## **MS4 Annual Report Cover Page**

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

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

| SPI | DES | ID |   |   |   |   |   |   |
|-----|-----|----|---|---|---|---|---|---|
| N   | Y   | R  | 2 | 0 | A | 3 | 5 | 0 |

#### **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

| V | li  | 1 | 1 | а | a | e | 0 | f | S | h | 0 | r | e | h | а | m |  |  |  |  |  |  |
|---|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|--|--|--|--|
| L | 1 - | _ | _ | 3 | ש | ) | ) | _ |   |   |   | _ | ) |   | a |   |  |  |  |  |  |  |

#### OR

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

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

| 1 | Nar | ne c | of S1 | ngle | e En | ıtıty |  |  |  |  |  |  |  |  |  |  |  |   |  |
|---|-----|------|-------|------|------|-------|--|--|--|--|--|--|--|--|--|--|--|---|--|
|   |     |      |       |      |      |       |  |  |  |  |  |  |  |  |  |  |  |   |  |
|   |     |      |       |      |      |       |  |  |  |  |  |  |  |  |  |  |  | 1 |  |

### **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.

| Nar | ne c | of Co | oali | tion |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-----|------|-------|------|------|--|--|--|--|--|--|--|--|--|--|--|--|--|
|     |      |       |      |      |  |  |  |  |  |  |  |  |  |  |  |  |  |
|     |      |       |      |      |  |  |  |  |  |  |  |  |  |  |  |  |  |
|     |      |       |      |      |  |  |  |  |  |  |  |  |  |  |  |  |  |

|     |     |    |   |   |   |  | <br> |   |    | _  | _  |   | $\perp$ |   | $\perp$ |  |     |     |    |   |   |   |  |
|-----|-----|----|---|---|---|--|------|---|----|----|----|---|---------|---|---------|--|-----|-----|----|---|---|---|--|
|     |     |    |   |   |   |  |      |   |    |    |    |   |         |   |         |  |     |     |    |   |   |   |  |
| SPI | DES | ID |   |   |   |  |      | S | PD | ES | ID |   |         |   |         |  | SPI | DES | ID |   |   |   |  |
| N   | Y   | R  | 2 | 0 | A |  |      | 1 | 1  | Y  | R  | 2 | 0       | А |         |  | N   | Y   | R  | 2 | 0 | А |  |
| SPI | DES | ID |   |   |   |  |      | S | PD | ES | ID |   |         |   |         |  | SPI | DES | ID |   |   |   |  |
| N   | Y   | R  | 2 | 0 | A |  |      | 1 | 1  | Y  | R  | 2 | 0       | A |         |  | N   | Y   | R  | 2 | 0 | A |  |
| SPI | DES | ID |   |   |   |  | _    | S | PD | ES | ID |   |         |   |         |  | SPI | DES | ID |   |   |   |  |
| N   | Y   | R  | 2 | 0 | A |  |      | 1 | 1  | Y  | R  | 2 | 0       | А |         |  | N   | Y   | R  | 2 | 0 | A |  |
| SPI | DES | ID |   |   |   |  |      | S | PD | ES | ID |   |         |   |         |  | SPI | DES | ID |   |   |   |  |
| N   | Y   | R  | 2 | 0 | A |  |      | 1 | 1  | Y  | R  | 2 | 0       | А |         |  | N   | Y   | R  | 2 | 0 | A |  |
| SPI | DES | ID |   |   |   |  |      | S | PD | ES | ID |   |         |   |         |  | SPI | DES | ID |   |   |   |  |
| N   | Y   | R  | 2 | 0 | A |  |      | 1 | 1  | Y  | R  | 2 | 0       | A |         |  | N   | Y   | R  | 2 | 0 | A |  |
| SPI | DES | ID |   |   |   |  |      | S | PD | ES | ID |   |         |   |         |  | SPI | DES | ID |   |   |   |  |
| N   | Y   | R  | 2 | 0 | A |  |      | 1 | 1  | Υ  | R  | 2 | 0       | Α |         |  | N   | Y   | R  | 2 | 0 | A |  |

# MS4 Annual Report Cover Page

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

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

| SPDES ID    | SPDES ID    | SPDES ID    |
|-------------|-------------|-------------|
| N Y R 2 O A | N Y R 2 O A | NYR20A      |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 O A | N Y R 2 0 A | N Y R 2 O A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 O A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |
| SPDES ID    | SPDES ID    | SPDES ID    |
| N Y R 2 0 A | N Y R 2 0 A | N Y R 2 0 A |

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

|             |                     | SPL | )ES | ID |   |   |   |   |   |   |
|-------------|---------------------|-----|-----|----|---|---|---|---|---|---|
| Name of MS4 | Village of Shoreham | N   | Y   | R  | 2 | 0 | A | 3 | 5 | 0 |

Each MS4 must submit an MCC form.

## **Section 1 - MCC Identification Page**

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

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- O A Joint Report

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

| If Jo | oint | Rep | ort, | ent | er c | oali | tion | nai | ne: |  |  |  |  |  |  |  |  |  |   |
|-------|------|-----|------|-----|------|------|------|-----|-----|--|--|--|--|--|--|--|--|--|---|
|       |      |     |      |     |      |      |      |     |     |  |  |  |  |  |  |  |  |  |   |
|       |      |     |      |     |      |      |      |     |     |  |  |  |  |  |  |  |  |  |   |
|       |      |     |      |     |      |      |      |     |     |  |  |  |  |  |  |  |  |  |   |
|       |      |     |      |     |      |      |      |     |     |  |  |  |  |  |  |  |  |  |   |
|       |      |     |      |     |      |      |      |     |     |  |  |  |  |  |  |  |  |  | = |
|       |      |     |      |     |      |      |      |     |     |  |  |  |  |  |  |  |  |  | ' |
|       |      |     |      |     |      |      |      |     |     |  |  |  |  |  |  |  |  |  |   |

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

|                                 | SPL | DES | ID |   |   |   |   |   |   |
|---------------------------------|-----|-----|----|---|---|---|---|---|---|
| Name of MS4 Village of Shoreham | N   | Y   | R  | 2 | 0 | А | 3 | 5 | 0 |

