MS4 Annual Report Cover Page

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

This	cover	page mu	st be complet	ed by	the	report	preparer.
Joint	t repoi	rts requi	e only one co	ver pa	age.		-

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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)

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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.

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MS4 Annual Report Cover Page

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

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, 2 0 2 2

	SPI	DES	ID						
Name of MS4 Village of Bellport	N	Y	R	2	0	3	6	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	or accep	tanc	e o	f:					
• An Annual Report for a single MS4									
○ A Single Entity (Per Part II E of GP-0-10-002)									
○ A Joint Report									
Joint reports may be submitted by permittees with legally bin	ding ag	reer	ner	its.					
If Joint Report, enter coalition name:									

MS4 Municipal Compliance Certification(MCC) Form

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

		SPI	DES	ID						
Name of MS4	Village of Bellport	N	Y	R	2	0	3	6	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
- Ouly Authorized Representative
- O Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

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MS4 Municipal Compliance Certification (MCC) Form

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

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MS4 Municipal Compliance Certification(MCC) Form

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

		SPI	DES	ID						
Name of MS4	Village of Bellport	N	Y	R	2	0	3	6	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	MI	Last Name
Raymond		F e 1 1
Title (Clearly print title of individual signing report)		
Mayor		
Signature		
Raynessof Fell		Date 03/24/2023

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

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

	SPDES ID
Name of MS4/Coalition Village of Bellport	N Y R 2 0 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 Manage	ement Practices
Check all topics that were included in Education and Outreach	n during this reporting period:
**	
O Construction Sites	Pesticide and Fertilizer Application
O General Stormwater Management Information	Pet Waste Management
Household Hazardous Waste Disposal	Recycling
O Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
O Infrastructure Maintenance	Trash Management
○ Smart Growth	Vehicle Washing
O Storm Drain Marking	Water Conservation
O Green Infrastructure/Better Site Design/Low Impact Developmen	t • Wetland Protection
● Other: W e t 1 a n d P r o t e c t i o n , Other	O None S e p t i c s y s t e m
2. Specific audiences targeted during this reporting period	l:
Public Employees • Contractors	
● Residential ○ Developers	
● Businesses ○ General Public	
Restaurants O Industries	
O Other: O Agricultural Other	

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

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

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

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

Name of MS4/Coalition Village of Bellport	N Y R 2 0 3 6 3
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMPI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	VMPP in this reporting period.
The Village provides educational materials focused on reduction o discharges associated with geese, dog waste, septic systems, fertilized	
3. Briefly summarize the observations that indicated the overal Goal.	ll effectiveness of this Measurable
A variety of educational materials are provided through our website noc brochures.	e public outreach, and various ad
C. How many times was this observation measured or evaluated	d in this reporting period?
	0 0 0 4
. Has your MS4 made progress toward this Measurable Goal (lex.: wamples/participants/
John 122 Cambo programs to the auto Made and Control	Yes O 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 next reporting cycle (including an implementation schedu	
Ve plan to continue our commitment via our website, programs and vear.	d various endeavors in the coming

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

				SPI	DES ID			,	-	
Name of MS4/Coalition Village of Bellport				N	Y R	2 0) 3	6	3	
Minimum Control Measure 2	. Public I	nvol	veme	nt/P	articij	oati	on			
The information in this section is being reported (ch	eck one):									
○ On behalf of an individual MS4○ On behalf of a coalition										
How many MS4s contributed to this	s report?									
1. What opportunities were provided for pul development, evaluation and improvemen (SWMP) Plan during this reporting period	t of the Stor	mwa	ter Ma	mag		-	grai	n		
Cleanup Events					# Events					3
O Comments on SWMP Received				# C	omments		Г			
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Plantings					Sq. Ft.			7	5	0
O Storm Drain Markings					# Drains					
O Stakeholder Meetings				# A	ttendees					
O Volunteer Monitoring				7	# Events					
O Other:										
2. Was public notice of availability of this and Program (SWMP) Plan provided?	nual report :	and S	tormw	atei	· Mana	_	ent Ye:		0]	No
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O Newspaper Advertising				# D	ays Run					
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Other: Board Meeting	s & W o	r k	s	e s	s s i	0	n	s	I	
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This report is being submitted for the reporting period ending March 9, 2 0 2 2

