3258632975

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MS4 Annual Report Cover Page

MCC form for period ending March 9, 2019

SPDES ID: NYR20A070

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.

Name of MS4: Village of Garden City

OR

○ **This report is being submitted on behalf of a Single Entity**

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

Name of Single Entity:

OR

○ **This is a joint report being submitted on behalf of a coalition.**

Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.

Name of Coalition:

SPDES ID: NYR20A	SPDES ID: NYR20A	SPDES ID: NYR20A
SPDES ID: NYR20A	SPDES ID: NYR20A	SPDES ID: NYR20A
SPDES ID: NYR20A	SPDES ID: NYR20A	SPDES ID: NYR20A
SPDES ID: NYR20A	SPDES ID: NYR20A	SPDES ID: NYR20A
SPDES ID: NYR20A	SPDES ID: NYR20A	SPDES ID: NYR20A
SPDES ID: NYR20A	SPDES ID: NYR20A	SPDES ID: NYR20A

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MS4 Annual Report Cover Page

MCC form for period ending March 9, 2019

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

SPDES ID	SPDES ID	SPDES ID
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A
NYR20A	NYR20A	NYR20A

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2019

Name of MS4: Village of Garden City

SPDES ID: NYR20A070

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)
- ○ A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2019

Name of MS4: Village of Garden City

SPDES ID: NYR20A070

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

   A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

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

For each contact, select all that apply:

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

First Name: Theresa | MI: | Last Name: Trouvé

Title: Mayor

Address: 351 Stewart Avenue

City: Garden City | State: NY | Zip: 11530 -

eMail: mayor@gardencityny.net

Phone: (516) 465-4051 | County: Nassau

DRAFT

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2019

Name of MS4: Village of Garden City

SPDES ID: NYR20A070

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

   A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

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

For each contact, select all that apply:

○ Principal Executive Officer/Chief Elected Official

◉ Duly Authorized Representative

◉ Local Stormwater Public Contact

◉ Stormwater Management Program (SWMP) Coordinator

○ Report Preparer

First Name: Domenick | MI: A | Last Name: Stanco

Title: Deputy Superintendent of Public Works

Address: 351 Stewart Avenue

City: Garden City | State: NY | Zip: 11530 -

eMail: dstanco@gardencityny.net

Phone: (516) 465-4017 | County: Nassau

DRAFT

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2019

Name of MS4: Village of Garden City

SPDES ID: NYR20A070

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for ***each*** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

   A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

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

For each contact, select all that apply:

○ Principal Executive Officer/Chief Elected Official

○ Duly Authorized Representative

○ Local Stormwater Public Contact

○ Stormwater Management Program (SWMP) Coordinator

● Report Preparer

First Name | MI | Last Name

Title: D & B Engineers and Architects

Address: 330 Crossways Park Drive

City: Woodbury | State: NY | Zip: 11797 -

eMail:

Phone: (516) 364-9890 | County: Nassau

DRAFT

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2019

Name of MS4: Village of Garden City

SPDES ID: NYR20A070

Section 3 - Partner Information

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

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name: Nassau County Storm Water

Partner/Coalition Name (con't.): Coalition

SPDES Partner ID - If applicable: NYR20A022

Address: 1194 Prospect Avenue

City: Westbury

State: NY

Zip: 11590-2723

eMail: StormWater2@nassaucountyny.gov

Phone: (516) 571-7508

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

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

- ● MM1 Multiple Tasks
- ● MM2 Multiple Tasks
- ● MM3 Multiple Tasks
- ○ MM4
- ○ MM5
- ● MM6 Multiple Tasks

Additional tasks/responsibilities

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

DRAFT

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2019

Name of MS4: Village of Garden City

SPDES ID: NYR20A070

Section 3 - Partner Information

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

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name: Town of Hempstead

Partner/Coalition Name (con't.):

