#### MS4 Annual Report Cover Page

MCC form for period ending March 9, 2023

| This cover page must be completed by the report prep | arer. |
|--|-------|
| Joint reports require only one cover page.           |       |

| SPI | DES | ID |   |   |   |   |   |   |
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#### **Choose one:**

|  | This | report | is l | being | submitted | on | behalf | of | an | individual | MS4. |
|--|------|--------|------|-------|-----------|----|--------|----|----|------------|------|
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Fill in SPDES ID in upper right hand corner.

| Name of MS4 |  |  |  |  |  |  |  |  |  |   |  |
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#### OR

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

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

| Name of Sing | gle Entity | 7 |  |  |  |  |  |  |  |  |  |  |  |
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#### OR

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

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

| Nan | ne c | of Co | oali | tion |  |  |  |  |  |  |  |  |  |  |   |  |   |
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# MS4 Annual Report Cover Page

MCC form for period ending March 9, 2023

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

| SPDES ID    | SPDES ID    | SPDES ID    |
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## MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2023

SPDES ID

| Name of MS4 Village of Asharoken  | NYR20A013             |
|---|-----------------------|
| Each MS4 must submit an MCC form.   |                       |
| Section 1 - MCC Identification Page   |                       |
| Indicate whether this MCC form is being submitted to certify endorseme  • An Annual Report for a single MS4 | ent or acceptance of: |
| ○ 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:  |                       |
|   |                       |
|   |                       |
|   |                       |

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2023

|  | CDD FIG YE                                     |
|--|--|
| Name of MS4 Village of Asharoken   | SPDES ID NYR20A013                             |
| Name of MS4 Village of Asharoken   |  |
| Section 2 - Contact Information  |  |
| Important Instructions - Please Read   |  |
| Contact information must be provided for <u>each</u> of the foll   | owing positions as indicated below:            |
| 1. Principal Executive Officer, Chief Elected Official or GP-0-08-002 Part VI.J).  | other qualified individual (per                |
| 2. Duly Authorized Representative (Information for this Authorized Representative is signing this form)  | contact must only be submitted if a Duly       |
| 3. The Local Stormwater Public Contact (required per G   | P-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).  |
| 4. The Stormwater Management Program (SWMP) Coordination/implementation of SWMP).  | rdinator (Individual responsible for           |
| 5. Report Preparer (Consultants may provide company n  | ame in the space provided).                    |
| A separate sheet must be submitted for each position filled by the same individual. If one individual fills m once and check all positions that apply to that individual | ultiple roles, provide the contact information |
| If a new Duly Authorized Representative is signing th  |  |
| provided and a signature authorization form, signed b  |  |
| Elected Official must be attached.   |  |
| For each contact, select all that apply:   |  |
| <ul> <li>Principal Executive Officer/Chief Elected Official</li> </ul>   |  |
| Ouly Authorized Representative   |  |
| <ul> <li>Local Stormwater Public Contact</li> </ul>  |  |
| O Stormwater Management Program (SWMP) Coordinator   |  |
| Report Preparer  |  |
| First Name MI I  | Last Name                                      |
| Thetrum  | Letica   |
| Title  |  |
| Mayor  |  |
| Address  |  |
| 1 Asharoken Avenue   |  |
| City Northport   | State Zip  NY 1 1 7 6 8 -                      |
|  | 111700   |
| eMail<br>mglennon@asharokenny.org  |  |
|  | County   |
|  | Suffolk  |

# MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2023

|                       |                   |        |        |         |        |       |       |       |       |       |      | -               |       | SPI  | DES      | ID       | ,        |       |           |       |       |     |
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| Name of MS4 Village   | of Asha           | roken  |        |         |        |       |       |       |       |       |      |                 |       | NY   | R2       | 0A       | 01:      | 3     |           |       |       |     |
| Section 3 - Part      | nor l             | Info   | rma    | tion    | 1      |       |       |       |       |       |      |                 |       |      |          |          |          |       |           |       |       |     |
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| Yes, complete in      | forma             | tion b | oelov  | V.      |        |       |       |       |       |       |      |                 |       |      |          |          |          |       |           |       |       |     |
| Submit a separa       |                   |        |        |         | rtner  | . Inf | forn  | natio | n pr  | ovi   | ded  | in o            | ther  | for  | ma       | its v    | vill     | not   | t be      | ,     |       |     |
| accepted. If you      | r MS <sup>2</sup> | 4 coo  | perat  | ed w    | vith a | a co  | aliti | on,   | subr  | nit ( | one  | shee            | t wi  | th   | the      | nai      | ne       | of t  | he        |       |       |     |
| coalition. It is n    |                   |        |        |         |        |       |       |       | eet   | for   | eac! | h MS            | 54 ir | 1 th | e c      | oal      | tio      | n.    |           |       |       |     |
| f No, proceed to S    | ection            | 4 - (  | Certif | icati   | ion S  | State | emei  | nt.   |       |       |      |                 |       |      |          |          |          |       |           |       |       |     |
| artner/CoalitionName  | ;                 |        |        |         | _      |       |       |       |       |       |      |                 |       |      |          |          |          | 1 1   |           |       |       |     |
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| artner/Coalition Name | e(con't           | .)     |        |         |        |       |       |       |       |       |      |                 | _     | SP   | DES      | S Pa     | rtne     | r ID  | - If      | app   | lical | ole |
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| What tasks/respons    | sibiliti          | ies ar | e sha  | red     | with   | this  | s par | rtnei | (e.g  | g. N  | IM:  | l Sch           | nool  | Pro  | ogr      | ams      | s or     | Μι    | ıltip     | ole ' | Tas   | ks  |
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| MM2                   |                   |        |        |         |        |       |       |       |       |       |      |                 |       |      |          |          |          |       |           |       |       |     |
| MM2                   |                   |        |        |         |        |       |       |       |       |       |      |                 |       |      |          |          |          |       |           |       |       |     |
| MM3                   |                   |        |        |         |        |       |       |       |       |       |      |                 |       |      | _        |          | _        |       | _         |       |       |     |
| MM4                   |                   |        |        |         |        |       |       |       |       |       |      |                 |       |      |          |          |          |       |           |       |       |     |
| MMS                   |                   |        |        |         |        |       |       |       |       |       |      |                 |       |      |          |          |          | 1     |           |       |       |     |
| MM5                   |                   |        |        |         |        |       |       |       |       |       |      |                 |       |      | <u> </u> | <u> </u> | _        |       | _         | _     |       |     |
| MM6                   |                   |        |        |         |        |       |       |       |       |       |      |                 |       |      |          |          |          |       |           |       |       |     |
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| Additional tasks/re   |                   |        |        |         |        |       |       |       |       |       |      |                 |       |      |          |          |          |       |           |       |       |     |
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# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 20 23