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

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

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

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

	SPI	DES ID	l				
Name of MS4/Coalition Village of Bellport	N	YR	2	0	3 6	3	
4.a. If this report was made available on the internet, what date	was it po	sted?					
Leave blank if this report was not posted on the internet.	0 3	/ 2	4	1	2 0	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	g a joint re	eport,	ans	wer	5.b	,	
5.a. Was an Annual Report public meeting held in this reporting If Yes, what was the date of the meeting?	g period?	1		° /[Yes	•	No
If No, is one planned?				0	Yes	9	No
5.b. Was an Annual Report public meeting held for all MS4s co	ntributin	g to th	is r	ере	ort d	urin	ıg
this reporting period?				0	Yes		No
If No, is one planned for each?				0	Yes	•	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.				0	Yes	0	No
5 WIVE IN TESPONSE to COMMENTS to this report.							

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

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

Name of MS4/Coalition Village of Bellport	N Y R 2 0 3 6 3
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMHILC.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
 Formulated Village Government Committee: Bellport Village 2. Partnered with local environmental groups: CEED, FOBB, Co 3. Partnered with residents: Protection of beaches and clean up. Installed a hydrodynamic Stormwater Separator 	Environmental Committee. ornell Extension
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
Events: Beach clean up, eel grass plantings in bay, oyster seeding	p heds
C. How many times was this observation measured or evaluate	ed in this reporting period?
	(as.: samples/pucticipants/eve
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in th	Yes O No
2. 15 your 14154 on schedule to meet the deadline set forth in th	• Yes O No
T. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation schedule)	
Continue efforts to support environmental activities	

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

	SPDES ID
Name of MS4/Coalition Village of Bellport	N Y R 2 0 3 6 3
Minimum Control Measure 3	3. Illicit Discharge Detection and Elimination
The information in this section is being report	ed (check one):
 ○ On behalf of an individual MS4 ○ On behalf of a coalition How many MS4s contributed 	to this report?
1. Enter the number and approx. perce	nt of outfalls mapped: 8 # 1 0 0 %
2. How many of these outfalls have been reporting period (outfall reconnaissa	n screened for dry weather discharges during this nee inventory)?
3.a. What types of generating sites/sewers reporting period?	sheds were targeted for inspection during this
O Auto Recyclers	Landscaping (Irrigation)
Building Maintenance	Marinas
O Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
○ Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
 Garbage Truck Washouts 	O Septic Maintenance
O Hospitals	Swimming Pools
O Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
Other:	○ None
○ Sewersheds:	

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

		SPDES ID		
Name of MS4/Coalition Village of Bellport		N Y R	2 0 3	6 3
3.b. What types of illicit discharges have	been found during this repor	ting period	l?	
O Broken Lines From Sanitary Sewer	O Industrial Connections			
○ Cross Connections	O Inflow/Infiltration			
○ Failing Septic Systems	O Pump Station Failure			
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows			
O Illegal Dumping	O Straight Pipe Sewer Discharge	s		
Other:	O None			
4. How many illicit discharges/potentia reporting period?	l illegal connections have been	i detected d	luring th	
				3
5. How many illicit discharges have been	n confirmed during this repo	rting period	d?	3
6. How many illicit discharges/illegal coperiod?7. Has the storm sewershed mapping be If No, approximately what percent was	en completed in this reporting	g period?	Yes	3 O No
8. Is the above information available in Is this information available on the w If Yes, provide URL(s): Please provide specific address of page work.	eb?	not home pa	○ Yes • Yes age.	○ No ○ No
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This report is being submitted for the reporting period ending March 9, 2 0 2 2

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

nitor and eliminate illicit discharges, as necessary.	
Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule).	goals of this MCM during
Is your MS4 on schedule to meet the deadline set forth in the SV	VMPP? ○ Yes ○ No
	Yes O No
Has your MS4 made progress toward this measurable goal duri	(ex.: samples/participum ng this reporting period?
	0
How many times was this observation measured or evaluated in	this reporting period?
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pal.	
Briefly summarize the observations that indicated the overall el	ffectiveness of this Measurable
/A	
. Briefly summarize the Measurable Goal identified in the SWM	IPP in this reporting period.
entified in your Stormwater Management Program Plan (SWMPP), i I.C.1. Submit additional pages as needed.	including requirements in Part
se this page to report on your progress and project plans toward achie	eving measurable goals
2. Evaluating Progress Toward Measurable Goals MCM 3	

