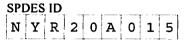
MS4 Annual Report Cover Page

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

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



Choose one:

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

Fill in SPDES ID in upper right hand corner.



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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\bigcirc 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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Cover Page 1 of 2

MS4 Annual Report Cover Page

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

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

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

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Name of MS4 Town of Brunswick	N Y R 2 0 A 0 1 5

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
- 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.

If Joint Report, enter coalition name:

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

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N Y R 2 0 A 0 1 5

Name of MS4 Town of Brunswick

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

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

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Section 2 - Contact Information

Important Instructions - Please Read

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If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

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

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

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Name of MS4 Town of Brunswick

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).
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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:

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

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

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Name of MS4 Town of Brunswick

Section 2 - Contact Information

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For each contact, select all that apply:

O Principal Executive Officer/Chief Elected Official

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

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

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Name of MS4 Town of Brunswick

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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.

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

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Name of MS4 Town of Brunswick

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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.

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

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Name of MS4 Town of Brunswick

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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.

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

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Name of MS4 Town of Brunswick

Section 3 - Partner Information

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

 Name of MS4
 Town of Brunswick
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Name of MS4 Town of Brunswick

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

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

SPDES ID

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Name of MS4 Town of Brunswick

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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.

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watersheds included in GP-0-08-002 Part IX.

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

SPDES ID

N Y R 2 0 A 0 1 5

Name of MS4 Town of Brunswick

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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.

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

 Name of MS4
 Town of Brunswick
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Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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.

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Additional tasks/responsibilities

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

SPDES ID

N Y R 2 0 A 0 1 5

Name of MS4 Town of Brunswick

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 Na	me			
Philip	Н Не	r r i	ngto	n	
Title (Clearly print title of individual signing report)					
Supervisor					
Signature					
		I	Date		1. 1. 1. 1.
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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

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

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

Water Quality Trends

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

• On behalf of an individual MS4

 \bigcirc On behalf of a coalition

How many MS4s are contributed to this report?

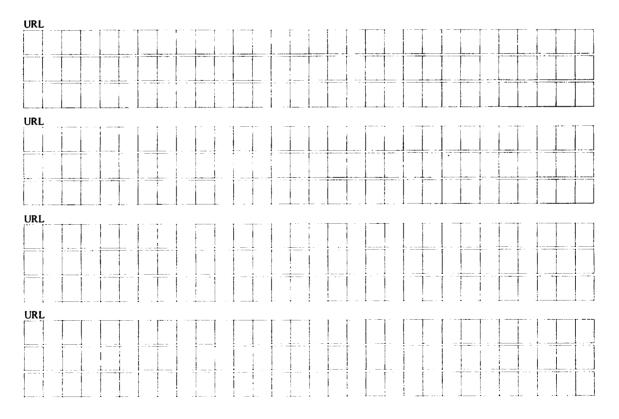
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If Yes, choose one of the following

- O Report(s) attached to the annual report
- Web Page(s) where report(s) is/are provided below

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



Water Quality Trends Page 1 of 1

Other

MS4 Annual Report Form

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

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

SPDES ID

N Y R 2 0 A 0 1 5

Name of MS4/Coalition Town of Brunswick

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		\bigcirc Pesticide and Fertilizer Application					
General Stormwater	Management Information	O Pet Waste Management					
\bigcirc Household Hazardov	us Waste Disposal	Recycling					
Illicit Discharge De	tection and Elimination	CRiparian Corridor Protection/Restoration					
• Infrastructure Maint	tenance	Trash Management					
\bigcirc Smart Growth		• Vehicle Washing					
• Storm Drain Markin	g	• Water Conservation					
⊖ Green Infrastructure	/Better Site Design/Low Impact Development	• Wetland Protection					
Other: Other		○ None					
2. Specific audience	es targeted during this reporting period:						
• Public Employees	• Contractors						
• Residential	• Developers						
 Businesses 	• General Public						
• Restaurants	· Industries						
O Other:	C Agricultural						