|   | SPDES ID   |
|---|--|
| Name of MS4 Village of Asharoken  | NYR20A013  |
| Section 4 - Certification Statement   |  |
| "I certify under penalty of law that this document and all attachment direction or supervision in accordance with a system designed to as properly gathered and evaluated the information submitted. Based persons who manage the system, or those persons directly responsite the information submitted is, the best of my knowledge and belief, aware that there are significant penalties for submitting false information and imprisonment for knowing violations." | on my inquiry of the person or ble for gathering the information, true, accurate, and complete. I am |
| This form must be signed by either a principal executive officer or authorized representative of that person as described in GP-0-08-0  |  |
| First Name Gregory  MI Last Name Letica  Title (Clearly print title of individual signing report)  Mayor  |  |
| Signature   |  |
|   | Date 0 / 0 /   |
| The annual report form and any attachments can be sent to the DE Form link below, or by sending it directly to: MS4compliance@deinclude the SPDES ID in the title and must be complete before hit   | ec.ny.gov. All submissions must  |
| Submit Form   |  |
| If unable to submit electronically, hardcopy submissions can be so  | ent to:  |
| Bureau of Water Compliance Division of Water 4th Floor 625 Broadway   |  |

Albany, New York 12233-3505

This report is being submitted for the reporting period ending March 9, |20|23|If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Village of Asharoken NYR20A013 Name of MS4/Coalition **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. O Yes O No If Yes, choose one of the following O Report(s) attached to the annual report O 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

This report is being submitted for the reporting period ending March 9, |20|23|

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Village of Asharoken NYR20A013 Name of MS4/Coalition 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: O Pesticide and Fertilizer Application Construction Sites Pet Waste Management General Stormwater Management Information Recycling O Household Hazardous Waste Disposal O Riparian Corridor Protection/Restoration O Illicit Discharge Detection and Elimination Trash Management Infrastructure Maintenance O Vehicle Washing O Smart Growth O Water Conservation O Storm Drain Marking Wetland Protection O Green Infrastructure/Better Site Design/Low Impact Development O None Other: Other

#### 2. Specific audiences targeted during this reporting period:

Industries

- Public Employees Contractors Residential Developers
- O General Public Businesses
- Other: Agricultural

Elected and Appointed Officials

Restaurants

This report is being submitted for the reporting period ending March 9, 20 23

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Village of Asharoken NYR20A013 Name of MS4/Coalition 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply: 9 #Trained Construction Site Operators Trained 2 # Mailings Direct Mailings # Locations O Kiosks or Other Displays # In List O List-Serves # In List O Mailing List O Newspaper Ads or Articles # Days Run O Public Events/Presentations # Attendees # Attendees O School Program # Days Run O TV Spot/Program Total # Distributed O Printed Materials: Locations (e.g. libraries, town offices, kiosks) Village Hall 1 Asharoken Ave 11768 Northport, NY Other: email material Provide specific web addresses - not home page. Continue on next page if additional space is O Web Page: needed. URL URL

This report is being submitted for the reporting period ending March 9, 2023

| Vi                                  | llage of Asharo | ken        |       |        |         |        |       |      |    | R2 |   | 13  |   |   |
|-------------------------------------|-----------------|------------|-------|--------|---------|--------|-------|------|----|----|---|-----|---|---|
| e of MS4/Coalition Web Page con't.: |                 | e specific | weh a | ddress | ses - 1 | not h  | ome   | nage |    |    |   |     |   |   |
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| RL                                  |                 |            |       |        |         |        |       |      |    |    |   |     |   |   |
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| RL                                  |                 |            |       |        |         |        |       |      |    |    |   |     |   |   |
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| RL                                  |                 |            |       |        |         |        |       |      |    |    |   |     |   | T |
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| JRL                                 |                 |            |       |        |         |        |       |      |    |    |   |     |   |   |
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| If submitting this form as part of a joint report on behalf of a coalition leave  | SPDES ID blank.                       |
|---|---------------------------------------|
| SPDES   |                                       |
|   | 0A013                                 |
| . Evaluating Progress Toward Measurable Goals MCM 1   |                                       |
| Use this page to report on your progress and project plans toward achieving meadentified in your Stormwater Management Program Plan (SWMPP), including a II.C.1. Submit additional pages as needed. | surable goals<br>requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the SWMPP in this  | s reporting period.                   |
| The building inspector informs contractors of the requirements for installation of material needed to minimize storm water runoff. Trash and recycle schedules arresidents.                         | of dry wells and<br>re emailed to     |
| B. Briefly summarize the observations that indicated the overall effectivene<br>Goal.   | ess of this Measurable                |
| Educating contractors and homeowners provides awareness and solutions to mi runoff.   | tigate storm water                    |
| C. How many times was this observation measured or evaluated in this rep  | oorting period?                       |
|   | (ex.: samples/participants            |
| 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 O No                            |
| F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).  | of this MCM during                    |
| We continue to provide education and awareness.   |                                       |
| •   |                                       |
|   |                                       |