#### **Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

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

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

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

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

| First Name           | MI Last Name                       |
|----------------------|------------------------------------|
| Brian                | C Vail                             |
| Title                |                                    |
| M a y o r            |                                    |
| Address              |                                    |
| P.O. BOX 389         |                                    |
|                      |                                    |
| City                 | State Zip                          |
| City S h o r e h a m | State Zip  N Y 1 1 7 8 6 - 0 3 8 9 |
|                      |                                    |
| Shoreham<br>eMail    |                                    |
| Shoreham<br>eMail    | N Y 1 1 7 8 6 - 0 3 8 9            |

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

|             |                     | SPI | DES | ID |   |   |   |   |   |   |
|-------------|---------------------|-----|-----|----|---|---|---|---|---|---|
| Name of MS4 | Village of Shoreham | N   | Y   | R  | 2 | 0 | А | 3 | 5 | 0 |

#### **Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

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

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

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

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

| First Name      | MI Last Name            |
|-----------------|-------------------------|
| E d w a r d     | Brickley                |
| Title           |                         |
| Trustee         |                         |
| Address         |                         |
| P.O. BOX 389    |                         |
|                 |                         |
| City            | State Zip               |
| City Shoreham   | State Zip    N Y        |
|                 |                         |
| Shoreham        |                         |
| Shoreham  eMail | N Y 1 1 7 8 6 - 0 3 8 9 |

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

|             |                     | SPI | DES | ID |   |   |   |   |   |   |
|-------------|---------------------|-----|-----|----|---|---|---|---|---|---|
| Name of MS4 | Village of Shoreham | N   | Y   | R  | 2 | 0 | А | 3 | 5 | 0 |

#### **Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

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

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

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

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

| Firs | st Na    | ame |   |   |        |        |        |   |   |   |   |   |   |   |   | MI |   | Las      | t Na | ame |       |     |     |   |   |   |   |            |   |   |   |
|------|----------|-----|---|---|--------|--------|--------|---|---|---|---|---|---|---|---|----|---|----------|------|-----|-------|-----|-----|---|---|---|---|------------|---|---|---|
| L    | a        | W   | r | е | n      | С      | е      |   |   |   |   |   |   |   |   |    |   | K        | 0    | g   | е     | 1   |     |   |   |   |   |            |   |   |   |
| Titl | le       |     |   |   |        |        |        |   |   |   |   |   |   |   |   |    |   |          |      |     |       |     |     |   |   |   |   |            |   |   |   |
| С    | 0        | m   | m | i | S      | S      | i      | 0 | n | е | r |   | 0 | f |   | Р  | u | b        | 1    | i   | С     |     | W   | 0 | r | k | S |            |   |   |   |
| Ad   | dres     | s   |   |   |        |        |        |   |   |   |   |   |   |   |   |    |   |          |      |     |       |     |     |   |   |   |   |            |   |   |   |
| P    |          | 0   |   |   | В      | 0      | x      |   | 4 | 3 |   |   |   |   |   |    |   |          |      |     |       |     |     |   |   |   |   |            |   |   |   |
| Cit  | y        |     |   |   |        |        |        |   |   |   |   |   |   |   |   |    |   |          |      | S   | tate  |     | Zip | ) |   |   |   |            |   |   |   |
| _    | I .      |     |   |   |        |        |        |   |   |   |   |   |   |   |   |    |   |          |      |     |       |     |     |   |   |   |   |            | _ |   |   |
| S    | h        | 0   | r | е | h      | а      | m      |   |   |   |   |   |   |   |   |    |   |          |      | 1   | 1 7   | Y   | 1   | 1 | 7 | 8 | 6 | _          | 0 | 4 | 3 |
| eM   |          | 0   | r | е | h      | a      | m      |   |   |   |   |   |   |   |   |    |   |          |      | 1   | 1   7 | Y   | 1   | 1 | 7 | 8 | 6 | _          | 0 | 4 | 3 |
|      |          | 0   | r | е | h<br>1 | a<br>@ | m<br>O | р | t | 0 | n | 1 | i | n | е |    | n | е        | t    | 1   | 1 .   | Y ] | 1   | 1 | 7 | 8 | 6 | ] <b>-</b> | 0 | 4 | 3 |
| eM   | ail<br>k |     |   |   |        |        |        | р | t | 0 | n | 1 | i | n | е | •  | n | e<br>Cou |      |     | 1 7   | Y   | 1   | 1 | 7 | 8 | 6 | ] <b>-</b> | 0 | 4 | 3 |

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

|             |                     | SPI | DES | ID |   |   |   |   |   |   |
|-------------|---------------------|-----|-----|----|---|---|---|---|---|---|
| Name of MS4 | Village of Shoreham | N   | Y   | R  | 2 | 0 | А | 3 | 5 | 0 |

#### **Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

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

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

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

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

| Firs  | t Na | ame |   |   |   |   |   |   |   |   |   |   |   |   |   | MI |   | Las | t Na | ıme |      |   |     |   |   |   |   |   |   |   |   |   |
|-------|------|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|-----|------|-----|------|---|-----|---|---|---|---|---|---|---|---|---|
| L     | •    | K   |   |   | M | С | L | е | а | n |   |   |   |   |   |    |   | А   | s    | s   | 0    | С | i   | a | t | е | s |   | Р | • | С | • |
| Title | 2    |     |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |     |      |     |      |   |     |   |   |   |   |   |   |   |   |   |
|       |      |     |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |     |      |     |      |   |     |   |   |   |   |   |   |   |   |   |
| Add   | lres | S   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |     |      |     |      |   |     |   |   |   |   |   |   |   |   |   |
| 4     | 3    | 7   |   | S | 0 | u | t | h |   | С | 0 | u | n | t | r | У  |   | R   | 0    | a   | d    |   |     |   |   |   |   |   |   |   |   |   |
| City  | 7    |     |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |     |      | Si  | tate |   | Zip |   |   |   |   |   |   |   |   |   |
| В     | r    | 0   | 0 | k | h | a | V | е | n |   |   |   |   |   |   |    |   |     |      | ľ   | 1 2  | Y | 1   | 1 | 7 | 1 | 9 | - |   |   |   |   |
| eMa   | ıil  |     |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |     |      |     |      |   |     |   |   |   |   |   |   |   |   |   |
| 1     | f    | С   | a | 1 | а | r | C | 0 | @ | 1 | k | m | а |   | С | 0  | m |     |      |     |      |   |     |   |   |   |   |   |   |   |   |   |
| Pho   | ne   |     |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | Cou | ınty |     |      |   |     |   |   |   |   |   |   |   |   |   |
| ,     |      | 1   | 1 |   | 1 | ı |   | I | 1 | 6 | 6 | 8 | l |   |   |    |   | S   |      |     |      | 0 |     |   |   |   |   |   |   |   |   |   |