SPDES Partner ID - If applicable: NYR20A390

Address: 1 Washington Avenue

City: Hempstead State: NY Zip: 11550 -

eMail:

Phone: (516) 489 - 5000

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

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

- ● MM1: S.T.O.P. Program
- ● MM2: S.T.O.P. Program
- ● MM3: Town Helpline
- ○ MM4:
- ○ MM5:
- ○ MM6:

Additional tasks/responsibilities

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

DRAFT

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2019

Name of MS4: Village of Garden City

SPDES ID: NYR20A070

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: Domenick

MI: A

Last Name: Stanco

Title (Clearly print title of individual signing report): Deputy Superintendent of Public Works

Signature

Date: / /

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

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

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

Water Quality Trends

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

● On behalf of an individual MS4
○ On behalf of a coalition

How many MS4s are contributed to this report?

1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. ○ Yes ● No

If Yes, choose one of the following

○ 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.

URL

URL

URL

URL

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report? ___

1. Targeted Public Education and Outreach Best Management Practices

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

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

Other: Goose Management Plan

2. Specific audiences targeted during this reporting period:

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

Other: Students, Landscapers

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

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

○ Construction Site Operators Trained	# Trained	
● Direct Mailings	# Mailings	1
● Kiosks or Other Displays	# Locations	2
○ List-Serves	# In List	
● Mailing List	# In List	6600
● Newspaper Ads or Articles	# Days Run	10
○ Public Events/Presentations	# Attendees	
● School Program	# Attendees	2
○ TV Spot/Program	# Days Run	
● Printed Materials:	Total # Distributed	

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

Village Hall

Public Library

● Other:

PostedSigns; CBEmblem

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

URL

www.gardencityny.net/dpw

URL

https://www.gardencityny.net/vertical/sites/%7B82C80390-C4CA-486E-AA10-40853E064A1%7D/uploads/2

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

3. Web Page con't.: Provide specific web addresses - not home page.

URL
018-2019_sanitation_collection_schedule.pdf
www.gardencityny.net/index.asp?Type=B_BASIC&SEC={200DCA93-6021-4C99-85C0-502782D5004}&DE={3F481
3E6-DD4D-4203-AA8E-5A70A5A8ED8B}

URL
www.gardencityny.net/index.asp?Type=B_BASIC&SEC={200DCA93-6021-4C99-85C0-502782D5004}&DE={32C8B
3A1-1486-4601-981F-B5290A2BC8FD}

URL
www.gardencityny.net/index.asp?Type=B_BASIC&SEC={200DCA93-6021-4C99-85C0-502782D5004}&DE={2E2956
A3-EECD-4112-A427-A79EA441BBB7}

URL
www.gardencityny.net/index.asp?Type=B_BASIC&SEC={91A662E7-10C5-4C41-8CD8-8AAE096790B4}

URL
www.nassaucountyny.gov/agencies/DPW/stormwater.html

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

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.

The Village's Public Education and Outreach program will be tailored to describe topics related to the impacts of storm water discharges on local water bodies, pollutants of concern and their sources, and the steps that can be taken to reduce pollutants in storm water runoff and non-storm water discharges.

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

The Village has chosen to evaluate the annual number of newsletter articles as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Education and Outreach program requirements. There were 10 newsletter articles published in this reporting period.

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

1

(ex.: samples/participants/events)

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

● Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

● Yes ○ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village plans to continue evaluating the annual number of storm water and/or pollution prevention newsletter articles published as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Education and Outreach program requirements in the next reporting cycle. The Village will publish storm water and/or pollution prevention newsletter articles periodically throughout the year.