This report is being submitted for the reporting period ending March 9, 20 23

| If submitting this form as part of a  | joint report on b | behalf o | of a coa |       |       | SPDES<br>S ID |             | blank.     |     |
|---|-------------------|----------|----------|-------|-------|---------------|-------------|------------|-----|
| Name of MS4/Coalition Village of Asharoken  |                   |          |          | D     | IYR.  | 20A01         | 3           |            |     |
| Minimum Control Mea   | sure 2. Pub       | olic In  | volve    | ement | /Pa   | rticip        | <u>atio</u> | <u>n</u>   |     |
| The information in this section is being repo   | rted (check one   | ):       |          |       |       |               |             |            |     |
| <ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed</li> </ul> | d to this report  | :?       |          |       |       |               |             |            |     |
| 1. What opportunities were provided development, evaluation and impro (SWMP) Plan during this reporting                 | ovement of the    | e Storr  | nwate    | r Man |       |               |             | ram        |     |
| O Cleanup Events  |                   |          |          |       | #     | Events        |             | 0          |     |
| O Comments on SWMP Received   |                   |          |          | i     | # Coi | mments        |             | 0          |     |
| O Community Hotlines  | Ph                | none#    | (        |       | )     |               | -           |            |     |
| Phone # ( 0 ) 0 -   | Ph                | none#    | (        |       | )     |               | -           |            |     |
| Phone # ( 0 ) 0 -   | Ph                | none#    | (        |       | )     |               | -           |            |     |
| Phone # ( 0 ) 0 -   | Pł                | none#    | (        |       | )     |               | -           |            |     |
| Phone # ( 0 ) 0 -   | Pł                | none#    | (        |       | )     |               | -           |            |     |
| Phone # ( 0 ) 0 -   | Pł                | none#    | (        |       | )     |               | -           |            |     |
| <ul><li>Community Meetings</li></ul>  |                   |          |          |       | # A1  | tendees       |             | 8          |     |
| ○ Plantings   |                   |          |          |       |       | Sq. Ft.       |             |            |     |
| O Storm Drain Markings  |                   |          |          |       | #     | # Drains      |             |            |     |
| O Stakeholder Meetings  |                   |          |          |       | # A   | ttendees      |             |            |     |
| O Volunteer Monitoring  |                   |          |          |       | #     | # Events      |             |            |     |
| Other:  |                   |          |          |       |       |               |             |            |     |
| 2. Was public notice of availability of Program (SWMP) Plan provided?   | f this annual r   | eport    | and S    | tormw | ater  | Mana          |             | ent<br>Yes | O N |
| ○ List-Serve  |                   |          |          |       | i     | # In List     |             |            |     |
| <ul><li>Newspaper Advertising</li></ul>   |                   |          |          |       | # D   | ays Run       |             | 10         |     |
| ○ TV/Radio Notices  |                   |          |          |       | # D   | ays Run       |             |            |     |
| • Other: Public Hearing held of   | n May 2nd         |          |          |       |       |               |             |            |     |
| O Web Page URL: Enter URL(s) on the f   | following two     | pages.   |          |       |       |               |             |            |     |

MCM 2 Page 1 of 6

This report is being submitted for the reporting period ending March 9, 2023

|        |          |       |         |       |       |     |      |      |     |     |    |      |             |     |     |     |     |     | S   | PDI | ES  | ID |     |     |   |   |   |
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| e of M | S4/Coal: | ition | Village | of A  | sharo | ken |      |      |     |     |    |      |             |     |     |     |     |     | 1   | 1YR | 20  | AC | 13  |     |   |   |   |
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| Pleas  | e provi  | ide s | peci    | fic a | add   | res | s(es | s) v | vhe | ere | no | tice | <b>e(s)</b> | cal | n b | e a | cce | sse | d - | not | t h | om | e p | age | • |   |   |
| JRL    |          |       |         |       |       |     |      |      |     |     |    |      |             |     |     |     |     |     |     |     |     |    |     |     |   |   |   |
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This report is being submitted for the reporting period ending March 9, 2023

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

SPDES ID

| ne of MS4/         | Coalitic | Villa      | age of | Asha | roker | 1   |     |    |     |      |      |    |     |    |    |     |     |       | NY  |    |    |    | 3    |  |  |
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| JRL                |          |            |        |      |       |     |     |    |     |      |      |    |     |    |    |     |     |       |     |    |    |    |      |  |  |
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| If submitting this form as part of a joint report on   |  |
|--|--|
| Name of MS4/Coalition Village of Asharoken   | SPDES ID NYR20A013                     |
|  | Lyangert Starmwater Managament         |
| 3. Where can the public access copies of this annual Program SWMP) Plan and submit comments on |  |
| Enter address/contact info and select radio button to  |  |
| whether comments may be submitted at that location   |  |
| O MS4/Coalition Office Department  | Annual Report SWMP Plan Comments       |
| Village Clerk  |  |
| Address  |  |
| 1 Asharoken Avenue City  | Zip                                    |
| Northport  | NY 1 1 7 6 8 -                         |
| Phone  |  |
| ( 6 3 1 ) 2 6 1 - 7 0 9 8  |  |
| O Library<br>Address   | ○ Annual Report ○ SWMP Plan ○ Comments |
|  |  |
| City   | Zip                                    |
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| Phone  |  |
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| • Web Page URL:  | ● Annual Report ○ SWMP Plan ● Comments |
| www.asharoken.com  |  |
|  |  |
|  |  |
| Please provide specific address of page where rep  | port can be accessed - not home page.  |
| • eMail  | © Comments                             |
| mglennon@asharokenny.org   |  |
|  |  |

This report is being submitted for the reporting period ending March 9, 2023

|  | SPDES ID                                     |
|--|--|
| Name of MS4/Coalition Village of Asharoken   | NYR20A013                                    |
| 4.a. If this report was made available on the internet, what date v  |  |
| Leave blank if this report was not posted on the internet.   | 0 4 / 2 1 / 2 0 2 3                          |
| 4.b. For how many days was/will this report be posted?   | 10   |
| 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 If Yes, what was the date of the meeting?  | period?                                      |
| If No, is one planned?   | ○ Yes ○ No                                   |
| 5.b. Was an Annual Report public meeting held for all MS4s conthis reporting period?   | ntributing to this report during  ● Yes ○ No |
| If No, is one planned for each?  | ○ Yes ○ No                                   |
| 6. Were comments received during this reporting period?  If Yes, attach comments, responses and changes made to SWMP in response to comments to this report. | ○ Yes • No                                   |

| If submitting this form as part of a joint report on benaif of a c  | SPDES ID  |
|---|---|
| Village of Asharoken  | NYR20A013   |
| Name of MS4/Coalition   |   |
|   |   |
| 7. Evaluating Progress Toward Measurable Goals MCM 2  |   |
| Use this page to report on your progress and project plans toward a dentified in your Stormwater Management Program Plan (SWMP) III.C.1. Submit additional pages as needed. | achieving measurable goals P), including requirements in Part |
| A. Briefly summarize the Measurable Goal identified in the SV   | WMPP in this reporting period.                                |
| Our building department reorts on current project sites and identif runoff prevention material.   | ies sites that require storm water                            |
| B. Briefly summarize the observations that indicated the overa  | all effectiveness of this Measurable                          |
| Reporting on monthly building inspector reports.  |   |
| C. How many times was this observation measured or evaluat  | ed in this reporting period?                                  |
|   | 5   |
|   | (ex.: samples/participants/                                   |
| D. Has your MS4 made progress toward this measurable goal   | • Yes • No  |
| E. Is your MS4 on schedule to meet the deadline set forth in the  |   |
| E. 15 your 19154 on schedule to meet the deadline set forth in the  | • Yes O No  |
| F. Briefly summarize the stormwater activities planned to me<br>the next reporting cycle (including an implementation sche  |   |
| Plan for future coastal clean-up activities and educated property of management.  | owners on recycling and trash                                 |
|   |   |
|   | 9   |

