, provide URL(s):

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

URL grid

URL grid

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Bellport

SPDES ID

N	Y	R	2	0	3	6	3
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12. Evaluating Progress Toward Measurable Goals MCM 3

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.

Continue ongoing inspection of outfalls during dry weather for potential discharges.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Four pool discharges were found. All were winter water, with no chemicals.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

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 monitor for illicit discharges and eliminate as necessary. The Village plans to mark storm drains to alert residents that they drain to the Bay.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Bellport

SPDES ID

N	Y	R	2	0	3	6	3
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Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

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

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

How many MS4s contributed to this report?

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- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?** Yes No
- 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 NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004 03/2006 NT

- 2. Does your MS4/Coalition have a SWPPP review procedure in place?** Yes No
- 3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**

		0
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- 4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?** Yes No 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 the local SWPPP process?** Yes No

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- Notices of Violation #

				0
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 No Authority
- Stop Work Orders #

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

 No Authority
- Criminal Actions #

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

 No Authority
- Termination of Contracts #

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

 No Authority
- Administrative Fines #

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

 No Authority
- Civil Penalties #

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

 No Authority
- Administrative Orders #

				0
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 No Authority
- Enforcement Actions or Sanctions #

				0
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 No Authority
- Other #

				0
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 No Authority

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Bellport

SPDES ID

N	Y	R	2	0	3	6	3
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

--	--	--

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

		0
--	--	---
 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

		0
--	--	---
 3. What percent of active construction sites were inspected during this reporting period? NT

--	--	--

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

--	--	--

 %
 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT
 6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

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

2	0	1	8
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Bellport

SPDES ID

N	Y	R	2	0	3	6	3	
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7. Evaluating Progress Toward Measurable Goals MCM 4

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.

Continue to enforce SWPPP requirements and NYSDEC standards. Disturbances of an acre or more are rare in the Village of Bellport.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

No construction activity of an acre or more occurred during the reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

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 implement existing procedures for land disturbances of an acre or more

MS4 Annual Report Form

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

2	0	1	8
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Bellport

SPDES ID

N	Y	R	2	0	3	6	3	
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impact Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

		0
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 %

MS4 Annual Report Form

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

2	0	1	8
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Bellport

SPDES ID

N	Y	R	2	0	3	6	3
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6. Evaluating Progress Toward Measurable Goals MCM 5

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.

Continue inspection of post-construction practices, such as drainage inlets, catch basins and recharge basins.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Village maintained stormwater practices as necessary.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

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 monitor the performance of stormwater practices and maintain/repair as necessary.

MS4 Annual Report Form

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

2	0	1	8
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Bellport

SPDES ID

N	Y	R	2	0	3	6	3
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

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1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Bellport

SPDES ID

N	Y	R	2	0	3	6	3
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2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

				3
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- Streets Swept (Number of miles X Number of times swept) # Miles

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

			5	0
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- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

				1
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- Phosphorus Applied In Chemical Fertilizer # Lbs.

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- Nitrogen Applied In Chemical Fertilizer # Lbs.

	4	4	0	0
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- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

		5	0	.	0
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3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

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4. What was the date of the last training?

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

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

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 %

MS4 Annual Report Form

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

2	0	1	8
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Bellport

SPDES ID

N	Y	R	2	0	3	6	3	
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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.

Continue to provide employee trainings, regular monitoring of stormsewer infrastructure, and municipal pollution prevention and good housekeeping practices. Prioritize and obtain funding for capital improvement projects for stormwater related improvements (drainage improvement projects, etc.)

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

1. Funding was obtained to install a series of vegetated swales along Thornhedge Rd. 2. The Main Street Water Quality Treatment Project will prevent untreated stormwater from flowing directly into Bellport Bay through installation of a series of leaching pools that will provide stormwater containment and infiltration. 3. The Village also received funding to construct a bioretention basin at Bellport Lane and Shore Road &, 4. to remove a direct discharge drainage system on First St.

C. How many times was this observation measured or evaluated in this reporting period?

			1
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(ex.: samples/participants/events)

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 identify potential water quality improvement projects and submit grant applications for funding stormwater projects. Continue to educate and train staff. The Village is currently implementing a stormwater drainage remediation project which will eliminate highway yard discharges to the Village stormsewer system.

MS4 Semi Annual Report Form CertificationSemi Annual Report form for period ending

0	3	0	9	2	0	1	8
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 (MMDDYYYY)Name of MS4

V	i	l	l	a	g	e	o	f	B	e	l	l	p	o	r	t
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SPDES ID

N	Y	R	2	0	A	3	6	3
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Certification Statement - MS4 Official (Principal Executive Officer or Ranking Elected Official) or a Duly Authorized Representative of the MS4 Official

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

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

First Name

R	a	y	m	o	n	d													
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Last Name

F	e	l	l																
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Title (Clearly print title of individual signing report)

M	a	y	o	r															
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Signature



Date

0	5	1	2	9	1	2	0	1	8
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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