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

|  |               |            |         |         |        |         |         | SPI     | DES    | ID    |       |        |        |       |
|--|---------------|------------|---------|---------|--------|---------|---------|---------|--------|-------|-------|--------|--------|-------|
| Name of MS4 Village of S                         | horeham       |            |         |         |        |         |         | N       | Y      | R 2   | 2 0   | A      | 3 5    | 0     |
| Section 3 - Partner                              | r Inform      | ation_     |         |         |        |         |         |         |        |       |       |        |        |       |
| Did your MS4 work with                           | partners/co   | alition to | complet | te some | or all | perm    | it requ | uirem   | ents   | duri  | ng th | is re  | porti  | ng    |
| period?  |               |            |         |         |        |         |         |         |        |       |       | ) Ye   | s (    | No    |
| If Yes, complete inform                          |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| Submit a separate s                              |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| accepted. If your M                              |               |            |         | -       |        |         |         |         |        |       |       | the    |        |       |
| coalition. It is not n If No, proceed to Section | •             |            | -       |         | et 101 | eacii   | W154    | 111 111 |        | amu   | JII.  |        |        |       |
|  | on 4 Certi    |            | Juicin  | J11t.   |        |         |         |         |        |       |       |        |        |       |
| Partner/CoalitionName                            |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| Partner/Coalition Name (co                       | n't )         |            |         |         |        |         |         | CDI     | DES    | Dortn | or II | If a   | applic | abla  |
| Farther/Coantion Name (co                        | 11 (.)        |            |         |         |        |         |         | N       |        | R 2   | 0     | - 11 2 | іррпс  | able  |
| Address  |               |            |         |         |        |         |         | Ε'.     |        |       |       |        |        |       |
|  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| City   |               |            |         |         |        | State   | e Z     | Zip     | 1      |       |       |        |        |       |
|  |               |            |         |         |        |         |         |         |        |       | _     |        |        |       |
| eMail  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
|  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| Phone \(\sigma\)                                 |               |            |         |         |        |         | Bindin  |         |        |       | accoi | danc   |        |       |
|  |               |            |         |         | wit    | th GP-  | 0-08-0  | )02 Pa  | ırt IV | 7.G.? | C     | ) Yes  | s C    | No    |
| What tasks/responsibil                           | ities are sha | ared with  | this pa | rtner ( | e.g. M | M1 S    | Schoo   | ol Pro  | gra    | ms o  | r Mı  | ıltip  | le Ta  | sks)' |
| O MM1  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| J IVIIVII  |               |            |         |         |        |         |         |         |        | _     |       |        | +      |       |
| ○ MM2  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| O MM3  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
|  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| O MM4  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| O MM5  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| O MM6  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| J IVIIVIO  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
| Additional tasks/respon                          | nsibilities   |            |         |         |        |         |         |         |        |       |       |        |        |       |
| Watershed Improv                                 |               |            |         | gement  | Praci  | tices 1 | requi   | red fo  | or M   | [S4s  | in ir | npai   | red    |       |
| watersheds include                               | ed in GP-0-   | 08-002 P   | art IX. |         |        |         |         |         |        |       |       |        |        |       |
|  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |
|  |               |            |         |         |        |         |         |         |        |       |       |        |        |       |

| Village of Shoreham MCC form for period ending March 9 | , 2 0 | 2        | 2 <b>N</b> | ΙΥ      | R   | 2 | 0 | A | 3 | 5 | C |
|--|-------|----------|------------|---------|-----|---|---|---|---|---|---|
| Name of MS4 Village of Shoreham                        |       | SPI<br>N | )ES<br>Y   | ID<br>R | 2 0 | A | 3 | 5 | 0 |   |   |

#### Section 4 - Certification Statement

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

|   | First Name   | MI        | Last Name    |
|---|--|-----------|--------------|
| В | r Biraina n  | ac.       | V Va ai li l |
|   | Title (Clearly print title of individual signing report) |           |              |
| M | a Mayor  |           |              |
|   | Signature  | 9990/2000 |              |
|   | BOLL   |           | Date 05/2022 |

The annual report form and any attachments can be sent to the DEC Central Office clicking the Submit Form link below, or by sending it directly to: MS4compliance@dec.ny.gov. All submissions must include the SPDES ID in the title and must be complete before hitting the Submit Form link below:

#### **Submit Form**

If unable to submit electronically, hardcopy submissions can be sent to:

Bureau of Water Compliance Division of Water 4th Floor 625 Broadway Albany, New York 12233-3505

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

|                       |                     |                  |      | SPE |   |   |   |   |   |   |   | $\overline{}$ |
|-----------------------|---------------------|------------------|------|-----|---|---|---|---|---|---|---|---------------|
| Name of MS4/Coalition | Village of Shoreham |                  |      | N   | Y | R | 2 | 0 | A | 3 | 5 | 0             |
|                       |                     |                  |      |     |   |   |   |   |   |   |   |               |
|                       | v                   | Vatan Onalita Tu | anda |     |   |   |   |   |   |   |   |               |
|                       | V                   | Vater Quality Tr | enas |     |   |   |   |   |   |   |   |               |

