June 14, 2023

MS4 Permit Coordinator Division Of Water 625 Broadway - 4th Floor Albany, NY 12233-3505

Re:

Town of Haverstraw MS4 Annual Report – March 10, 2022 thru March 9, 2023

Tamblin Engineering No. 18064

Dear Permit Coordinator:

The above-referenced MS4 Annual Report is submitted in accordance with MS4 regulations. The report outlines progress and completion of the Town's MS4 program for reporting year 2022 (March 10, 2022 – March 9, 2023)

If you have any questions, please call.

Sincerely,

Cosimo Pagano, PE Project Manager

Enclosure

cc: Howard Phillips – Supervisor – Town of Haverstraw (w/enc.)

Michael Gamboli – Director of Finance – Town of Haverstraw (w/enc.) Patrick Brady, PE – MS4 Administrator – Town of Haverstraw (w/enc.)

Michael Tamblin, PE, Tamblin Engineering (w/o enc.)

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 2 3

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

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Choose one:

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

Fill in SPDES ID in upper right hand corner.

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OR

○ 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.

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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 3

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

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MCC form for period ending March 9, 2 0 2 3

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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- 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 binding agreements.

f Joint	Report,	enter o	coalitio	n name	:											
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MCC form for period ending March 9, 2 0 2 3

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Section 2 - Contact Information									

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

First Name HOWARD	MI Last Name T P H I L I P S
Title	
TOWN SUPERVISOR	
Address	
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City	State 7:-
City	State Zip
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G A R N E R V I L E eMail	N Y 1 0 9 2 3 -

MCC form for period ending March 9, 2 0 2 3

	SPDES ID
Name of MS4 TOWN OF HAVERSTRAW	N Y R 2 0 A 2 6 5
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all p	permit requirements during this reporting
period?	○ Yes ○ No
If Yes, complete information below.	
Submit a separate sheet for each partner. Information provid	
accepted. If your MS4 cooperated with a coalition, submit or coalition. It is not necessary to include a separate sheet for each coalition.	
If No, proceed to Section 4 - Certification Statement.	ach 1415 4 in the countries.
Partner/CoalitionName	
	Extension of
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable
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Phone Lega	ally Binding Agreement in accordance
(8 4 5) 4 2 9 - 7 0 8 5 with	GP-0-08-002 Part IV.G.? ● Yes ○ No
What tasks/responsibilities are shared with this partner (e.g. MN	M1 School Programs or Multiple Tasks)
• MM1 PUBLIC OUTREACH MA	ATERIAL
• MM1 PUBLIC OUTREACH MA	
● MM2 P R E S E N T A T I O N S - P U	JBLIC EVENTS
● MM3 OUTFALLIINSPECTION	N D A T A B A S E
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O MM5	
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● MM6 E M P L O Y E E T R A I N I N G	
Additional tasks/responsibilities	
 Watershed Improvement Strategy Best Management Practic 	cas required for MSAs in impaired
watershed improvement Strategy Best Management Fraction watersheds included in GP-0-08-002 Part IX.	ces required for 191548 in impanted

MCC form for period ending March 9, $2 \mid 0 \mid 2 \mid 3$

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Name of MS4 TOWN OF HAVERSTRAW	N	Y	R	2	0	A	2	6	5

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
H O A W R D	T PHILLIPS
Fitle (Clearly print title of individual signing report)	
TOWN SUPERVISOR	
Signature War	Date 6 / 1 3 / 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

MCC form for period ending March 9, 2 0 2 3

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Name of MS4 TOWN OF HAVERSTRAW	N	Y	R	2	0	A	2	6	5

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- Report Preparer

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

TOWN OF HAVED STDAW	SPDES ID
Name of MS4/Coalition TOWN OF HAVERSTRAW	N Y R 2 0 A 2 6 5
Minimum Control Measure 1. Public Ed	ucation 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
1. Targeted Public Education and Outreach Best Managem	ent Practices
Check all topics that were included in Education and Outreach d	during this reporting period:
Construction Sites	• Pesticide and Fertilizer Application
General Stormwater Management Information	Pet Waste Management
 Household Hazardous Waste Disposal 	Recycling
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
● Infrastructure Maintenance	Trash Management
○ Smart Growth	O Vehicle Washing
O Storm Drain Marking	Water Conservation
● Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
Other: Other	○ None
2. Specific audiences targeted during this reporting period:	
● Public Employees ● Contractors	
ResidentialDevelopers	
BusinessesGeneral Public	
○ Restaurants ○ Industries	
Other: Agricultural	
P L A N N I N G A N D Z O N I N G Bother	O A R D S