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

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Name of MS4/Coalition Village of Bellport	N	Y	R	2	0	3	6	3	

	Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control		
Т	he information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1:	a. Has each MS4 contributing to this report adopted a law, ordinance or other required mechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?	gulatory mit for • Yes	O No
11	b. 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?	Erosion C Gap	w is and O NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La		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	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of pu comments related to construction SWPPPs? • Yes	blic 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 Yes	l O 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	#			3	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
Administrative Orders	#			3	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 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	Village of Bellport	I	Z		3	2	0	3	6	3	

	Minimum Control Measure 4. Construction Site Stormwater Runo	ff Con	trol
Τl	he information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one a during this reporting period?	cre or	more 0
2.	How many construction projects disturbing at least one acre were active in your during this reporting period?	' jurisd	liction 0
3.	What percent of active construction sites were inspected during this reporting p	eriod?	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 t Construction Stormwater Inspection Manual? • Yes	the NY	
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prevent (SWPPPs) of construction projects that are subject to MS4 review and approval	?	
	● Yes If your MS4 is Non-Traditional, are SWPPPs of construction projects made avail public review?	ilable f	O NT Or O No
	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, 2 0 2 2 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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Name of MS4/Coalition Village of Bellport	N	Y	R	2	0	3	6	3	
6. con't.:									
Submit additional pages as needed.									
MS4/Coalition Office									
Department									
Village Hall/Clerk's O	f	f	i	С	e				
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This report is being submitted for the reporting period ending March 9, 2 0 2 2

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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 redentified in your Stormwater Management Program Plan (SWMPP), including ILC.1. Submit additional pages as needed.	ing requirements in Part
A. Briefly summarize the Measurable Goal identified in the SWMPP in	this reporting period.
Enforce SWPPP and NYSDEC requirements and standards.	
. Briefly summarize the observations that indicated the overall effective	reness of this Measurable
To constructions of 1 acre/plus occurred.	
. How many times was this observation measured or evaluated in this r	reporting period?
	0
Has your MS4 made progress toward this measurable goal during this	(os.: pamples participan ver
1145 your 14154 made progress toward this measurable goar during mis	• Yes ○ No
Is your MS4 on schedule to meet the deadline set forth in the SWMPP	
Briefly summarize the stormwater activities planned to meet the goals the next reporting cycle (including an implementation schedule).	● Yes ○ No s of this MCM during
necessary, implement procedures of land disturbances of 1 acre or more.	

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

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			DES							
f MS4/Coalition	Village of Bellport	N	Y	R	2	0	3	6	3	

Name of MS4/Coalit	ion Village of Bellport			N Y R	2 0 3 6 3
<u>Minimur</u>	n Control Me	asure 5. Pos	t-Constructi	on Stormwater	Management
The information in	this section is bei	ing reported (che	eck one);		
On behalf of anOn behalf of a c	oalition		f=T=T		
How	many MS4s con	tributed to this	report?		
1. How many and MS4/Coalition	d what type of po inventoried, ins	ost-construction pected and main	stormwater mantained in this r	nnagement practices eporting period?	s has your
		# Inventoried	#	# Times	
O Alternative Pract	ices	Inventoried	Inspections	Maintained	
O Filter Systems					
O Infiltration Basins	S				
Open Channels					
O Ponds					
O Wetlands					
Other					
2. Do you use an BMPs, inspect	electronic tool (base, spreadst	eet) to track post-	-construction O Yes O No
3. What types of Development/l	non-structural Better Site Desig	practices have gn/Green Infra	e been used to instructure prin	mplement Low Inciples?	npact
Building Codes	O Municipal Co	omprehensive Pl	ans		
Overlay Districts	Open Space I	Preservation Pro	gram		
Zoning	O Local Law or	Ordinance			
O None	Land Use Re	gulation/Zoning			
O Watershed Plans	Other Compre	ehensive Plan			
Other:					

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

Name of MS4/Coalition Village of Bellport	N Y R 2 0 3 6 3
4a. Are the MS4s contributing to this report involved in a regional/wa	atershed wide planning effort?
	O Yes • No
4b. Does the MS4 have a banking and credit system for stormwater m	ianagement practices?
	○ Yes 🧶 No
4c. Do the SWMP Plans for each MS4 contributing to this report incluand approval of banking and credit of alternative siting of a storm	water management practice?
	○ Yes • No
4d. How many stormwater management practices have been implement	nted as part of this system in this
reporting period?	
5. What percent of municipal officials/MS4 staff responsible for prog	