This report is being submitted for the reporting period ending March 9, 2023

| Name of MS4/Coalition Village of Asharoken   | NYR20A013   |
|--|---|
| Minimum Control Measure 3. I   | llicit Discharge Detection and Elimination                |
| The information in this section is being reported (c   | check one):   |
| <ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to the</li> </ul> |   |
| 1. Enter the number and approx. percent of   | of outfalls mapped: # %                                   |
| 2. How many of these outfalls have been so reporting period (outfall reconnaissance  | reened for dry weather discharges during this inventory)? |
| 3.a. What types of generating sites/sewershereporting period?  | ds were targeted for inspection during this               |
| O Auto Recyclers   | O Landscaping (Irrigation)                                |
| <ul> <li>Building Maintenance</li> </ul>   | ○ Marinas   |
| ○ Churches   | O Metal Plateing Operations                               |
| O Commercial Carwashes   | Outdoor Fluid Storage                                     |
| O Commercial Laundry/Dry Cleaners  | <ul> <li>Parking Lot Maintenance</li> </ul>               |
| O Construction Vehicle Washouts  | ○ Printing  |
| ○ Cross-Connections  | O Residential Carwashing                                  |
| O Distribution Centers   | ○ Restaurants   |
| ○ Food Processing Facilities   | O Schools and Universities                                |
| ○ Garbage Truck Washouts   | O Septic Maintenance                                      |
| ○ Hospitals  | <ul><li>Swimming Pools</li></ul>                          |
| O Improper RV Waste Disposal   | O Vehicle Fueling   |
| O Industrial Process Water   | O Vehicle Maint./Repair Shops                             |
| Other:   | ○ None  |
|  |   |
| O Sewersheds:  |   |
|  |   |

This report is being submitted for the reporting period ending March 9, 2023

|   | SPDES ID  |  |
|---|---|--|
| Name of MS4/Coalition Village of Asharoken  | NYR20A03  | L3   |
| 3.b. What types of illicit discharges have  | e been found during this reporting period                                       | ?  |
| O Broken Lines From Sanitary Sewer  | O Industrial Connections  |  |
| O Cross Connections   | ○ Inflow/Infiltration   |  |
| O Failing Septic Systems  | O Pump Station Failure  |  |
| O Floor Drains Connected To Storm Sewers  | O Sanitary Sewer Overflows  |  |
| O Illegal Dumping   | O Straight Pipe Sewer Discharges  |  |
| Other:  | ● None  |  |
| 4. How many illicit discharges/potenti reporting period?  | al illegal connections have been detected o                                     | during this  |
|   | een confirmed during this reporting perio                                       |  |
| 7. Has the storm sewershed mapping I If No, approximately what percent was                            | been completed in this reporting period? as completed in this reporting period? | ○ Yes ● No   |
| 8. Is the above information available in Is this information available on the If Yes, provide URL(s): |   | <ul><li>○ Yes</li><li>○ Yes</li><li>○ No</li></ul> |
| 1 1 1 0   | e where map(s) can be accessed - not home                                       | page.  |
| URL   |   |  |
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| If submitting this form as part of a joint report on bel | half of a coalition leave SPDES ID blank. |
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|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     | + | + |   |
|-----|--|---|---|--|---|---|----------|---|---|---|---|---|---|---|----------|---|---|---|---|----------|-----|---|---|---|
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   | <u> </u> |   |   |   |   |          |     |   | _ |   |
|     |  |   |   |  | _ |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
| JRL |  |   |   |  |   |   |          |   |   |   |   |   |   | 1 |          |   |   |   |   |          |     |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
| JRL |  |   |   |  |   | • |          |   |   |   |   |   |   |   |          |   |   |   |   |          | · · |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   | Ī | T        |   |   |   |   |          |     |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
| URL |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   | +        |   |   |   |   |          |     |   |   |   |
|     |  | + |   |  |   |   | <u> </u> |   | 1 | + |   | 1 | + |   | +        | + | + |   |   |          |     |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
| URL |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |
|     |  | _ | + |  | 1 | + |          | 1 |   |   | + | + | + | + | +        |   | + | 1 | + | <u> </u> |     |   |   | _ |
|     |  |   |   |  |   |   |          |   |   |   | 1 |   | 1 |   |          | _ |   | - |   |          |     |   |   |   |
|     |  |   |   |  |   |   |          |   |   |   |   |   |   |   |          |   |   |   |   |          |     |   |   |   |

our annually.

#### **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2023

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

| Name of MS4/Coalition Vill  | llage of Asharoken  | NYR20A013   |
|---|---|---|
| 12. Evaluating Progre   | ess Toward Measurable Goals MCM 3   |   |
| Use this page to report identified in your Stori III.C.1. Submit addition | t on your progress and project plans toward<br>mwater Management Program Plan (SWM<br>onal pages as needed. | l achieving measurable goals (PP), including requirements in Part |
| A. Briefly summarize  | e the Measurable Goal identified in the   | SWMPP in this reporting period.                                   |
| Our village property,   | parking lots and roadway are maintained a   | nd swept. Catch basins are cleaned                                |

SPDES ID

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

Cleaning out catch basins and sweeping streets reduces the storm water runoff significantly.