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

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

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TOWN OF HAVENOWN AWA	SPDES ID
Name of MS4/Coalition TOWN OF HAVERSTRAW	N Y R 2 0 A 2 6 5
Jse this page to report on your progress and project plans toward acdentified in your Stormwater Management Program Plan (SWMPP) II.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
The Town proposes to continue to educate the general public by mayear involving a stormwater quality message through printed/on-linmedia.	
B. Briefly summarize the observations that indicated the overal Goal.	l effectiveness of this Measurable
The Town of Haverstraw disseminated 2,800 brochures to their targstormwater runoff, pesticide use, and erosion and sediment control. remaining printed material from previous years at kiosks, etc. The Tornell Cooperative Extension and the Stormwater Consortium of I partnerships, outreach efforts continued to include radio spots, etc	Combining these with the Cown continues to partner with
C. How many times was this observation measured or evaluated	
	2 8 0 0
	(ex.: samples/participants/ during this reporting period?
D. Has your MS4 made progress toward this Measurable Goal of	
D. Has your MS4 made progress toward this Measurable Goal of	● Yes ○ No
	● Yes ○ No
D. Has your MS4 made progress toward this Measurable Goal of E. Is your MS4 on schedule to meet the deadline set forth in theF. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedule).	● Yes ○ No SWMPP? ● Yes ○ No the goals of this MCM during

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

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 HAVERSTRAW		N Y R 2	0 A	2 6 5
Minimum Control Measure 2.	Public Involvemen	t/Participa	ation	
The information in this section is being reported (check	cone):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this re 	eport? 1			
1. What opportunities were provided for publi development, evaluation and improvement of (SWMP) Plan during this reporting period?	f the Stormwater Ma	nagement Pi	•	
Cleanup Events		# Events		1
Comments on SWMP Received		# Comments		0
Community Hotlines	Phone # ()	-	
Phone # (8 4 5) 4 2 9 - 2 2 0 0	Phone # ()] -	
Phone # () -	Phone # ()]-[
Phone # () -	Phone # ()	-	
Phone # () -	Phone # ()	-	
Phone # () -	Phone # ()	 -	
Community Meetings		# Attendees		1 4
○ Plantings		Sq. Ft.		
O Storm Drain Markings		# Drains		
Stakeholder Meetings		# Attendees		8
O Volunteer Monitoring		# Events		
Other: PUBLICMEETINC				
2. Was public notice of availability of this annu Program (SWMP) Plan provided?	al report and Stormy	vater Manag	gement ○ Yes	O No
○ List-Serve		# In List		
O Newspaper Advertising		# Days Run		
O TV/Radio Notices		# Days Run		
Other: PUBLIC MEETINC				

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

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

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

ne of N	AS4/C	oalit	ion	TOW	N OF	HA	VER	STR	AW												N	Y	R	2	0	A	2	6
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This report is being submitted for the reporting period ending March 9, 2 0 2 3

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ne of MS4/Coalition	TOW	N OF I	HAVE	RSTR	AW											N	Y	R	2	0	A	2	6
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This report is being submitted for the reporting period ending March 9, 2 0 2 3

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

		SPL	DES ID)					
Name of MS4/Coalition TOWN OF HAVERSTRAW		N	YR	2	0	A	2	6	5
4.a. If this report was made available on the internet, what da Leave blank if this report was not posted on the internet.	ite was it	po	sted?	3	1	2	0	2	3
4.b. For how many days was/will this report be posted?			,		,		1	2	0
If submitting a report for single MS4, answer 5.a If submitti	ing a join	ıt re	eport,	ans	we:	r 5.1	b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ing perio	6	/ 1	3	/	Ye 2	0		No 3
If No, is one planned?					С	Ye	S	0	No
5.b. Was an Annual Report public meeting held for all MS4s this reporting period?	contribu	tin	g to t	his	-	ort Ye			i g No
If No, is one planned for each?					С	Ye	es	0	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.					С	Ye	es	•]	No