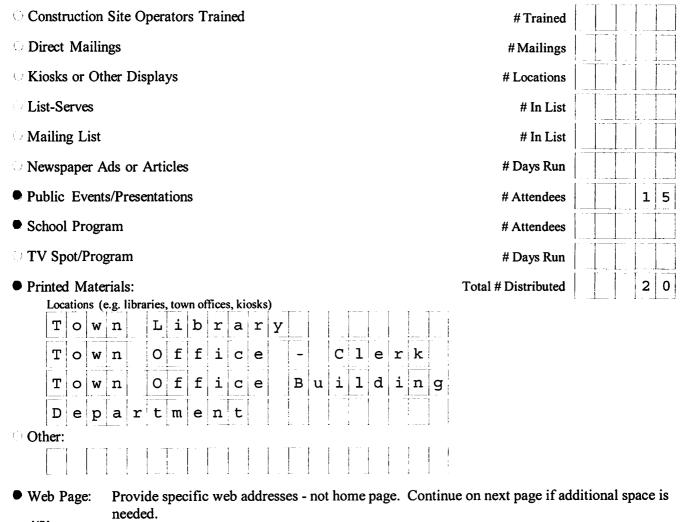
MCM 1 Page 1 of 4

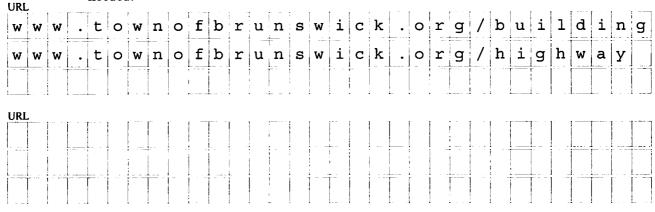
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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



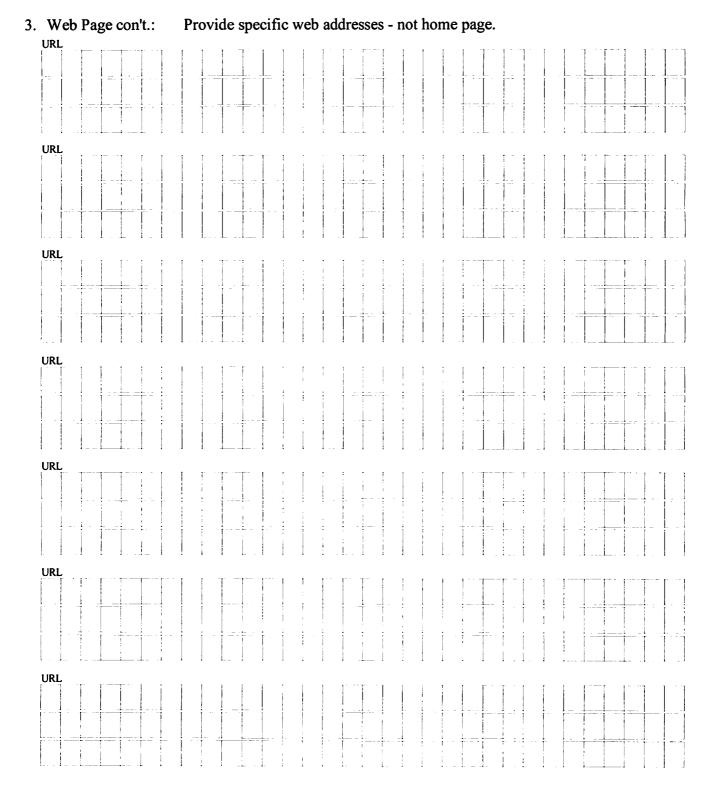


MCM 1 Page 2 of 4

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

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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 Town of Brunswick

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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.

Education - Literature furnished to Building Permit Applicants, training Highway Staff. DVD "Ground Control Stormwater Pollution Prevention for Construction Sites"

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

Observation of construction sites. - Contractor questions, Highway Department Training June 10, 2010.

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

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this Measurable Goal during this reporting period?