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 O No

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

• Yes O No

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

This report is being submitted for the reporting period ending March 9, 2023

| I sustained in the state of the |   |
|--|---|
| Name of MS4/Coalition Village of Asharoken   | SPDES ID<br>NYR20A013   |
| Minimum Control Measures 4 an  |   |
| Construction Site and Post-Construction  | on Control  |
| The information in this section is being reported (check one):   |   |
| <ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition         How many MS4s contributed to this report?     </li> </ul>  |   |
| 1a. Has each MS4 contributing to this report adopted a law, ordin mechanism that provides equivalent protection to the NYS SP Stormwater Discharges from Construction Activities?  | nance or other regulatory  DES General Permit for  • Yes • No |
| 1b. Has each Town, City and/or Village contributing to this report equivalent to a NYSDEC Sample Local Law for Stormwater Mediment Control through either an attorney certification or unallysis Workbook?   | Management and Erosion and                                    |
| If Yes, Towns, Cities and Villages provide date of equivalent NY   | S 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 Pla<br>reviewed in this reporting period?   | ans (SWPPPs) have been  |
| 4. Does your MS4/Coalition have a mechanism for receipt and comments related to construction SWPPPs?   | onsideration of public  ● Yes ○ No ○ NT                       |
| If Yes, how many public comments were received during this repe  | orting period?  |
| 5. Does your MS4/Coalition provide education and training for SWPPP process?   | 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:  |

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

This report is being submitted for the reporting period ending March 9, 2023

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

SPDES ID

| Village of Asharoken  | NYR20A013  |
|---|--|
| Name of MS4/Coalition   |  |
| Minimum Control Measure 4. Construction Site  | Stormwater Runoff Control  |
| The information in this section is being reported (check one):  |  |
| <ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this report?</li> </ul> |  |
| 1. How many construction projects have been authorized for during this reporting period?  | disturbances of one acre or more   |
| 2. How many construction projects disturbing at least one adduring this reporting period?   | cre were active in your jurisdiction                                     |
| 3. What percent of active construction sites were inspected d   | 1 0 0  |
| 4. What percent of active construction sites were inspected n   | 100 %  more than once?   |
| 5. Do all inspectors working on behalf of the MS4s contribution Construction Stormwater Inspection Manual?                              | ting to this report use the NYS  • Yes O No O NT                         |
| 6. Does your MS4/Coalition provide public access to Stormy (SWPPPs) of construction projects that are subject to MS                     | water Pollution Prevention Plans 4 review and approval?  • Yes • No • NT |
| If your MS4 is Non-Traditional, are SWPPPs of construct public review?  |  |
| If Yes, use the following page to identify location(s) where S  | SWPPPs can be accessed.  |

This report is being submitted for the reporting period ending March 9, 2023

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 Asharoken                         | SPDES ID NYR20A013                  |
|--|-------------------------------------|
| 6. con't.: Submit additional pages as needed.                      |                                     |
| MS4/Coalition Office     Department                                |                                     |
| Building Department  |                                     |
| Address  |                                     |
| 1 Asharoken Ave  |                                     |
| City Northport NY  | Zip 1 1 7 6 8 -                     |
| Phone ( 6 3 1 ) 2 6 1 - 7 0 9 8                                    |                                     |
| ○ Library  |                                     |
| Address  |                                     |
|  | 7:5                                 |
| City   | Zip                                 |
| Phone  |                                     |
| ( 0 ) 0 -  | ,                                   |
| Other  |                                     |
| Address  |                                     |
|  |                                     |
| City   | Zip                                 |
|  | 0 -                                 |
| Phone  |                                     |
|  |                                     |
| • Web Page URL(s): Please provide specific address where SWPP. URL | Ps can be accessed - not home page. |
| www.asharoken.com  |                                     |
|  |                                     |
|  |                                     |
| Imi  |                                     |
| URL  |                                     |
|  |                                     |
|  |                                     |
|  |                                     |

| If submitting this form as part of a joint report on behalf of a co-   |   |
|--|---|
| William of Askanakon   | SPDES ID<br>NYR20A013                                   |
| Name of MS4/Coalition Village of Asharoken   | NIRZUAUIS   |
| . Evaluating Progress Toward Measurable Goals MCM 4  |   |
|  | 1: :  |
| Use this page to report on your progress and project plans toward acidentified in your Stormwater Management Program Plan (SWMPP) III.C.1. Submit additional pages as needed.                            | ), including requirements in Part                       |
| A. Briefly summarize the Measurable Goal identified in the SW  | MPP in this reporting period.                           |
| Our building department requires contractors to install the necessary<br>material as needed at job sites. The building department reviewed a<br>applications that required some form of erosion control. | y erosion and sediment control approximately 5 building |
| B. Briefly summarize the observations that indicated the overal Goal.  |   |
| Provinding notes and performing inspections on projects that requireduce storm water runoff.   | re crosion control measures neips                       |
| C. How many times was this observation measured or evaluate  | d in this reporting period?                             |
| •  | 15  |
|  | (ex.: samples/participants,                             |
| D. Has your MS4 made progress toward this measurable goal of   | during this reporting period?  • Yes • No               |
| E. Is your MS4 on schedule to meet the deadline set forth in the   |   |
| F. Briefly summarize the stormwater activities planned to mee<br>the next reporting cycle (including an implementation sched   | et the goals of this MCM during                         |
| Continue to maintain our practices, educate our contractors and we department to ensure erosion control measures are being met.  | ork together with our police                            |
|  |   |