|  |   |       |      |      |     |       |      |     |     | <u>V</u> | <u>Va</u> | <u>ter</u> | · Q | <u>ua</u> | lity | <u>у Т</u> | re | <u>nd</u> | . <u>S</u> |  |  |  |  |          |           |               |
|--|---|-------|------|------|-----|-------|------|-----|-----|----------|-----------|------------|-----|-----------|------|------------|----|-----------|------------|--|--|--|--|----------|-----------|---------------|
| The info   | rmat  | ion   | in 1 | this | sec | ction | ı is | bei | ing | rep      | orte      | ed (       | che | ck o      | one) | :          |    |           |            |  |  |  |  |          |           |               |
| On be  | How many MS4s are contributed to this report?  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.  |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
| rela   | related to stormwater? If not, answer No and proceed to Minimum Control Measure One.  Yes, choose one of the following  Report(s) attached to the annual report   |       |      |      |     |       |      |     |     |          |           |            |     |           | No   |            |    |           |            |  |  |  |  |          |           |               |
| If Yes, c  | related to stormwater? If not, answer No and proceed to Minimum Control Measure One.  Yes, choose one of the following  Report(s) attached to the annual report  Web Page(s) where report(s) is/are provided below  |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
| O Repor  | related to stormwater? If not, answer No and proceed to Minimum Control Measure One.  Yes, choose one of the following  Report(s) attached to the annual report   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
| O WCO 1  | On behalf of a coalition How many MS4s are contributed to this report?  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, choose one of the following  Report(s) attached to the annual report  Web Page(s) where report(s) is/are provided below |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
|  | URL   | ,<br> |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  | $\neg$   | $\neg$    |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  | $\dashv$ | $\dashv$  |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  | =        | $\dashv$  |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
|  | URL   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          | =         |               |
|  | URL   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
| 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 Measu One.  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  URL |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          |           |               |
|  |   |       |      |      |     |       |      |     |     |          |           |            |     |           |      |            |    |           |            |  |  |  |  |          | $\exists$ | $\overline{}$ |

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

| Name of MS4/Coalition Village of Shoreham   | SPDES ID  N Y R 2 0 A 3 5 0                |
|---|--|
| Minimum Control Measure 1. Public   | Education and Outreach                     |
| The information in this section is being reported (check one):  |  |
| ● On behalf of an individual MS4 ○ On behalf of a coalition How many MS4s contributed to this report? |  |
| 1. Targeted Public Education and Outreach Best Manage   | ement Practices                            |
| Check all topics that were included in Education and Outreac  | h during this reporting period:            |
| ○ Construction Sites  | • Pesticide and Fertilizer Application     |
| ● General Stormwater Management Information   | Pet Waste Management                       |
| O Household Hazardous Waste Disposal  | O Recycling                                |
| O Illicit Discharge Detection and Elimination   | O Riparian Corridor Protection/Restoration |
| ○ Infrastructure Maintenance  | ○ Trash Management                         |
| ○ Smart Growth  | O Vehicle Washing                          |
| O Storm Drain Marking   | O Water Conservation                       |
| O Green Infrastructure/Better Site Design/Low Impact Developme  | nt O Wetland Protection                    |
| Other:  | ○ None                                     |
|   |  |
| <ul><li>2. Specific audiences targeted during this reporting period</li></ul>                         | d:   |
| ○ Public Employees ○ Contractors  |  |
| ● Residential ○ Developers  |  |
| O Businesses O General Public   |  |
| ○ Restaurants ○ Industries  |  |
| ○ Other: ○ Agricultural   |  |
| Other   |  |