• Yes \bigcirc 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 handout literature to building permit applicants and work with other Rensselaer County MS4 Communities on grant application - Intermunicipal Agreement regarding Cooperation to Comply with the Federal and State Phase II Stormwater Regulations and SPDES General Permit for Stormwater Discharges from MS4s (GP-0-08-022) in Rensselaer County

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

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 Brunswick

Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

• Cleanup Events	# Events	L 4
• Comments on SWMP Received	#Comments	0
C Community Hotlines	Phone # ()	
Phone # () –	Phone # ()	
Phone # ()	Phone # ()	
Phone # () –	Phone # ()	
Phone # () -	Phone # () -	
Phone # () -	Phone # ()	
Community Meetings	# Attendees	
• Plantings	Sq. Ft.	
Storm Drain Markings	# Drains	
Stakeholder Meetings	# Attendees	
O Volunteer Monitoring	# Events	
Other:		

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?

Program (SWMP) Plan provided?		🗠 Yes 🛛 😳 No	
ਂ List-Serve		# In List	
O Newspaper Advertising		# Days Run	
TV/Radio Notices		# Days Run	
O Other:			

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

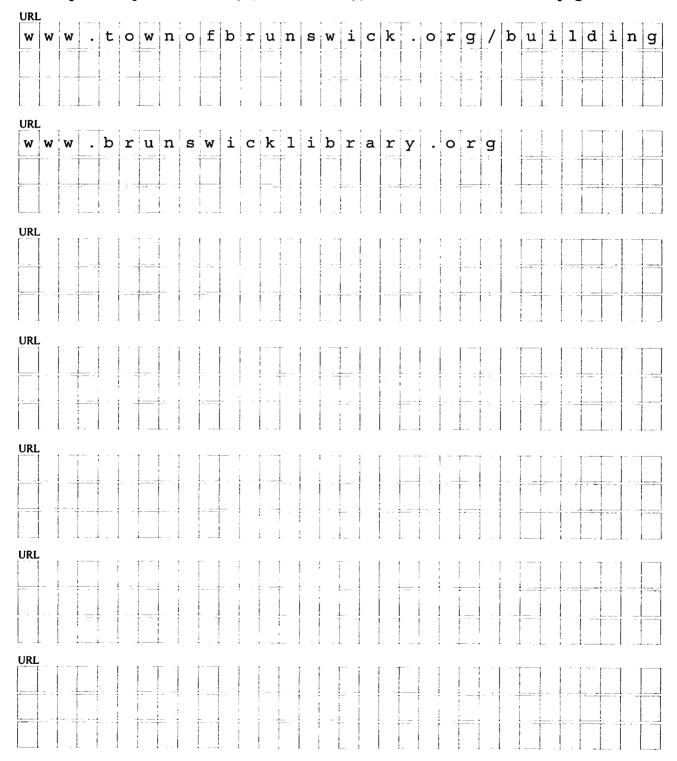
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.



2. URL(s) con't.:

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



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

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

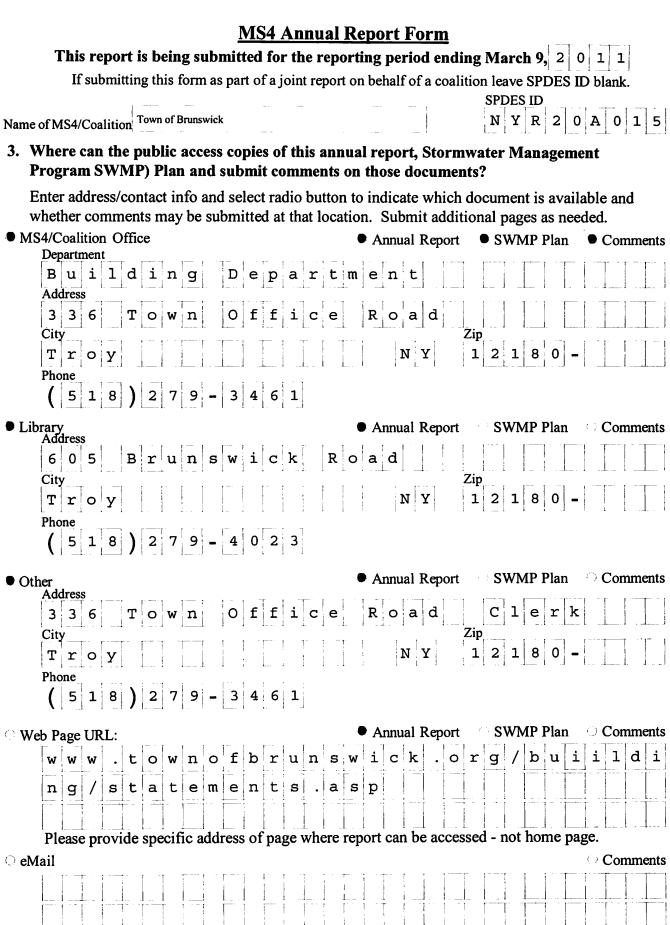
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This report is being submitted for the reporting period ending March	9,2011	
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Name of MS4/Coalition Town of Brunswick SPDES ID N Y R		5
4.a. If this report was made available on the internet, what date was it posted?)	
Leave blank if this report was not posted on the internet. $05/05$	2 / 2 0 1 1	L
4.b. For how many days was/will this report be posted?	3 0	2
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?If Yes, what was the date of the meeting?0 5 / 1	$\begin{array}{c c} \circ Yes & \circ N \\ \hline 9 \\ \end{array} $	-
If No, is one planned?	\bigcirc Yes \bigcirc N	0
5.b. Was an Annual Report public meeting held for all MS4s contributing to t this reporting period?	his report during OYes ON	
If No, is one planned for each?	\bigcirc Yes \bigcirc N	0
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.	○ Yes ● N	lo