This report is being submitted for the reporting period ending March 9, 2023

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

SPDES ID

| Name of MS4/Coalition  | Village of Asharoken                 |                                  |                                | NYR20A                              | A013              |
|--|--------------------------------------|----------------------------------|--------------------------------|-------------------------------------|-------------------|
|  |                                      |                                  | ~                              |                                     | D. (1)            |
| Minimum (  | Control Meas                         | sure 5. Post                     | -Constructio                   | n Stormwater                        | <u>Management</u> |
|  |                                      | . 1/1                            | 1 \                            |                                     |                   |
| The information in thi   |                                      | g reported (che                  | ck one):                       |                                     |                   |
| <ul><li>On behalf of an ind</li><li>On behalf of a coal</li><li>How ma</li></ul>   |                                      | ibuted to this                   | report?                        |                                     |                   |
| 1. How many and w<br>MS4/Coalition in  | what type of pos<br>eventoried, insp | t-construction<br>ected and main | stormwater mantained in this r | nnagement practice eporting period? | es has your       |
|  |                                      | #<br>Inventoried                 | #<br>Inspections               | # Times<br>Maintained               |                   |
| O Alternative Practice   | es                                   |                                  |                                |                                     |                   |
| O Filter Systems   |                                      |                                  |                                |                                     |                   |
| • Infiltration Basins  |                                      | 9                                | 6                              | 2                                   |                   |
| Open Channels  |                                      |                                  |                                |                                     |                   |
| ○ Ponds  |                                      |                                  |                                |                                     |                   |
| O Wetlands   |                                      |                                  |                                |                                     |                   |
| Other  |                                      |                                  |                                |                                     |                   |
| 2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance? |                                      |                                  |                                |                                     |                   |
| 3. What types of a Development/E   |                                      |                                  |                                |                                     | Impact            |
| <ul><li>Building Codes</li></ul>   | O Municipal C                        | comprehensive                    | Plans                          |                                     |                   |
| Overlay Districts  | Open Space Preservation Program      |                                  |                                |                                     |                   |
| <ul><li>Zoning</li></ul>   | • Local Law or Ordinance             |                                  |                                |                                     |                   |
| ○ None   | • Land Use R                         | egulation/Zonii                  | ng                             |                                     |                   |
| O Watershed Plans  | Other Comp                           | rehensive Plan                   |                                |                                     |                   |
| Other:   |                                      |                                  |                                |                                     |                   |

This report is being submitted for the reporting period ending March 9, 20 23

| Name of MS4/Coalition Village of Asharoken  | SPDES ID NYR20A013                       |
|---|--|
| 4a. Are the MS4s contributing to this report involved in a regional/wate  | ershed wide planning effort?  O Yes • No |
| 4b. Does the MS4 have a banking and credit system for stormwater man  |  |
| 4c. Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormw   | le a protocol for evaluation             |
| 4d. How many stormwater management practices have been implement reporting period?  | ted as part of this system in this       |
| 5. What percent of municipal officials/MS4 staff responsible for progr training on Low Impace Development (LID), Better Site Design (BS Infrastructure principles in this reporting period? |  |

| If submitting this form as part of a joint report on behalf of a c  | coalition leave SPDES ID blank.                                 |
|---|---|
|   | SPDES ID  |
| Name of MS4/Coalition Village of Asharoken  | NYR20A013   |
| 6. Evaluating Progress Toward Measurable Goals MCM 5  |   |
| Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed. | achieving measurable goals P), including requirements in Part   |
| A. Briefly summarize the Measurable Goal identified in the SV   | WMPP in this reporting period.                                  |
| Post construction projects: the building inspector reviews installat and erosion control throughout the project. Final inspections ensuraccording to approved plans.        | ion of drywells, swimming pools re that the project was build   |
| B. Briefly summarize the observations that indicated the over Goal.   | all effectiveness of this Measurable                            |
| Site inspections ensure erosion control measures are being mainta once a year and cleaned externally 6 times per year.  | ined. Catch basins are cleaned out                              |
| C. How many times was this observation measured or evaluate   | ted in this reporting period?  [ex.: samples/participants/event |
| D. Has your MS4 made progress toward this measurable goal   |   |
| D. Has your 19154 made progress toward this measurable goal   | • Yes O No  |
| E. Is your MS4 on schedule to meet the deadline set forth in t  | he SWMPP?  ● Yes ○ No   |
| F. Briefly summarize the stormwater activities planned to me<br>the next reporting cycle (including an implementation sche  | eet the goals of this MCM during                                |
| Monitor storm water related projects and catch basin maintenance  |   |
|   |   |

On behalf of an individual MS4

How many MS4s contributed to this report?

On behalf of a coalition

#### **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2023

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 Asharoken                   | NYR20A013                           |
|--|-------------------------------------|
| Minimum Control Measure 6. Stormwater                        | Management for Municipal Operations |
| The information in this section is being reported (check one | e):                                 |

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

Self-Assessment
Operation/Activity/Facility
performed within the past 3

SPDFS ID

| perior med within the pas                    |              |         | the past 5 |               |
|--|--------------|---------|------------|---------------|
| Operation/Activity/Facility                  | Addressed in | n SWMP? | years?     | -             |
| Street Maintenance                           | • Yes        | ○ No    | • Yes      | $\bigcirc$ No |
| Bridge Maintenance                           | O Yes        | ○ No    | O Yes      | $\bigcirc$ No |
| Winter Road Maintenance                      |              | ○ No    | • Yes      | $\bigcirc$ No |
| Salt Storage                                 | O Yes        | ○ No    | O Yes      | $\bigcirc$ No |
| Solid Waste Management                       |              | ○ No    | • Yes      | $\bigcirc$ No |
| New Municipal Construction and Land Disturba |              | ○ No    | • Yes      | $\bigcirc$ No |
| Right of Way Maintenance                     |              | ○ No    | • Yes      | $\bigcirc$ No |
| Marine Operations                            | A X 7        | ○ No    | • Yes      | $\bigcirc$ No |
| Hydrologic Habitat Modification              | 0            | ○ No    | O Yes      | $\bigcirc$ No |
| Parks and Open Space                         | O * * *      | • No    | O Yes      | No            |
| Municipal Building                           | ■ X 7        | ○ No    | • Yes      | $\bigcirc$ No |
| Stormwater System Maintenance                |              | ○ No    | • Yes      | $\bigcirc$ No |
| Vehicle and Fleet Maintenance                | A T.         | ○ No    | • Yes      | $\bigcirc$ No |
| Other  | O Voc        | ○ No    | ∴ ○ Yes    | ○ No          |
| Omer   |              |         |            |               |

This report is being submitted for the reporting period ending March 9, 2023

| Name of MS4/Coalition Village of Asharoken  | SPDES ID NYR20A01 | 3       |        |  |  |  |
|---|-------------------|---------|--------|--|--|--|
| 2. Provide the following information about municipal operations go  | od housekeep      | ing pro | grams: |  |  |  |
| <ul><li>Parking Lots Swept (Number of acres X Number of times swept)</li></ul>  | # Acres           | 2       |        |  |  |  |
| • Streets Swept (Number of miles X Number of times swept)   | # Miles           | 12      |        |  |  |  |
| <ul> <li>Catch Basins Inspected and Cleaned Where Necessary</li> </ul>  | #                 | 8       |        |  |  |  |
| <ul> <li>Post Construction Control Stormwater Management Practices<br/>Inspected and Cleaned Where Necessary</li> </ul>               | #                 |         |        |  |  |  |
| O Phosphorus Applied In Chemical Fertilizer   | # Lbs.            |         |        |  |  |  |
| O Nitrogen Applied In Chemical Fertilizer   | # Lbs.            |         |        |  |  |  |
| O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.) | 11 1 101 00       | 0 1     |        |  |  |  |
| 3. How many stormwater management trainings have been provided to municipal employees during this reporting period?                   |                   |         |        |  |  |  |
| 4. What was the date of the last training?  | /                 | /       |        |  |  |  |
| 5. How many municipal employees have been trained in this reporti   | ing period?       |         | 0      |  |  |  |
| 6. What percent of municipal employees in relevant positions and d stormwater management training?                                    | epartments r      | eceive  | %      |  |  |  |