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

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

Name of MS4/Coalition Village of Bellport	Y R 2 0 3 6 3
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achieving me identified in your Stormwater Management Program Plan (SWMPP), including III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in th	nis reporting period.
Inspection of construction practices, drainage inlets, recharge basins and cate	h basins
B. Briefly summarize the observations that indicated the overall effectiven Goal.	ess of this Measurable
When necessary, maintained stormwater best practices	
C. How many times was this observation measured or evaluated in this rep	porting period?
	(e samples/participants/erents)
D. Has your MS4 made progress toward this measurable goal during this i	
	Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	AV ON
F. Briefly summarize the stormwater activities planned to meet the goals o the next reporting cycle (including an implementation schedule).	♥ Yes ○ No f this MCM during
Monitor stormwater practices and repair/maintain, when needed.	
Monitor stormwater practices and repair/maintain, when needed.	
Monitor stormwater practices and repair/maintain, when needed.	

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

	SPDES ID	
Name of MS4/Conlition Village of Bellport	N Y R 2 0 3 6 3	
Minimum Control Magazine C Stamps A	Managamant for Municipal Occursio	
Minimum Control Measure 6. Stormwater M	nanagement for Municipal Operatio	ns

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

How many MS4s contributed to this report?

On behalf of an individual MS4On behalf of a coalition

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? years? Street Maintenance..... 9 Yes O No Bridge Maintenance O Yes No ○ Yes Winter Road Maintenance.... • Yes ○ No • Yes O No Salt Storage

Yes O No 9 Yes O No Solid Waste Management.... 9 Yes ○ No • Yes \bigcirc No New Municipal Construction and Land Disturbance. Yes ○ No Yes O No Right of Way Maintenance..... • Yes ○ No 9 Yes O No ○ No Yes Marine Operations. PYes O No Hydrologic Habitat Modification..... O Yes ● No ○ Yes No Parks and Open Space..... 9 Yes ○ No ____ • Yes O No Municipal Building.

Yes ○ No • Yes O No Stormwater System Maintenance..... 9 Yes O No Yes O No Vehicle and Fleet Maintenance...... 9 Yes ○ No Yes O No Other..... O Yes ○ No ○ Yes O No

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

	SPDES ID				
Name of MS4/Coalition Village of Belport	N Y R 2	0	3 6	3	
2. Provide the following information about municipal operations goo	d housekee	ping _]	prog	ran	18:
O Parking Lots Swept (Number of acres X Number of times swept)	# Acres				7
O Streets Swept (Number of miles X Number of times swept)	# Miles		1	2	3
O Catch Basins Inspected and Cleaned Where Necessary	#			1	1
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#				1
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		5	0	0
O Nitrogen Applied In Chemical Fertilizer	# Lbs.	4	1 2	5	0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)	f # Acres		4	5].[0
3. How many stormwater management trainings have been provided during this reporting period?	to municipa	al em	ploy		3
4. What was the date of the last training?	1117	/ 2	.0	2	1
5. How many municipal employees have been trained in this reporting	g period?				2
6. What percent of municipal employees in relevant positions and dep stormwater management training?	oartments r	eceive 1		0 9	%

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

Evaluating Progress Toward Measurable Goals MCM 6 e this page to report on your progress and project plans toward achieving meantified in your Stormwater Management Program Plan (SWMPP), including C.1. Submit additional pages as needed. Briefly summarize the Measurable Goal identified in the SWMPP in this A. Briefly summarize the observations that indicated the overall effectiveneed. How many times was this observation measured or evaluated in this report in the syour MS4 made progress toward this measurable goal during this response your MS4 on schedule to meet the deadline set forth in the SWMPP? Triefly summarize the stormwater activities planned to meet the goals of	requirements in Part
ntified in your Stormwater Management Program Plan (SWMPP), including C.1. Submit additional pages as needed. Briefly summarize the Measurable Goal identified in the SWMPP in this A. Briefly summarize the observations that indicated the overall effectivened. How many times was this observation measured or evaluated in this report in the Swmpp. It is sometimes to the summary times was the observation measured or evaluated in this report is your MS4 made progress toward this measurable goal during this response your MS4 on schedule to meet the deadline set forth in the SWMPP?	requirements in Part
Briefly summarize the observations that indicated the overall effectivened. How many times was this observation measured or evaluated in this report is your MS4 made progress toward this measurable goal during this response your MS4 on schedule to meet the deadline set forth in the SWMPP?	reporting period.
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How many times was this observation measured or evaluated in this reportant that is not sometimes was this observation measured or evaluated in this reportant that is sometimes as your MS4 made progress toward this measurable goal during this response your MS4 on schedule to meet the deadline set forth in the SWMPP?	ss of this Measurable
How many times was this observation measured or evaluated in this reportant that is not seen that the second seems of the second seen and the seed of	
s your MS4 on schedule to meet the deadline set forth in the SWMPP?	rting period?
s your MS4 on schedule to meet the deadline set forth in the SWMPP?	(el.: samples/participants
	porting period? • Yes • No
	105 0110
riefly summarize the stormwater activities planned to meet the goals of	Yes O No
ne next reporting cycle (including an implementation schedule).	