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

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 HAVERSTRAW	N Y R 2 0 A 2 6 5
7. Evaluating Prog	gress Toward Measurable Goals MCM 2	
identified in your St	ort on your progress and project plans toward formwater Management Program Plan (SWMI tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the S	WMPP in this reporting period.
and the second s	olvement with regional stormwater organizati lize social media/online services.	ons and continue to evaluate
B. Briefly summar Goal.	ize the observations that indicated the over	rall effectiveness of this Measurable
their association wi	ed to expand service and reach out via social meth Cornell Cooperative Extension. Additional fervice for stormwater inspecitons.	1 0 .
C. How many time	es was this observation measured or evaluat	ted in this reporting period?
		6
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 t	
•	rize the stormwater activities planned to me ing cycle (including an implementation sche	9
The second secon	rolvement with regional stormwater organizati lize social media/online services.	ons and continue to evaluate

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

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 HAVERSTRAW	N Y R 2 0 A 2 6 5
Minimum Control Measure 3. 1	Ilicit 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 	nis report?
1. Enter the number and approx. percent of	of outfalls mapped: 1 6 5 # 1 0 0 %
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
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	○ 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	○ Printing
○ Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	 Schools and Universities
○ Garbage Truck Washouts	O Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	○ Vehicle Fueling
Industrial Process Water	O Vehicle Maint./Repair Shops
● Other: 1 1 T O W N O W N E D	○ None PROPERTIES
• Sewersheds:	
M I N I S C E O N G O ,	H U D S O N , M A H W A H

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

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

	SPDES ID		1
Name of MS4/Coalition TOWN OF HAVERSTRAW	N Y R 2	2 0 A 2	6 5
3.b.What types of illicit discharges have	e been found during this reporting period	?	
O Broken Lines From Sanitary Sewer	O Industrial Connections		
O Cross Connections	○ Inflow/Infiltration		
O Failing Septic Systems	O Pump Station Failure		
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows		
Illegal Dumping	O Straight Pipe Sewer Discharges		
Other: 4. How many illicit discharges/potential reporting period?	O None	luring th	is 2
	en confirmed during this reporting period		2
period?	onnections have been eliminated during t	his repor	ting 2
	een completed in this reporting period? s completed in this reporting period?	• Yes	○ No
 period? 7. Has the storm sewershed mapping b If No, approximately what percent was 8. Is the above information available in Is this information available on the v If Yes, provide URL(s): 	een completed in this reporting period? s completed in this reporting period? a GIS?	YesYesYesYesYes	○ No
 period? 7. Has the storm sewershed mapping b If No, approximately what percent was 8. Is the above information available in Is this information available on the v If Yes, provide URL(s): Please provide specific address of page 	een completed in this reporting period? s completed in this reporting period? a GIS? web?	YesYesYesYesYes	2 ○ No ○ No
 period? 7. Has the storm sewershed mapping b If No, approximately what percent was 8. Is the above information available in Is this information available on the v If Yes, provide URL(s): Please provide specific address of page 	een completed in this reporting period? s completed in this reporting period? a GIS? web?	YesYesYesYesYes	2 ○ No ○ No
 period? 7. Has the storm sewershed mapping b If No, approximately what percent was 8. Is the above information available in Is this information available on the v If Yes, provide URL(s): Please provide specific address of page 	een completed in this reporting period? s completed in this reporting period? a GIS? web?	YesYesYesYesYes	2 ○ No ○ No
 period? 7. Has the storm sewershed mapping b If No, approximately what percent was 8. Is the above information available in Is this information available on the v If Yes, provide URL(s): Please provide specific address of page 	een completed in this reporting period? s completed in this reporting period? a GIS? web?	YesYesYesYesYes	2 ○ No ○ No
7. Has the storm sewershed mapping b If No, approximately what percent was 8. Is the above information available in Is this information available on the v If Yes, provide URL(s): Please provide specific address of page URL	een completed in this reporting period? s completed in this reporting period? a GIS? web?	YesYesYesYesYes	2 ○ No ○ No
7. Has the storm sewershed mapping b If No, approximately what percent was 8. Is the above information available in Is this information available on the v If Yes, provide URL(s): Please provide specific address of page URL	een completed in this reporting period? s completed in this reporting period? a GIS? web?	YesYesYesYesYes	2 ○ No ○ No