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

SPDES ID

| 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   | Name       | of M   | [S4/ | Coa     | litic | on       | <sup>7</sup> illag | e of | Shor  | ehan | n    |      |      |       |     |      |      |               |       |     |           |     |      | N            | Y     | R    | 2   | 0     | А    | 3   | 5   | 0  |
|--|------------|--------|------|---------|-------|----------|--------------------|------|-------|------|------|------|------|-------|-----|------|------|---------------|-------|-----|-----------|-----|------|--------------|-------|------|-----|-------|------|-----|-----|----|
| O Direct Mailings  Kiosks or Other Displays  Kiosks or Other Displays  List-Serves  # Locations  # Locations  # Locations  # In List  Newspaper Ads or Articles  Public Events/Presentations  School Program  # Attendees  Total # Distributed  Printed Materials:  Locations (e.g. libraries, town offices, kiosks)  V i 1 1 a g e H a 1 1  Kiosks or Other:  Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.  Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.  |            |        |      |         | _     |          |                    | -    |       |      |      |      |      |       |     | e to | ac   | hie           | eve   | edı | uca       | tio | n a  | nd           | out   | tre  | ach | go    | als  | du  | rin | g  |
| ♠ Kiosks or Other Displays       # Locations       1         ♠ List-Serves       # In List       1       8       0         ♠ Mailing List       # In List  | ○ Co       | nstrı  | acti | on S    | Site  | Op       | era                | tors | s Tı  | ain  | ed   |      |      |       |     |      |      |               |       |     |           |     |      | #            | # Tr  | ain  | ed  |       |      |     |     |    |
| ● List-Serves # In List  | O Dia      | rect   | Ma   | ilinį   | gs    |          |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      | #            | Ma    | ilin | gs  |       |      |     |     |    |
| Mailing List # In List   Newspaper Ads or Articles # Days Run   Public Events/Presentations # Attendees   School Program # Attendees   TV Spot/Program # Days Run   Printed Materials: Total # Distributed   Locations (e.g. libraries, town offices, kiosks)   V i 1 1 a g e H a 1 1   K i o s k   Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.   URL   URL   URL   URL    # In List # Days Run    Other:   | • Ki       | osks   | or   | Oth     | er I  | Disp     | olay               | 'S   |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      | # I          | Loca  | atio | ns  |       |      |     |     | 1  |
| Newspaper Ads or Articles  Public Events/Presentations  School Program  TV Spot/Program  Printed Materials:  Locations (e.g. libraries, town offices, kiosks)  Village Hall  Kiosk  Village Hall  Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.  URL  Www.shoreham.village.org  | • Lis      | st-Se  | rve  | S       |       |          |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      |              | # I   | n Li | st  |       |      | 1   | 8   | 0  |
| Public Events/Presentations # Attendees 3 5  School Program # Attendees # Days Run  Total # Distributed  Printed Materials:  Locations (e.g. libraries, town offices, kiosks)  V i 1 1 a g e H a 1 1  K i o s k  Other:  Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.  URL  W w w . s h o r e h a m v i 1 1 a g e . o r g  URL  URL  URL  URL  URL  URL  | O Ma       | ailing | g Li | ist     |       |          |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      |              | # I   | n Li | st  |       |      |     |     |    |
| School Program # Attendees  TV Spot/Program # Days Run  Printed Materials:  Locations (e.g. libraries, town offices, kiosks)  V i 1 1 a g e H a 1 1  K i o s k  Until Distributed  Other:  Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.  Www w s s h o r e h a m v i 1 1 a g e o r g  URL  URL  URL  URL  URL  URL  URL  UR  | ○ Ne       | wspa   | ape  | r Ao    | ds c  | or A     | rtic               | les  |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      | # I          | Day   | s Rı | ın  |       |      |     |     |    |
| TV Spot/Program # Days Run     Printed Materials: Total # Distributed  | • Pu       | blic   | Ev   | ents    | /Pr   | esei     | ntat               | ions | S     |      |      |      |      |       |     |      |      |               |       |     |           |     |      | # <i>P</i>   | Atte  | nde  | es  |       |      |     | 3   | 5  |
| ● Printed Materials:  Locations (e.g. libraries, town offices, kiosks)  V i l l a g e H a l l  K i o s k  Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.  URL  W W W . s h o r e h a m v i l l a g e . o r g  / o u r - e n v i r o n m e n t  URL  URL  URL  URL  URL  URL  URL   |            | hool   | Pro  | ogra    | m     |          |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      | # /          | Atte  | nde  | es  |       |      |     |     |    |
| Locations (e.g. libraries, town offices, kiosks)  \[ \begin{array}{ c c c c c c c c c c c c c c c c c c c  | $\circ$ TV | Spo    | ot/P | rog     | ran   | 1        |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      | # I          | Day   | s Rı | ın  |       |      |     |     |    |
| V i 1 1 a g e H a 1 1   K i o s k Image: Record to the control of the control  | • Pri      |        |      |         |       |          |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           | To  | otal | # <b>D</b> i | istri | but  | ed  |       |      |     |     |    |
| K i o s k  |            |        |      |         |       |          |                    |      | n off |      |      |      |      |       |     |      |      |               |       |     |           |     |      |              |       |      | •   |       |      |     | •   |    |
| Other:      Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.      URL      W   w   w   s   h   o   r   e   h   a   m   v   i   1   1   a   g   e   . o   r   g |            |        |      |         | $\pm$ | $\dashv$ | ם                  |      |       |      |      | -    |      |       |     |      |      | 1             |       |     |           |     |      |              |       |      |     |       |      |     |     |    |
| Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.  Wwww.shorehamvilllage.org  /our-environment  URL  Www.shorehamvilllage.org  URL  |            |        |      |         |       |          |                    |      |       |      |      |      |      |       |     |      |      | $\frac{1}{1}$ | $\pm$ | 1   |           |     |      |              |       |      |     |       |      |     |     |    |
| Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.  Wwww.shorehamvilllage.org  /our-environment  URL  Www.shorehamvilllage.org  URL  |            |        |      |         |       |          |                    |      |       |      |      |      |      |       |     |      |      | +             | $^+$  | +   | $\exists$ |     |      |              |       |      |     |       |      |     |     |    |
| Needed.  | O Ot       | her:   |      |         |       |          |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      |              |       |      |     |       |      |     |     |    |
| Needed.  |            |        |      |         |       |          |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      |              |       |      |     |       |      |     |     |    |
| URL         w w w . s h o r e h a m v i l l a g e . o r g         / o u r - e n v i r o n m e n t         URL         w w w . s h o r e h a m v i l l a g e . o r g  | • We       | eb Pa  | age  |         |       |          |                    | peci | ific  | we   | b ac | ldre | esse | S - 1 | not | hor  | ne p | age           | e. C  | Con | tinu      | e o | n ne | ext j        | pag   | e if | ado | ditio | onal | spa | ace | is |
| / o u r - e n v i r o n m e n t           URL           w w w . s h o r e h a m v i l l a g e . o r g  | UF         | L_     |      |         | nee   | edeo     | 1.<br>             |      |       |      |      |      |      |       |     |      | 1    |               |       |     |           |     |      |              |       |      |     |       |      |     |     |    |
| URL    W   W   W   S   h   o   r   e   h   a   m   v   i   1   1   a   g   e   .   o   r   g   | W          | W      | W    | •       | s     | h        | 0                  | r    |       | h    | a    | m    | V    | i     | 1   |      | a    | g             | е     | ٠   | 0         | r   | g    |              |       |      |     |       |      |     |     |    |
| w w w . s h o r e h a m v i l l a g e . o r g  |            | 0      | u    | r       | -     | е        | n                  | V    | i     | r    | 0    | n    | m    | е     | n   | t    |      |               |       |     |           |     |      |              |       |      |     |       |      |     |     |    |
| w w w . s h o r e h a m v i l l a g e . o r g  |            |        |      |         |       |          |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      |              |       |      |     |       |      |     |     |    |
|  |            |        | W    |         | S     | h        | 0                  | r    | e     | h    | а    | m    | v    | i     | 1   | 1    | а    | a             | e     |     | 0         | r   | a    |              |       |      |     |       |      |     |     |    |
|  | F          |        |      | -<br> - |       |          | $\vdash$           |      |       |      |      |      |      |       |     | /    |      |               |       |     |           |     |      | t            | 0     | r    | m   | W     | a    | t   | е   | r  |
|  |            |        |      |         |       |          |                    |      |       |      |      |      |      |       |     |      |      |               |       |     |           |     |      |              |       |      |     |       |      |     |     |    |