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

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 Brunswick

SPDES ID N Y R 2 0 A 0 1 5

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.

Town Beach and Town Park cleanup. Ballfield and Community Center

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

Public Comments concerning Town Beach and Ball Park and Community Center Cleanups

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

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

♥ Yes ○ No

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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).

Maintain Public Town Beach, Ball fields and Community Center in good condition. One major pick-up per location then periodic check by employees.

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

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 Brunswick

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report?

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

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

If submitting this form as part of a j	oint report on behalf of a coalition	n leave SPDES ID blank.
Name of MS4/Coalition		SPDES ID N Y R 2 0 A 0 1 5
3.b.What types of illicit discharges have	been found during this repo	rting period?
Broken Lines From Sanitary Sewer	\bigcirc Industrial Connections	
⊖ Cross Connections	Inflow/Infiltration	
Failing Septic Systems	O Pump Station Failure	
\odot Floor Drains Connected To Storm Sewers	Sanitary Sewer Overflows	
Illegal Dumping	Straight Pipe Sewer Discharg	ges -
$O \text{ Other:} \\ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	○ None s t r u c t i o n	sites
4. How many illicit discharges/potentia reporting period?	l illegal connections have bee	en detected during this
5. How many illicit discharges have bee	en confirmed during this repo	orting period?
6. How many illicit discharges/illegal co period?	onnections have been elimina	ted during this reporting
7. Has the storm sewershed mapping be 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):		● Yes ○ No ○ Yes ● No
Please provide specific address of page	where map(s) can be accessed	- not home page.

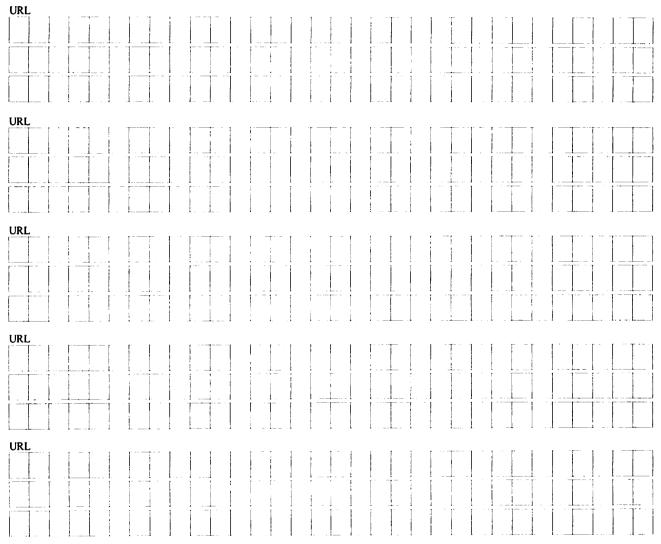
This report is being submitted for the reporting period ending March 9, 2 0 1 1

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

1	<u> </u>	-		SPDES ID				
Name of MS4/Coalition	Town of Brunswick			NYR	2 0	A 0	1 5	
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8. URL(s) con't.:

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



- 9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report?
- 10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? • Yes • No • NT
- 11. What percent of staff in relevant positions and departments has received IDDE training?