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

|  | SPDES ID  |
|--|---|
| Name of MS4/Coalition Village of Asharoken   | NYR20A013   |
| 7. Evaluating Progress Toward Measurable Goals MCM 6   | achieving mangurable goals  |
| Use this page to report on your progress and project plans toward adentified in your Stormwater Management Program Plan (SWMFIII.C.1. Submit additional pages as needed. | PP), including requirements in Part                                       |
| A. Briefly summarize the Measurable Goal identified in the S   | WMPP in this reporting period.  |
| Communicate storm water and erosion control measures with all property owners.   | departments, contractors and  |
| B. Briefly summarize the observations that indicated the over Goal.  | rall effectiveness of this Measurable                                     |
| Maintain our catch basins, streets, parking areas, support program wetlands. We observed this 11 times during this period.   | ns that clean our beaches and   |
| C. How many times was this observation measured or evalua  | ited in this reporting period?  |
|  |   |
| D. Has your MS4 made progress toward this measurable goa   | (ex.: samples/participants/enal 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 m the next reporting cycle (including an implementation sch  | eet the goals of this MCM during  |
| Goals for next reporting cycle are to continue the work we are do Maintain our streets and continue to communicate erosion control                                       | oing to mitigate storm water runoff.                                      |
|  |   |

This report is being submitted for the reporting period ending March 9, 2023

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

|                       |                      | SPDES ID  |
|-----------------------|----------------------|-----------|
| Name of MS4/Coalition | Village of Asharoken | NYR20A013 |
|                       |                      |           |

#### Additional Watershed Improvement Strategy Best Management Practices

| MS4 Description         Answer         Check NA           NYC EOH Watershed         -         -           Traditional Land Use         1,2,3,4,5,6,7a-d,8a,8b,9         10,11,12           Traditional Non-Land Use         1,2,3,4,7a-d,8a,8b,9         5,10,11,12           Non-Traditional         1,2,77a-d,8a,8b,9         3,4,5,10,11,12           Onondaga Lake Watershed         -         -           Traditional Land Use         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Traditional Non-Land Use         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Greenwood Lake Watershed         -         -           Traditional Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12           Traditional Non-Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12  | Phosphorus Phosphorus Phosphorus - Phosphorus | -<br>,12<br>11,12<br>,10,11,12  | 1,2,3,4,5,6,7a-d,8a,8b,9<br>1,2,3,4,7a-d,8a,8b,9 | NYC EOH Watershed<br>raditional Land Use         |
|--|---|---|--|--|
| □ Traditional Land Use         1,2,3,4,5,6,7a-d,8a,8b,9         10,11,12           □ Traditional Non-Land Use         1,2,3,4,7a-d,8a,8b,9         5,10,11,12           □ Non-Traditional         1,2,77a-d,8a,8b,9         3,4,5,10,11,12           □ Traditional Land Use         -         -           □ Traditional Non-Land Use         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           □ Non-Traditional         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           □ Traditional Land Use         1,4,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           □ Traditional Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12           □ Traditional Non-Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12  | Phosphorus<br>Phosphorus                      | 11,12   | 1,2,3,4,7a-d,8a,8b,9                             | raditional Land Use                              |
| Traditional Non-Land Use         1,2,3,4,7a-d,8a,8b,9         5,10,11,12           Non-Traditional         1,2,77a-d,8a,8b,9         3,4,5,10,11,12           Onondaga Lake Watershed         -         -           Traditional Land Use         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Traditional Non-Land Use         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Non-Traditional         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Greenwood Lake Watershed         -         -           Traditional Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12           Traditional Non-Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12   | Phosphorus<br>Phosphorus                      | 11,12   | 1,2,3,4,7a-d,8a,8b,9                             |  |
| Non-Traditional   1,2,77a-d,8a,8b,9   3,4,5,10,11,12     Onondaga Lake Watershed   -   -     Fraditional Land Use   1,6,7a-d,8a,9   2,3,4,5,8b,10,11,12     Fraditional Non-Land Use   1,6,7a-d,8a,9   2,3,4,5,8b,10,11,12     Non-Traditional   1,6,7a-d,8a,9   2,3,4,5,8b,10,11,12     Greenwood Lake Watershed   -   -     Fraditional Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12     Fraditional Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,1 | Phosphorus                                    | ,10,11,12   |  | raditional Non-Land Use                          |
| Onondaga Lake Watershed         -         -           Fraditional Land Use         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Fraditional Non-Land Use         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Non-Traditional         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Greenwood Lake Watershed         -         -           Fraditional Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12           Fraditional Non-Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12   | -   | -   | 1.2.77a-d.8a.8b.9                                |  |
| Graditional Land Use     1,6,7a-d,8a,9     2,3,4,5,8b,10,11,12       Graditional Non-Land Use     1,6,7a-d,8a,9     2,3,4,5,8b,10,11,12       Non-Traditional     1,6,7a-d,8a,9     2,3,4,5,8b,10,11,12       Greenwood Lake Watershed     -     -       Graditional Land Use     1,4,6,7a-d,8a,9     2,3,5,8b,10,11,12       Graditional Non-Land Use     1,4,6,7a-d,8a,9     2,3,5,8b,10,11,12   | Phosphorus                                    |   | -,-,   |  |
| Traditional Non-Land Use         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Non-Traditional         1,6,7a-d,8a,9         2,3,4,5,8b,10,11,12           Greenwood Lake Watershed         -         -           Traditional Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12           Traditional Non-Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12  |   | ,5,8b,10,11,12  | 1,6,7a-d,8a,9                                    | 0  |
| International   1,6,7a-d,8a,9   2,3,4,5,8b,10,11,12     Creational Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12     Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   2,3,5,8b,10,11,12   Creational Non-Land Use   1,4,6,7a-d,8a,9   Creational Non-Land Use   Creational Non-Land Use   1,4,6,7a-d,8a,9   Creational Non-Land Use   Creational Non-Land Use  | Phosphorus                                    |   |  |  |
| Greenwood Lake Watershed         -         -           Fraditional Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12           Fraditional Non-Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12   | Phosphorus                                    |   | Park Indian a Real A                             |  |
| Traditional Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12           Traditional Non-Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12  | -   | -   | -  |  |
|  | Phosphorus                                    | ,8b,10,11,12  | 1,4,6,7a-d,8a,9                                  | raditional Land Use                              |
| 22501 10 11 12   | Phosphorus                                    | ,8b,10,11,12  | 1,4,6,7a-d,8a,9                                  | raditional Non-Land Use                          |
| Non-Traditional 1,4,6,/a-d,8a,9 2,3,5,8b,10,11,12  | Phosphorus                                    | ,8b,10,11,12  | 1,4,6,7a-d,8a,9                                  | Ion-Traditional                                  |
| Oyster Bay -   | -   | -   | -  | Oyster Bay                                       |
| Fraditional Land Use 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b   | Pathogens                                     | ,6,8a,8b  | 1,4,7a-d,9,10,11,12                              |  |
| Fraditional Non-Land Use 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b   | Pathogens                                     | ,6,8a,8b  | 1,4,7a-d,9,10,11,12                              | raditional Non-Land Use                          |
| Non-Traditional 1,4,7a-d,9 2,3,4,5,8a,8b,10,11,12  | Pathogens                                     | ,5,8a,8b,10,11,12   | 1,4,7a-d,9                                       | lon-Traditional                                  |
| Peconic Estuary -  | -   | -   |  | Peconic Estuary                                  |
| Trackford Edite Cov  | Pathogens and Nitrogen                        | A Contract of the Contract of | 1,4,7a-d,8a,9,10,11,12                           | raditional Land Use                              |
| Tructional I ton Baile 600   | Pathogens and Nitrogen                        |   |  | raditional Non-Land Use                          |
| Non-Traditional 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12  | Pathogens and Nitrogen                        | -,5,8b,10,11,12   | 1,4,7a-d,8a,9                                    | Jon-Traditional                                  |
| Oscawana Lake Watershed  | - DI I  | -   | -  |  |
| Fraditional Land Use 1.4.6.7a-d.8a.9 2,3,5,8b,10,11,12   |   |   |  |  |
|  |   | TOWN TOWNS IN A TOWN  | 1,4,6,7a-d,8a,9                                  |  |
| Traditional Non-Land Use 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12   | Phosphorus                                    | ,8b,10,11,12  |  |  |
| Traditional Non-Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12           Non-Traditional         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12   | Phosphorus                                    | ,8b,10,11,12  |  |  |
| Traditional Non-Land Use       1,4,6,7a-d,8a,9       2,3,5,8b,10,11,12         Non-Traditional       1,4,6,7a-d,8a,9       2,3,5,8b,10,11,12         LI 27 Embayments       -  | Phosphorus<br>-                               | ,8b,10,11,12<br>,8b,10,11,12  | 1,4,6,7a-d,8a,9                                  | LI 27 Embayments                                 |
| Traditional Non-Land Use         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12           Non-Traditional         1,4,6,7a-d,8a,9         2,3,5,8b,10,11,12   | Phosphorus                                    | ,8b,10,11,12<br>,8b,10,11,12<br>-<br>ga,8b  | 1,4,6,7a-d,8a,9<br>-<br>1,2,3,4,7a-d,9,10,11,12  | LI 27 Embayments  Traditional Land Use           |
|  | Phosphorus                                    | of 10 11 12   | 1,4,6,7a-d,8a,9<br>1,4,6,7a-d,8a,9               | Traditional Land Use<br>Traditional Non-Land Use |