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

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: 4
- ● Comments on SWMP Received — # Comments: 0
- ● Community Hotlines
  - Phone # ( ) -
  - Phone # ( ) -
  - Phone # ( ) -
  - Phone # ( ) -
  - Phone # ( ) -
  - Phone # ( ) -

  Phone # (516) 465-4017
  Phone # (516) 538-1900
  Phone # (516) 489-6000
  Phone # (516) 571-7535
  Phone # ( ) -
  Phone # ( ) -
- ● Community Meetings — # Attendees: 10
- ● Plantings — Sq. Ft.: 4500
- ○ Storm Drain Markings — # Drains:
- ○ Stakeholder Meetings — # Attendees:
- ○ Volunteer Monitoring — # Events:
- ● Other: Street Fairs

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? ● Yes ○ No

- ○ List-Serve — # In List:
- ○ Newspaper Advertising — # Days Run:
- ○ TV/Radio Notices — # Days Run:
- ● Other: Posted in Library
- ● Web Page URL: Enter URL(s) on the following two pages.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

2. URL(s) con't.:

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

URL

URL

URL

URL

URL

URL

URL

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

2. URL(s) con't.:

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

URL

URL

URL

URL

URL

URL

URL

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

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

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

● MS4/Coalition Office — ● Annual Report ● SWMP Plan ● Comments

Department: Village Hall

Address: 351 Stewart Avenue

City: Garden City NY Zip: 11530 -

Phone: (516) 465-4001

● Library — ● Annual Report ○ SWMP Plan ○ Comments

Address: 60 Seventh Street

City: Garden City NY Zip: 11530 -

Phone: (516) 742-8405

○ Other — ○ Annual Report ○ SWMP Plan ○ Comments

Address:

City: Zip: -

Phone: ( ) -

● Web Page URL: — ● Annual Report ○ SWMP Plan ○ Comments

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

○ eMail — ○ Comments

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

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

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

○ MS4/Coalition Office ○ Annual Report ○ SWMP Plan ○ Comments

Department

Address

City Zip -

Phone ( ) -

○ Library ○ Annual Report ○ SWMP Plan ○ Comments

Address

City Zip -

Phone ( ) -

○ Other ○ Annual Report ○ SWMP Plan ○ Comments

Address

City Zip -

Phone ( ) -

● Web Page URL: **(Continued)** ● Annual Report ○ SWMP Plan ○ Comments

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

○ eMail ○ Comments

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

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. ___ / ___ / ____

4.b. For how many days was/will this report be posted? 365

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period? ● Yes ○ No
If Yes, what was the date of the meeting? 05 / 10 / 2018

If No, is one planned? ○ Yes ○ No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period? ○ Yes ○ No

If No, is one planned for each? ○ Yes ○ No

6. Were comments received during this reporting period? ○ Yes ● No
If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

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.

The Village's Public Involvement and Participation program will incorporate stewardship activities that help to reduce pollutants of concern and encourage the general public, residents and businesses to become involved in storm water management and environmental stewardship events.

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

The Village has chosen to evaluate the annual number of cleanup events held within the Village as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Involvement and Participation program requirements. There were four cleanup events held in the Village in this reporting period.

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

1

(ex.: samples/participants/events)

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

● Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

● Yes ○ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village plans to continue evaluating the annual number of cleanup events held within the Village as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Involvement and Participation program requirements in the next reporting cycle. The Village plans to host/promote cleanup events periodically throughout the next reporting cycle.

DRAFT

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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 Garden City

SPDES ID: NYR20A070

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report? ___

1. Enter the number and approx. percent of outfalls mapped: 56 # 100 %

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? 0

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

- ○ Auto Recyclers
- ○ Building Maintenance
- ○ Churches
- ○ Commercial Carwashes
- ○ Commercial Laundry/Dry Cleaners
- ○ Construction Vehicle Washouts
- ○ Cross-Connections
- ○ Distribution Centers
- ○ Food Processing Facilities
- ○ Garbage Truck Washouts
- ○ Hospitals
- ○ Improper RV Waste Disposal
- ○ Industrial Process Water
- ○ Landscaping (Irrigation)
- ○ Marinas
- ○ Metal Plateing Operations
- ○ Outdoor Fluid Storage
- ● Parking Lot Maintenance
- ○ Printing
- ○ Residential Carwashing
- ● Restaurants
- ○ Schools and Universities
- ○ Septic Maintenance
- ○ Swimming Pools
- ○ Vehicle Fueling
- ○ Vehicle Maint./Repair Shops
- ● Other: Village Streets
- ○ None
- ○ Sewersheds:

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MS4 Annual Report Form

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

Name of MS4/Coalition: Village of Garden City

SPDES ID: NYR20A070

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

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

4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 0

5. How many illicit discharges have been confirmed during this reporting period? 0

6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0

7. Has the storm sewershed mapping been completed in this reporting period? ◉ Yes ○ No

If No, approximately what percent was completed in this reporting period? %

8. Is the above information available in GIS? ◉ Yes ○ No

Is this information available on the web? ○ Yes ◉ No

If Yes, provide URL(s):

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

URL

URL

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8. URL(s) con't.:
Please provide specific address of page where map(s) can be accessed - not home page

URL

URL

URL

URL

URL

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? ● Yes ○ No

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?

40 **%**

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SPDES ID: NYR20A070

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.

The Village Illicit Discharge Detection and Elimination program will focus on identifying, locating, eliminating, reducing and preventing illicit discharge to the Village municipal separate storm sewer system to the maximum extent practicable.

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

The Village has chosen to evaluate the number of illicit discharges detected as an indicator for measuring the overall effectiveness of the Village's compliance with the Illicit Discharge Detection and Elimination program requirements. There were zero illicit discharges detected in the Village's jurisdiction in this reporting period.

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

1

(ex.: samples/participants/events)

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

● Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

● Yes ○ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village will continue following the procedures for Illicit Discharge Detection and Elimination in the CWP/USEPA Illicit Discharge Detection and Elimination: A Guidance Manual for Program Development and Technical Assessment. Illicit discharges will be investigated and eliminated according to the authority provided by the Village Illicit Discharge Local Law on a case-by-case basis.

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MS4 Annual Report Form

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Name of MS4/Coalition: Village of Garden City

SPDES ID: NYR20A070

Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

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

● On behalf of an individual MS4
○ On behalf of a coalition

How many MS4s contributed to this report? ___

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 Analysis Workbook? ● Yes ○ No ○ NT

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

○ 09/2004 ● 03/2006 ○ NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? ● Yes ○ No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period? 1

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? ● Yes ○ No ○ NT

If Yes, how many public comments were received during this reporting period? 0

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? ● Yes ○ No

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

○ Notices of Violation	#		○ No Authority
○ Stop Work Orders	#		○ No Authority
○ Criminal Actions	#		○ No Authority
○ Termination of Contracts	#		○ No Authority
○ Administrative Fines	#		○ No Authority
○ Civil Penalties	#		○ No Authority
○ Administrative Orders	#		○ No Authority
○ Enforcement Actions or Sanctions	#		
○ Other	#		○ No Authority

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MS4 Annual Report Form

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SPDES ID: NYR20A070

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?** 1

2. **How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?** 1

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

4. **What percent of active construction sites were inspected more than once?** ○ NT
   0 %

5. **Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?** ● Yes ○ No ○ NT

6. **Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?** ● Yes ○ No ○ NT

   If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? ○ Yes ○ No

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

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MS4 Annual Report Form

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Name of MS4/Coalition: Village of Garden City

SPDES ID: NYR20A070

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department: Building Department

Address: 351 Stewart Avenue

City: Garden City NY Zip: 11530-

Phone: (516) 465-4040

○ Library

Address:

City: Zip: -

Phone: ( ) -

○ Other

Address:

City: Zip: -

Phone: ( ) -

○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

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MS4 Annual Report Form

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Name of MS4/Coalition: Village of Garden City

SPDES ID: NYR20A070

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.

The Village's Construction Site Storm Water Runoff Control program will provide equivalent protection to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activity. This includes reviewing SWPPPs submitted to the Village for projects disturbing an acre or greater of land.