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

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SPDES ID

N Y R 2 0 A 0 1 5

Name of MS4/Coalition Town of Brunswick

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.

Highway Department checks 20% of out falls annually. Catach basins cleaned once per year and during leaf pick-up.

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

Cut brush in ditaches, tree triming, catch basins operate properly, reduced road flooding

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

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes ONO

7

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).

Highway Department to check 20% of out falls, clean catch basins, maintain ditches.

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

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N Y R 2 0 A 0 1 5

Name of MS4/Coalition Town of Brunswick

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

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

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

SWPPP process?

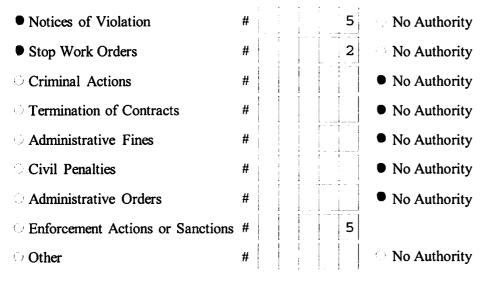
How many MS4s contributed to this report?

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 cerfification or using the NYSDEC Gap					
	. . .		-	\bigcirc NT	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. 09/2004 03/2006 0N X 12/27/09				
2.	Does your MS4/Coalition have a SWPPP review procedure in place?		• Yes	O No	
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) reviewed in this reporting period?	hav	ve been	9	
4.	Does your MS4/Coalition have a mechanism for receipt and consideration o comments related to construction SWPPPs?	-		ି NT	
	If Yes, how many public comments were received during this reporting period?			1 8	
5.	Does your MS4/Coalition provide education and training for contractors ab	ation and training for contractors about the local			

• 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:



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

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Name of MS4/Coalition Town of Brunswick

SPDES ID N Y R 2 0 A 0 1

100%

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?
- 2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?
- 3. What percent of active construction sites were inspected during this reporting period? \odot NT

4.	What percent of active construction sites were inspected more than once?	\odot NT
		100%

- 5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? ● 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.

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

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Name of MS4/Coalition Town of Brunswick

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6. con't.:

Submit additional pages as needed.

• MS4/Coalition Office

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Name of MS4/Coalition Town of Brunswick

SPDES ID N Y R 2 0 A 0 1 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 Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

SSWPPP Review, on site inspections **B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.** Construction sites in compliance with approved SWPPP

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

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

• Yes 👘 🔿 No

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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).

Provide 2 inspections per year of sites bay Building Enforcement Officer and Consulting Engineer.

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

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SPDES ID

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Name of MS4/Coalition Town of Brunswick

Minimum Control Measure 5. Post-Construction Stormwater Management

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 and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

	# Inventoried	# Inspections	# Times Maintained
• Alternative Practices			
Filter Systems	2	2	1
\bigcirc Infiltration Basins			
• Open Channels		1	1
Ponds	3 3	10	2
\bigcirc Wetlands			
⊖ Other			

- 2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance? • Yes • No
- 3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

• Building Codes • Municipal Comprehensive Plans

○ Overlay Districts ● Open Space Preservation Program

- Zoning
- Local Law or Ordinance

- None Land Use Regulation/Zoning
- Watershed Plans • Other Comprehensive Plan
- Other:

MCM 5 Page 1 of 3

MS4 Annual Report Form

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

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

		SPL	DES	ID							
Name of MS4/Coalition	Town of Brunswick	N	Y	R	2	0	Α	0	1	5	

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning	effort	?
О	Yes	• No
4b. Does the MS4 have a banking and credit system for stormwater management practices?		
0	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 sy	stem	ı in	thi	s
reporting period?			4	

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?
 1 0 0 %

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

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SPDES ID

N Y R 2 0 A 0 1 5

Name of MS4/Coalition Town of Brunswick

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.

Inspect previously installed Stormwater Management Practices

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

Inspected operation of stormwater management practices

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

(ex.: samples/participants/events)

2 0

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 inspect 25% installed stormwater management practices.