This report is being submitted for the reporting period ending March 9, 2023

|     |   |                                       |                                 |                 | SPDES ID  |            |            |
|-----|---|---------------------------------------|---------------------------------|-----------------|---|------------|------------|
| Nam | e of MS4/Coalition  | Villlage of Asharoken                 |                                 |                 | NYR20A01  | 3          |            |
|     |   | Coalition have a<br>ce Plan Program   |                                 | Conveyance Sys  | tem (infrastructu<br>○ Yes                                  | re) Inspo  | ection N/A |
|     |   | rcentage of on-si<br>or rehabilitated |                                 |                 | ms that have been period?                                   | n inspect  | ted %      |
| ]   | NYSDEC SPDE<br>(GP-0-08-001) to   | S General Perm                        | nit for Stormw<br>nts in stormw | ater Discharges | protection equival<br>from Construction<br>construction act | on Activi  | ities      |
| 1   | 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 |                                       |                                 |                 |   |            |            |
|     |   | Coalition have a rogen/pathogen       |                                 | orogram to redu | ce erosion or  O Yes  | ○ No       | • N/A      |
| 7b. | How many proj   | ects have been si                     | ited in this rep                | porting period? |   |            | 0          |
| 7c. | What percent o  | f the projects inc                    | cluded in 7b h                  | ave been comple | eted in this report   | ting perio | od?        |
| 7d. | What percent o  | f projects planne                     | ed in previous                  | years have been | completed?  | 100        | %          |
|     |   |                                       |                                 |                 | • No  | Projects   | Planned    |
|     |   | _                                     |                                 |                 | anagement pract<br>on municipally o<br>○ Yes                |            | • N/A      |
|     | -   | cy that addresse                      |                                 |                 | nanagement pract<br>pings and leaves<br>O Yes               |            | • N/A      |

This report is being submitted for the reporting period ending March 9, 2023

|  | PDES ID<br>YR20A01 | 3    |           |
|--|--------------------|------|-----------|
| 9. Has your MS4/Coalition developed and implemented a program of n                                 |                    |      | O N/A     |
| 10. Has your MS4/Coalition enacted a local law prohibiting pet waste on prohibiting goose feeding? |                    |      | rties and |
| 11. Does your MS4/Coalition have a pet waste bag program?  | ○ Yes              | • No | O N/A     |
| 12. Does your MS4/Coalition have a program to manage goose populations?                            | ○ Yes              | • No | O N/A     |