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

The threshold for a SPDES General Permit for Stormwater Discharges from Construction Activity is rarely met within the Village. The Village has chosen to evaluate the number of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Village's compliance with the Construction Site Storm Water Runoff Control program requirements. There was one SWPPPs submitted to the Village for review in this reporting period.

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

1

(ex.: samples/participants/events)

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

● Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

● Yes ○ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village plans to continue evaluating the percent of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Village's compliance with the Construction Site Storm Water Runoff Control program requirements in the next reporting cycle. The Village will review SWPPPs as they are submitted to the Village for comment and approval.

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MS4 Annual Report Form

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Name of MS4/Coalition: Village of Garden City

SPDES ID: NYR20A070

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	0	0	0
● Filter Systems	0	0	0
● Infiltration Basins	0	0	0
● Open Channels	0	0	0
● Ponds	0	0	0
● Wetlands	0	0	0
● Other	161		

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:

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MS4 Annual Report Form

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Name of MS4/Coalition: Village of Garden City

SPDES ID: NYR20A070

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

○ Yes ● No

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

○ Yes ● No

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

○ Yes ● No

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

0

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

40 %

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MS4 Annual Report Form

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Name of MS4/Coalition: Village of Garden City

SPDES ID: NYR20A070

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.

The Village Post-Construction Storm Water Management program will address storm water runoff from regulated (i.e., land disturbances of an acre or greater) new development and redevelopment projects to the Village's municipal separate storm sewer system.

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

The threshold for a SPDES General Permit for Stormwater Discharges from Construction Activity is rarely met within the Village because almost the entire Village is developed and zoned to less than an acre. The Village will add BMPs to the inventory if they are constructed and plans to evaluate the number of BMPs inventoried as an indicator for measuring the overall effectiveness of the Village's compliance with the Post-Construction Storm Water Management program requirements.

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

1

(ex.: samples/participants/events)

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

● Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

● Yes ○ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village plans to continue evaluating the number of post-construction storm water management practices inventoried as an indicator for measuring the overall effectiveness of the Village's compliance with the Post-Construction Storm Water Management program requirements in the next reporting cycle. The Village will add BMPs to the inventory as necessary in the next reporting cycle.

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MS4 Annual Report Form

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Name of MS4/Coalition: Village of Garden City

SPDES ID: NYR20A070

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

● On behalf of an individual MS4
○ On behalf of a coalition

How many MS4s contributed to this report? ___

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.

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

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SPDES ID: NYR20A070

2. Provide the following information about municipal operations good housekeeping programs:

● Parking Lots Swept (Number of acres X Number of times swept)	# Acres	120
● Streets Swept (Number of miles X Number of times swept)	# Miles	800
● Catch Basins Inspected and Cleaned Where Necessary	#	
● Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#	
● 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 of times applied to the nearest tenth.)	# Acres	60.0

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

4. What was the date of the last training? 10 / / 2018

5. How many municipal employees have been trained in this reporting period? 3

6. What percent of municipal employees in relevant positions and departments receive stormwater management training? 50 %

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MS4 Annual Report Form

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SPDES ID: NYR20A070

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.

The Village Pollution Prevention and Good Housekeeping for Municipal Operations program will address operations that collect, store or release sediments, wastes and other potential storm water pollutants.

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

The Village has chosen to evaluate the number of catch basins inspected annually as an indicator for measuring the overall effectiveness of the Village's compliance with the Pollution Prevention and Good Housekeeping for Municipal Operations program requirements. ____ catch basins were inspected in the Village in this reporting period.

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

1

(ex.: samples/participants/events)

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

● Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

● Yes ○ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village plans to continue the ongoing catch basin inspection and cleaning schedule during the next reporting cycle. The Village will continue to follow the BMPs outlined in the NYSDEC Municipal Pollution Prevention and Good Housekeeping Assistance Document as necessary.