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 & 3 \end{vmatrix}$

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

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 HAVERSTRAY	W		N Y R	2 0 A 2	6 5
12. Evaluating Prog	gress Toward Mea	surable Goals I	MCM 3			
Use this page to repoidentified in your Sto III.C.1. Submit addit	ormwater Managen	nent Program Pl		•	_	Part
A. Briefly summar	ize the Measurabl	e Goal identifie	ed in the SWN	APP in this rep	porting peri	od.
The Town will cont system.	inue to utilize the r	nobile platform	and plans to tr	ain 2 more ind	ividuals on th	ne
B. Briefly summar Goal.	ize the observation	ns that indicate	d the overall	effectiveness o	of this Meası	ırable
The Town impleme	nted utilized the me	obile platform ar	nd trained 2 m	ore individuals	i .	
C. How many time	es was this observa	ntion measured	or evaluated	in this reporti	ng period?	2
				(ex	k.: samples/part	
D. Has your MS4 r	nade progress tow	ard this measu	rable goal du	ring this repo	rting period • Yes	? ○ No
E. Is your MS4 on	schedule to meet	the deadline set	forth in the S	SWMPP?	• Yes	○ No
F. Briefly summar the next reporti	ize the stormwate ng cycle (includin	•		0		
The Town will cont system.	inue to utilize the r	nobile platform	and plans to tr	ain 2 more ind	ividuals on th	ie

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 2 \end{vmatrix}$ 3

		SPDE	SID					
Name of MS4/Coalition TOWN OF HAVERSTRAW		NY	R	2	0 2	A 2	6	5
Minimum Control Measures Construction Site and Post-Constru			<u>rol</u>					
The information in this section is being reported (check one):								
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	1							
1a. Has each MS4 contributing to this report adopted a law, o mechanism that provides equivalent protection to the NYS				_	mit	t for		N T
Stormwater Discharges from Construction Activities?						Yes	0	No
1b. Has each Town, City and/or Village contributing to this reequivalent to a NYSDEC Sample Local Law for Stormwat Sediment Control through either an attorney cerfification Analysis Workbook? If Yes, Towns, Cities and Villages provide date of equivalent	ter Mana or using NYS Sar	the N	ent a NYSI • Yo Local	nd DE es	Ero C G	o sion Fap No		
2. Does your MS4/Coalition have a SWPPP review procedure	e in plac	æ?			•	Yes	0	No
3. How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	n Plans (S	SWPI	PPs)	hav	ve b	een		4
4. Does your MS4/Coalition have a mechanism for receipt an comments related to construction SWPPPs?	nd consid	lerati	on of	_		c No	0]	NT
If Yes, how many public comments were received during this	reporting	g perio	od?					0
5. Does your MS4/Coalition provide education and training to SWPPP process?	for contr	actor	s abo	out		e loca		No

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

O Notices of Violation	#	O No Authority
O Stop Work Orders	#	O No Authority
O Criminal Actions	#	O No Authority
○ 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

		SPDES ID		
Name	of MS4/Coalition TOWN OF HAVERSTRAW	N Y R 2	0 A 2	6 5
	Minimum Control Measure 4. Construction Site Storm	nwater Runo	off Con	<u>trol</u>
The i	information in this section is being reported (check one):			
	behalf of an individual MS4 behalf of a coalition How many MS4s contributed to this report? 0 0 1			
	How many construction projects have been authorized for distur luring this reporting period?	bances of one	acre or	more 0
	How many construction projects disturbing at least one acre werluring this reporting period?	re active in you	ır jurisd	iction 0
3. V	What percent of active construction sites were inspected during	this reporting	period?	• NT
4. V	What percent of active construction sites were inspected more th	an once?	1 0	• NT
	Do all inspectors working on behalf of the MS4s contributing to Construction Stormwater Inspection Manual?	this report use • Yes	the NY	S ○ NT
	Does your MS4/Coalition provide public access to Stormwater P (SWPPPs) of construction projects that are subject to MS4 revie			ans
	If your MS4 is Non-Traditional, are SWPPPs of construction propublic review?		101 m t/m	
I	If Yes, use the following page to identify location(s) where SWPPPs	can be accesse	d.	

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

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 HAVERSTRAW N Y R 2 0 A 2 6	5
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 Par III.C.1. Submit additional pages as needed.	t
A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.	
Continue review of construction projects as they currently stand and identify future opportunities for knowledge sharing with local contractors.	or
B. Briefly summarize the observations that indicated the overall effectiveness of this Measura Goal.	ible
The Town informed local contractors through web portals and informational bulletins regarding the General Permit for Construction Activities	e
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 during this reporting period?	pants/events,
● Yes ○	No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).	No B
Continue review of construction projects as they currently stand and identify future opportunities for knowledge sharing with local contractors.	or

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix}$ $\begin{bmatrix} 2 & 3 \end{bmatrix}$