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

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Name of MS4/Coalition Town of Brunswick

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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
- \bigcirc On behalf of a coalition

How many MS4s contributed to this report?

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

		Self-Assessment
		Operation/Activity/Facility
		<u>performed within the past 3</u>
Operation/Activity/Facility	Addressed in SWM	<u>P?</u> <u>years?</u>
Street Maintenance	• Yes 👘 No .	● Yes ○ No
Bridge Maintenance	• Yes 👘 No .	• • Yes • O No
Winter Road Maintenance		• Yes 🛛 No
Salt Storage	• Yes 🛛 💛 No .	• Yes 🛛 No
Solid Waste Management	●Yes No.	• Yes 🛛 🖓 No
New Municipal Construction and Land Disturbar	ice • Yes No.	$\bullet \mathbf{Yes} \bigcirc \mathbf{No}$
Right of Way Maintenance	• Yes \odot No .	• Yes • No
Marine Operations	😒 Yes 🛛 🛡 No 🔒	○ Yes ● No
Hydrologic Habitat Modification	Yes ● No .	⊖ Yes ● No
Parks and Open Space		• Yes 🛛 🖓 No
Municipal Building		• Yes No
Stormwater System Maintenance		• Yes 🛛 🔾 No
Vehicle and Fleet Maintenance		● Yes () No
Other Rebuild Catch Basins	• Yes No	● Yes ○ No

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

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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			4	1
• Streets Swept (Number of miles X Number of times swept)	# Miles		2	0	כ
Catch Basins Inspected and Cleaned Where Necessary	#		4	4 (כ
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#				L
O Phosphorus Applied In Chemical Fertilizer	# Lbs.				-
O Nitrogen Applied In Chemical Fertilizer	# Lbs.				
• Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)	# Acres f]
3. How many stormwater management trainings have been provided during this reporting period?	to municipa	al emp	loye	1	1
4. What was the date of the last training?	6 / 1 0	2	0	1 (2

- 4. What was the date of the last training?
- 5. How many municipal employees have been trained in this reporting period?
- 6. What percent of municipal employees in relevant positions and departments receive stormwater management training? 90%

1 9

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

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Name of MS4/CoalitionTown of BrunswickSPDES IDNYR20A015

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.

Clean specific catch basins prior to heavy storms and after leaves fall.

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

Inspect roads for sand and salt applications vacuum and sweep roads, self assessment highway properties. - Roads swept, catch basins cleaned, leaves vacuumed.

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

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

• Yes 👘 🕖 No

1

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).

sweep roads, clean catch basins and ditches, install culvert pipes where require to maintain stormwater flow. Schedule training.

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Name of MS4/Coalition Town of Brusnwick

SPDES ID N Y R 2 0 A 0 1 5

Additional Watershed Improvement Strategy Best Management Practices

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

- On behalf of an individual MS4
- \bigcirc On 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,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

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?

○ No ● N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?

) Yes 👘 No 🔍 N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

Estimate what percentage was mapped in this reporting period.

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

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Name of MS4/Coalition	Town of Brusnwick				N	Y	R	2	0	Α	0	1	5

- 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program?
- 4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?
- 5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more?
- 6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? ○ Yes ○ No ● N/A
- 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or
phosphorus/nitrogen/pathogen loading?O YesNoN/A

	 ···
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	1

7c. What percent of the projects included in 7b have been completed in this reporting period?

7b. How many projects have been sited in this reporting period?

			%
7d. What percent of projects planned in previous years have been completed?			%

• No Projects Planned

- 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 municipally owned lands?

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SPDES ID

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Name of MS4/Coalition Town of Brunswick		NYRZUAUI5

9. Has your MS4/Coalition developed and implemented a program of native planting?							
	\bigcirc Yes	No	() N/A				
10. Has your MS4/Coalition enacted a local law prohibiting pet waste or	1 municipa	l prope	rties and				
prohibiting goose feeding?	\bigcirc Yes	• No	⊖ N/A				
11. Does your MS4/Coalition have a pet waste bag program?	Yes	• No	N/A				
12. Does your MS4/Coalition have a program to manage goose populations?	• Yes	() No	⊖ N/A				
populations:	- 105						