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

|     |          |    |     |      |       | _    |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    | SPI | DES | ID |   |   |   |   |   |   |
|-----|----------|----|-----|------|-------|------|-------|-------|------|------|------|------|-----|----|-----|------|-----|-----|------|-----|------|-----|----|-----|-----|----|---|---|---|---|---|---|
| Nar | ne c     | fΜ | S4/ | Coa  | litic | on_V | illag | ge of | Shor | ehan | 1    |      |     |    |     |      |     |     |      |     |      |     |    | N   | Y   | R  | 2 | 0 | А | 3 | 5 | 0 |
|     | W<br>url |    | Pag | ge c | on'   | 't.: |       | Pro   | ovio | de s | spec | cifi | c w | eb | ado | lres | ses | - n | ot l | hor | ne j | pag | e. |     |     |    |   |   |   |   |   |   |
|     | W        | W  | W   |      | s     | h    | 0     | r     | е    | h    | a    | m    | v   | i  | 1   | 1    | a   | g   | е    |     | 0    | r   | g  | /   |     |    |   |   |   |   |   |   |
|     | 0        | u  | r   | _    | е     | n    | v     | i     | r    | 0    | n    | m    | е   | n  | t   | /    | р   | a   | g    | е   | s    | /   | h  | 0   | m   | е  | 0 | W | n | е | r |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     | URL      | ,  |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     | W        | W  | W   | ٠    | s     | h    | 0     | r     | е    | h    | а    | m    | V   | i  | 1   | 1    | a   | g   | е    | ٠   | 0    | r   | g  | /   |     |    |   |   |   |   |   |   |
|     | V        | i  | 1   | 1    | а     | g    | е     | _     | С    | 0    | d    | е    | /   | р  | а   | g    | е   | s   | /    |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     | С        | 0  | d   | е    | -     | v    | i     | 1     | 1    | a    | g    | е    | -   | s  | h   | 0    | r   | е   | h    | а   | m    | -   | 1  | 0   | С   | a  | 1 | - | 1 | a | W | s |
|     | URL      | r  |     |      |       |      |       |       |      | 1    |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   | _ |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     | URL      | r  |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     | URL      | r  |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     | URL      |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     | UKL      | ,  |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     | URL      |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     | OKL      | ,  |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   |   |
|     |          |    |     |      |       |      |       |       |      |      |      |      |     |    |     |      |     |     |      |     |      |     |    |     |     |    |   |   |   |   |   | L |

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

| If submitting           | ng 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 Shoreham  | N Y R 2 0 A 3 5 0   |
|                         |  |   |
| 4. Evaluating Pro       | gress Toward Measurable Goals MCM 1  |   |
| identified in your St   | ort on your progress and project plans toward cormwater Management Program Plan (SWM tional pages as needed. |   |
| A. Briefly summar       | rize the Measurable Goal identified in the   | SWMPP in this reporting period.                                   |
|                         | regarding stormwater and MS4 reporting was e Village email list-serve.                                       | as distributed periodically at board                              |
| B. Briefly summar Goal. | rize the observations that indicated the ove   | erall effectiveness of this Measurable                            |
|                         | ued to improve the pollution prevention inforspecific pages listed each received approximate                 |   |
| C. How many time        | es was this observation measured or evalua   | ated in this reporting period?  [ex.: samples/participants/event] |
| D. Has your MS4         | made progress toward this Measurable Go  |   |
|                         |  | ● Yes ○ No  |
| E. Is your MS4 on       | schedule to meet the deadline set forth in   | the SWMPP? • Yes $\circ$ No                                       |
| •                       | rize the stormwater activities planned to ming cycle (including an implementation sch                        | 9   |
|                         | ntinue to develop public information materia<br>ake them available to their residents.                       | als on topics relevant to stormwater                              |
|                         |  |   |

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

| Name of MS4/Coalition Village of Shoreham  | N Y R 2 0 A 3 5 0                               |
|--|---|
| Minimum Control Measure 2.   | Public Involvement/Participation                |
| 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 re</li> </ul> | port?   |
| 1. What opportunities were provided for public development, evaluation and improvement o (SWMP) Plan during this reporting period? | f the Stormwater Management Program             |
| <ul><li>Cleanup Events</li></ul>   | # Events 1                                      |
| O Comments on SWMP Received  | # Comments                                      |
| <ul><li>Community Hotlines</li></ul>   | Phone # ( ) -                                   |
| Phone # ( 6 3 1 ) 8 2 1 - 0 6 8 0  | Phone # (                                       |
| Phone # ( 6 3 1 ) 6 5 5 - 5 9 6 3  | Phone # ( ) -                                   |
| Phone # ( ) -  | Phone # ( ) -                                   |
| Phone # ( )  | Phone # ( ) -                                   |
| Phone # ( ) -  | Phone # ( ) -                                   |
| • Community Meetings   | # Attendees 3 5                                 |
| ○ Plantings  | Sq. Ft.   |
| O Storm Drain Markings   | #Drains   |
| O Stakeholder Meetings   | # Attendees                                     |
| O Volunteer Monitoring   | # Events  |
| Other:   |   |
| 2. Was public notice of availability of this annu Program (SWMP) Plan provided?  | al report and Stormwater Management  ● Yes ○ No |
| ○ List-Serve   | # In List                                       |
| O Newspaper Advertising  | # Days Run                                      |
| ○ TV/Radio Notices   | # Days Run                                      |
| Other:   |   |
| O Web Page URL: Enter URL(s) on the following to   | vo pages.                                       |

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

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

SPDES ID

| ame o | of M | S4/C | Coal | litio | n vi | llage | e of S | Shore | ham |     |    |     |      |      |     |      |      |      |     |     |      | N    | Y    | R  | 2    | 0   | А  | 3 | 5 | 0 |
|-------|------|------|------|-------|------|-------|--------|-------|-----|-----|----|-----|------|------|-----|------|------|------|-----|-----|------|------|------|----|------|-----|----|---|---|---|
| . Ul  | RL   |      | on   | 't.:  |      |       |        |       |     | es) | wh | ere | e no | otic | e(s | ) ca | ın l | oe a | acc | ess | ed · | - no | ot h | on | ne p | oag | e. |   |   |   |
| URI   | _    |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
| URI   | _    |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
| URI   | _    |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
| URI   |      |      |      |       |      |       |        | -     |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
| LIDI  |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
| URI   |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
| URI   |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
| URI   | _    |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |
|       |      |      |      |       |      |       |        |       |     |     |    |     |      |      |     |      |      |      |     |     |      |      |      |    |      |     |    |   |   |   |

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

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

SPDES ID

| Nan | ne of     | fMS | S4/C | Coal | litio | n V | 'illag | ge of | Shor | ehan | 1 |     |    |     |      |      |    |     |    |      |     |      |              | Ν   | Y  | R  | 2  | 0   | A | 3 | 5 | 0       |
|-----|-----------|-----|------|------|-------|-----|--------|-------|------|------|---|-----|----|-----|------|------|----|-----|----|------|-----|------|--------------|-----|----|----|----|-----|---|---|---|---------|
| 2.  | UR<br>Ple | RL( | s) c | on   | 't.:  |     |        |       |      |      |   | es) | wh | ere | e no | otic | es | can | be | e ac | ces | ssec | <b>l</b> - 1 | not | ho | me | pa | ge. |   |   |   |         |
|     | URL       |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     | URL       |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   | Ш |   | <u></u> |
|     | URL       |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     | URL       |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     | URL       |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     | URL       |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           | _   | _    |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     | URL       |     |      |      |       |     |        |       | 1    | I    | 1 |     |    |     |      |      |    |     |    |      |     |      |              |     | ı  |    |    |     |   |   | ı |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |
|     |           |     |      |      |       |     |        |       |      |      |   |     |    |     |      |      |    |     |    |      |     |      |              |     |    |    |    |     |   |   |   |         |

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

3. Where can the public access copies of this annual report, Stormwater Management

Program SWMP) Plan and submit comments on those documents?