Name of MS4/Coalition	TOWN OF HAVERS	TRAW		NY	R 2 0 A 2	2 6 5
<u>Minimum</u>	Control Meas	sure 5. Post	-Construction	on Stormwate	er Managem	ent
The information in th	is section is being	g reported (che	ck one):			
On behalf of an incOn behalf of a coaHow m		ibuted to this:	report?	1		
1. How many and	•	t-construction	stormwater ma		•	
		# Inventoried	# Inspections	# Times Maintained		
O Alternative Practic	ces					
O Filter Systems						
O Infiltration Basins						
Open Channels						
Ponds			1 2	7		
O Wetlands						
Other						
2. Do you use an observation BMPs, inspection	electronic tool (ions and mainta	•	abase, spreads	heet) to track p	ost-constructi • Yes	
3. What types of Development/B	non-structural Better Site Desig				w Impact	
Building Codes	Municipal Co	omprehensive P	Plans			
Overlay Districts	Open Space I	Preservation Pre	ogram			
Zoning	Local Law or	Ordinance				
○ None	Land Use Re	gulation/Zoning	g			
O Watershed Plans	Other Compr	ehensive Plan				
Other:						7

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 & 3 \end{bmatrix}$

		SPD							_1	
Nam	e of MS4/Coalition TOWN OF HAVERSTRAW	N	Y	R	2	0	A	2	6	5
4a.	Are the MS4s contributing to this report involved in a regional/watersh	ed w	ide	pla	ann	_	effe Yes		, O:	No
4b.	Does the MS4 have a banking and credit system for stormwater manage	emen	t p	rac	tice	es?				
							Yes	S	•]	No
	Do the SWMP Plans for each MS4 contributing to this report include a and approval of banking and credit of alternative siting of a stormwater					t pra		ice?		No
	How many stormwater management practices have been implemented a reporting period?	as pa	rt (of t	his	syst	em		this	\$
1	What percent of municipal officials/MS4 staff responsible for program training on Low Impace Development (LID), Better Site Design (BSD) a Infrastructure principles in this reporting period?	-					tter	nde		%

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 \end{bmatrix}$ 3

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Name of MS4/Coalition	TOWN OF HAVERSTRAY	W		N Y R 2 0	A 2 6 5
6. Evaluating Prog	gress Toward Mea	asurable Goals MC	CM 5		
Use this page to repeidentified in your St III.C.1. Submit addi	ormwater Manager	nent Program Plan		•	
A. Briefly summar	rize the Measurabl	le Goal identified i	in the SWMPP	in this reportii	ng period.
The Town aims to c goal of educating 40					s with the
B. Briefly summar Goal.	rize the observation	ns that indicated t	he overall effec	tiveness of this	Measurable
The Town conducted attended training se	•	•			
C. How many time	es was this observa	ation measured or	evaluated in th	is reporting pe	
					1 2
D. Has your MS4 i	made progress tow	vard this measural	hle goal during		ples/participants/ever
D. Has your MIS41	made progress tow	var u tilis ilicasur a	ore goar during		Yes O No
E. Is your MS4 on	schedule to meet	the deadline set fo	rth in the SWM	IPP?	
					Yes O No
F. Briefly summar the next reporti	rize the stormwate ing cycle (includin	•		oals of this MC	'M during
The Town aims to c goal of educating 40					s with the

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

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_		<u>SPI</u>	<u>DES</u>	ID						
Name of MS4/Coalition	TOWN OF HAVERSTRAW	N	Y	R	2	0	A	2	6	5

Minimum Control Measure 6. Stormwater Management for Municipal Operations

On behalf of an individual MS4On behalf of a coalition				
How many MS4s contributed to this report?	0	0	1	
How many M34s contributed to this report?		0	_	ı

Other..... O Yes

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

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

 \bigcirc No

Operation/Activity/Facility performed within the past 3 Operation/Activity/Facility Addressed in SWMP? years? Street Maintenance.....

Yes ○ No • Yes \bigcirc No Bridge Maintenance. ● No ○ Yes No ○ No • Yes Winter Road Maintenance.....

Yes O No Salt Storage..... • Yes ○ No • Yes \bigcirc No Solid Waste Management.....

Yes ○ No • Yes \bigcirc No New Municipal Construction and Land Disturbance.. • Yes ○ No Yes Right of Way Maintenance..... O Yes No Yes No ● No ○ Yes No Marine Operations..... • Yes Hydrologic Habitat Modification..... O Yes ● No ○ Yes No Parks and Open Space..... 9 Yes ○ No • Yes \bigcirc No ○ No • Yes \bigcirc No Municipal Building.... • Yes ○ No • Yes Stormwater System Maintenance..... • Yes \bigcirc No Vehicle and Fleet Maintenance....