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

9		 PD	ES	ID						
Name of MS4/Coalition	Village of Bellport	N	Y	R	2	0	3	6	3	

Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):	
On behalf of an individual MS4On behalf of a coalition	
How many MS4s contributed to this report?	

MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed			
Traditional Land Use	1,2,3,4.5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8u,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5.10,11,12	Phosphorus
Onondaga Lake Watershed			3.0
Traditional Land Use	1,6,7a-d,8a,9	2,3,4.5,8b,10.11,12	Phosphorus
Traditional Non-Land Usc	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5 8b,10,11,12	Phosphorus
Greenwood Lake Watershed			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11.12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
Oyster Bay			
Traditional Land Use	1.4,7a-d.9.10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1.4.7a-d,9.10.11.12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary		-	
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2.3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2.3,5.6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	(9)		
Traditional Land Use	1,4,6,7a-d,8a,9	2.3,5.86.10,11.12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5.8b,10,11,12	Phosphorus
Non-Traditional	1,4,6.7a-d.8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments	(5)	***	-
Traditional Land Use	1.2.3,4,7n-d.9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5.6.8a.8b	Pathogens
Non-Traditional	1.2.3.4.7a-d.9	5,6,8a,8b,10,11,12	Pathogens

	Non-Traditional	1.2.3.4.7a-d.9	5.6,8a,8b,10,11,12	Pat	nogens	
1.	•	dition have an educati n/pathogens on water	on program addressing i bodies?	impacts of Yes	○ No	O N/A
2.	Has 100% of the MS	54/Coalition conveyan	nce system been mapped		○ No	O N/A
	If N/A, go to question	1 3.		260		
	If No, estimate what p	percentage of the conve	yance system has been ma	pped so far.	1 (0 0 %
	Estimate what percen	tage was mapped in thi	s reporting period.		2	2 0 %

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	SPDES ID
Name of MS4/Coalition Village of Bellport	N Y R 2 0 3 6 3
3. Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?	System (infrastructure) Inspection Yes O No O N/A
4. Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report	vstems that have been inspected ting period?
5. Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Discharg (GP-0-08-001) to reduce pollutants in stormwater runoff fr disturb five thousand square feet or more?	ges from Construction Activities
6. Has your MS4/Coalition developed a program to address p runoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Activities New York State Stormwater Design Manual Enhanced Standards?	that disturb greater than or NYS DEC SPDES General vities (GP-0-08-001), including
7a. Does your MS4/Coalition have a retrofitting program to reconstruction phosphorus/nitrogen/pathogen loading?	duce erosion or Yes O 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 comp	pleted in this reporting period?
7d. What percent of projects planned in previous years have be	1 0 0 70
8a. Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper fertilizer application lands?	○ No Projects Planned management practices and on on municipally owned Pes ○ No ○ N/A
8b.Has your MS4/Coalition developed and implemented a turful procedures policy that addresses proper disposal of grass climunicipally owned lands?	management practices and ippings and leaves from Yes O No O N/A

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	SPDE	SID					
Name of MS4/Coalition Village of Bellport	NY	R	2	0	3	6 3	
9. Has your MS4/Coalition developed and implemented a program of		_		_			
	,	\circ Y	es	9	No	\circ N	/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste of prohibiting goose feeding?		nic Ye	-	_	-		
11. Does your MS4/Coalition have a pet waste bag program?	() Y	es		No	0 N	/A
12. Does your MS4/Coalition have a program to manage goose populations?		9 Ye	es	0	No	0 N	/A