Name of MS4/Coalition Village of Shoreham

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

SPDES ID

N Y R 2 0 A 3 5

|       |                          |            |         |     |    |   |     |    |          |      |      | t rac<br>d at |     |      |     |     |            |               |        |     |               |        |            |         |      |      |               |       |     | ıd  |      |
|-------|--------------------------|------------|---------|-----|----|---|-----|----|----------|------|------|---------------|-----|------|-----|-----|------------|---------------|--------|-----|---------------|--------|------------|---------|------|------|---------------|-------|-----|-----|------|
| MS    | 4/C                      | oal        | itioı   | n O |    |   | пау | UC | Sui      | J111 | IIIC | u ai          | tii | ai I | oca |     |            | nnu           |        |     |               |        | ar p<br>S' | _       |      |      |               |       |     | nme | ents |
|       | Dep<br>V                 | i          | 1       | 1   | а  | g | е   |    | С        | 1    | е    | r             | k   | 1    | s   |     | 0          | f             | f      | i   | С             | е      |            |         |      |      |               |       |     |     |      |
|       | Ado                      | dres       | S       |     |    |   |     |    |          |      |      |               |     |      |     |     |            |               |        |     |               |        |            |         |      |      |               |       |     |     |      |
|       | 8                        | 0          |         | W   | 0  | 0 | d   | V  | i        | 1    | 1    | е             |     | R    | 0   | а   | d          |               |        |     |               |        |            |         |      |      |               |       |     |     |      |
|       | City                     |            |         |     |    |   |     |    |          |      |      |               |     |      |     |     | ]          |               |        |     |               | Zip    |            |         |      |      | 1             |       |     |     |      |
|       | S                        | h          | 0       | r   | е  | h | a   | m  |          |      |      |               |     |      |     |     |            | Ŀ             | N      | Y   |               | 1      | 1          | 7       | 8    | 6    | -             |       |     |     |      |
|       | Pho                      | ne         |         |     | ١. |   | ı   |    | 1        |      | ı    |               |     | 1    |     |     |            |               |        |     |               |        |            |         |      |      |               |       |     |     |      |
|       | (                        | 6          | 3       | 1   | )  | 8 | 2   | 1  | -        | 0    | 6    | 8             | 0   |      |     |     |            |               |        |     |               |        |            |         |      |      |               |       |     |     |      |
| ⊃ Lib | rary<br>Ado              | /<br>dres  | S       |     |    |   |     |    |          |      |      |               |     |      |     |     | ) <b>A</b> | nnu           | ıal 1  | Rep | ort           |        | ) S'       | WN      | 1P ] | Plaı | 1             | 0     | Cor | nme | ents |
|       |                          |            |         |     |    |   |     |    |          |      |      |               |     |      |     |     |            |               |        |     |               |        |            |         |      |      |               |       |     |     |      |
|       | City                     | у          |         |     |    |   |     |    |          |      |      |               |     |      |     |     |            |               |        |     |               | Zip    |            |         |      |      |               |       |     | -   |      |
|       |                          |            |         |     |    |   |     |    |          |      |      |               |     |      |     |     |            |               |        |     |               |        |            |         |      |      | _             |       |     |     |      |
|       | Pho                      | ne         |         |     |    |   |     |    |          |      |      |               |     |      |     |     | J          | L             |        |     |               |        |            |         |      |      | J             |       |     |     |      |
|       | (                        |            |         |     | )  |   |     |    | _        |      |      |               |     |      |     |     |            |               |        |     |               |        |            |         |      |      |               |       |     |     |      |
|       |                          |            |         |     |    |   |     |    |          |      |      |               |     |      |     |     |            |               |        |     |               |        |            |         |      |      |               |       |     |     |      |
| Oth   | er<br>Ada                | drec       | c       |     |    |   |     |    |          |      |      |               |     |      |     |     | ) <b>A</b> | nnu           | ıal 1  | Rep | ort           |        | ) S'       | WN      | 1P ] | Plaı | 1             | 0     | Cor | nme | ents |
| Oth   | er<br>Add                | dres       | s       |     |    |   |     |    |          |      |      |               |     |      |     |     | A          | nnu           | ial l  | Rep | ort           |        | S'         | WN      | 1P 1 | Plaı | n             | 0     | Cor | nme | ents |
| ○ Oth | Add                      |            | S       |     |    |   |     |    |          |      |      |               |     |      |     |     | A          | nnu           | ial l  | Rep |               |        | S'         | WN      | 1P ] | Plar | 1             | 0     | Cor | nme | ents |
| ○ Oth | er<br>Add                |            | S       |     |    |   |     |    |          |      |      |               |     |      |     |     | A          | nnu           | ial l  | Rep |               | Zip    | 'S C       | WN      | (P)  | Plan | n             |       | Cor | nme | ents |
|       | Add                      | y          | S       |     |    |   |     |    |          |      |      |               |     |      |     |     | A (        | nnu           | ial l  | Rep |               |        | S'         | WN      | ſP ] | Plaı | n             |       | Cor | mme | ents |
|       | Add<br>City              | y          | S       |     | )  |   |     |    | _        |      |      |               |     |      |     |     | ) A        | nnu           | ial ]  | Rep |               |        | ) S'       | WN      | 1P ] | Plaı | n<br> <br>  - |       | Cor | nme | ents |
|       | City Pho                 | y          |         | L:  | )  |   |     |    |          |      |      |               |     |      |     |     |            | nnu           |        |     |               | Zip    | S          |         |      |      | ] -           |       |     |     |      |
|       | City Pho                 | y          |         | L:  | )  | h | 0   | r  | <b>-</b> | h    | a    | m             | V   | i    | 1   |     |            |               |        |     |               | Zip    |            |         |      |      | ] -           |       |     |     | ents |
|       | City Pho (               | one<br>age | UR      |     | _  |   | _   |    |          |      | _    | m             |     |      |     | (1  | A          | nnu           | aal l  | Rep | ort o         | Zip    | g g        | WM<br>/ | ſP]  | Plan | <b>-</b>      | 01    | Cor | mme | ents |
|       | City Pho (               | one<br>age | UR      |     | _  |   | _   |    |          |      | _    | $\vdash$      |     |      |     | (1  | A          | nnu           | aal l  | Rep | ort o         | Zip    | g g        | WM<br>/ | ſP]  | Plan | <b>-</b>      | 01    | Cor | mme | ents |
|       | City Pho (               | yy age w   | UR<br>w | -   | е  | n | v   | i  | r        | 0    | n    | $\vdash$      | е   | n    | t   | 1 / | A a p      | nnu<br>g<br>a | alleeg | Rep | ort<br>o<br>s | Zip (r | S S g      | WM / t  | o    | Plai | - m           | ○ ( W | Cor | mme | ents |
|       | City Pho (  B Pi  W  Ple | yy age w   | UR<br>w | -   | е  | n | v   | i  | r        | 0    | n    | m             | е   | n    | t   | 1 / | A a p      | nnu<br>g<br>a | alleeg | Rep | ort<br>o<br>s | Zip (r | S S g      | WM / t  | o    | Plai | - m           | w w   | Cor | mme | ents |
| ● We  | City Pho (  B Pi  W  Ple | yy age w   | UR<br>w | -   | е  | n | v   | i  | r        | 0    | n    | m             | е   | n    | t   | 1 / | A a p      | nnu<br>g<br>a | alleeg | Rep | ort<br>o<br>s | Zip (r | S S g      | WM / t  | o    | Plai | - m           | w w   | Cor | mme | ents |