Yes ○ No Yes \bigcirc No

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

	SPDES ID			
Name of MS4/Coalition TOWN OF HAVERSTRAW	N Y R 2	0 A 2	6	5
2. Provide the following information about municipal operations go	od housekeep	oing prog	gran	ıs:
Parking Lots Swept (Number of acres X Number of times swept)	# Acres		3	0
• Streets Swept (Number of miles X Number of times swept)	# Miles	5	8	0
Catch Basins Inspected and Cleaned Where Necessary	#		6	5
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		1	2
Phosphorus Applied In Chemical Fertilizer	# Lbs.			0
 Nitrogen Applied In Chemical Fertilizer 	# Lbs.			0
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.) 	# Acres of	8	0.	
3. How many stormwater management trainings have been provide during this reporting period?	d to municipa	al emplo	yees 2	3
4. What was the date of the last training?	0 4 / 0 5	/ 2 0	2	3
5. How many municipal employees have been trained in this reporti	ng period?		2	3
6. What percent of municipal employees in relevant positions and destormwater management training?	epartments r	eceive	0	%

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

Name of MS4/Coalition TOWN OF HAVERSTRAW	N Y R 2 0 A 2 6 5
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward acidentified in your Stormwater Management Program Plan (SWMPP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SW	WMPP in this reporting period.
Continue training and expansion of knowledge regarding emerging street sweeping and catch basin cleaning.	g pollutants of concern. Conduct
B. Briefly summarize the observations that indicated the overal Goal.	ll effectiveness of this Measurable
20 staff members attended training sessions. Town staff from High Facilities conducted visual observations and inspections of 11 Tow inspections/cleaning of the 3 stormwater ponds were conducted 8 to person, staff and Directors of Parks, Highway and Town golf cours quarterly and annual inspections of Town facilities.	n-owned facilities. Additionally, imes this year. The Town's point
C. How many times was this observation measured or evaluated	4 0
D. Has your MS4 made progress toward this measurable goal d	(ex.: samples/participants/event luring this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation sched	t the goals of this MCM during
Continue training and expansion of knowledge regarding emerging street sweeping and catch basin cleaning.	g pollutants of concern. Conduct

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

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SPI	DES	ID						
N	Y	R	2	0	A	2	6	5
	SPI N	SPDES N Y	N Y R	SPDES ID N Y R 2	SPDES ID N Y R 2 0	SPDES ID N Y R 2 0 A	SPDES ID N Y R 2 0 A 2	SPDES ID

Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check on	he inf	nformation	in this	section	18	being	reported	(check	one
---	--------	------------	---------	---------	----	-------	----------	--------	-----

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

How many MS4s contributed to this report?

		_
0	0	1

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,8a,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	_	-	-
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	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	2,3,5,8b,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	-	-	-
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	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments		-	-
Traditional Land Use	1,2,3,4,7a-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

L.	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 Patho		nogens		
1.		ition have an education		•		
	pnospnorus/mtrogen	/pathogens on waterboo	aies?	Yes	\bigcirc No	\bigcirc N/A
2.	Has 100% of the MS If N/A, go to question	4/Coalition conveyance 3.	system been mapped	in GIS? ○ Yes	○ No	● N/A
	If No, estimate what p	ercentage of the conveya	nce system has been ma	apped so far.		%
	Estimate what percent	age was mapped in this r	eporting period.			%

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

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SPDES ID TOWN OF HAVERSTRAW NYR 2 0 A 2 6 5 Name of MS4/Coalition 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes O No O 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 0 % 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? Yes \bigcirc No \bigcirc N/A 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? Yes \bigcirc No O N/A 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? O Yes \bigcirc No N/A 7b. How many projects have been sited in this reporting period? 7c. What percent of the projects included in 7b have been completed in this reporting period? % 7d. What percent of projects planned in previous years have been completed? % O No Projects Planned 8a.Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes \bigcirc No \bigcirc N/A 8b.Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from

Yes

 \bigcirc No

 \bigcirc N/A

municipally owned lands?

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

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Name of MS4/Coalition TOWN OF HAVERSTRAW	N Y R 2	0 A 2	2 6 5
9. Has your MS4/Coalition developed and implemented a program of		_	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste prohibiting goose feeding?	_		rties and
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