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

|  | SPI      | DES ID |     |       |      | , ,  |    |
|--|----------|--------|-----|-------|------|------|----|
| Name of MS4/Coalition Village of Shoreham  | N        | YR     | 2   | 0 7   | 3    | 5    | 0  |
| 4.a. If this report was made available on the internet, what date wa   | as it po | sted?  |     |       |      |      |    |
| Leave blank if this report was not posted on the internet.   |          | /      |     | /     |      |      |    |
| 4.b. For how many days was/will this report be posted?   |          |        |     |       | 3    | 6    | 5  |
| If submitting a report for single MS4, answer 5.a If submitting a  | joint r  | eport, | ans | wer : | 5.b  |      |    |
| <b>5.a. Was an Annual Report public meeting held in this reporting p</b> If Yes, what was the date of the meeting?   | eriod?   | /      |     |       | Yes  |      | No |
| If No, is one planned?   |          |        |     | • \   | Yes  | 0    | No |
| 5.b. Was an Annual Report public meeting held for all MS4s conti   | ributin  | g to t | his | repo  | rt d | urir | ıg |
| this reporting period?   |          |        |     | 0 \   | Yes  | 0    | No |
| If No, is one planned for each?  |          |        |     | 0 \   | Yes  | 0    | No |
| 6. Were comments received during this reporting period?  If Yes, attach comments, responses and changes made to SWMP in response to comments to this report. |          |        |     | 0 \   | Yes  | 0    | No |

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

|   | SPDES ID  |
|---|---|
| Name of MS4/Coalition Village of Shoreham   | N Y R 2 0 A 3 5 0   |
| 7. Evaluating Progress Toward Measurable Goals MCM 2  |   |
| Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.   |   |
| A. Briefly summarize the Measurable Goal identified in the S  | WMPP in this reporting period.  |
| Involve community organizations in activities to help reduce stor   | rmwater pollutants  |
|   |   |
|   |   |
|   | -11 -6642   |
| B. Briefly summarize the observations that indicated the over Goal.   | rail effectiveness of this Measurable   |
| Homeowners are now involved by helping to maintain and clean<br>The Shoreham Village Association (TSVA), a civic organization,<br>year to keep roadways and the beach on Long Island Sound, free<br>TSVA also help keep Village roadways and public property clear<br>year-round. This year there was one community clean-up. | of trash and debris. Members of   |
| C. How many times was this observation measured or evaluat  | ted in this reporting period?   |
|   | 1   |
| D. Has your MS4 made progress toward this measurable goal   | (ex.: samples/participants/event  I 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 me the next reporting cycle (including an implementation sche   | e   |
| The Village will continue to engage homeowners in pollution pre continue to support the work of TSVA and identify ways for the that reduce stormwater pollutants.   |   |
|   |   |

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

| Name of MS4/Coalition Village of Shoreham  | N Y R 2 0 A 3 5 0  |
|--|--|
| Minimum Control Measure 3.   | Illicit Discharge Detection and Elimination                  |
| 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 t</li> </ul> |  |
| 1. Enter the number and approx. percent  | of outfalls mapped: 1 # 1 0 0 %                              |
| 2. How many of these outfalls have been sereporting period (outfall reconnaissance   | creened for dry weather discharges during this e inventory)? |
| 3.a. What types of generating sites/sewershoreporting period?  | eds were targeted for inspection during this                 |
| O Auto Recyclers   | O Landscaping (Irrigation)                                   |
| O Building Maintenance   | ○ Marinas  |
| ○ Churches   | O Metal Plateing Operations                                  |
| O Commercial Carwashes   | Outdoor Fluid Storage  |
| O Commercial Laundry/Dry Cleaners  | <ul> <li>Parking Lot Maintenance</li> </ul>                  |
| O Construction Vehicle Washouts  | ○ Printing   |
| O Cross-Connections  | O Residential Carwashing                                     |
| O Distribution Centers   | ○ Restaurants  |
| O Food Processing Facilities   | O Schools and Universities                                   |
| O Garbage Truck Washouts   | O Septic Maintenance   |
| O Hospitals  | O Swimming Pools   |
| 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, 2 0 2 2 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

| Name of MS4/Coalition Village of Shoreham  |                                | NY      | R     | 2    | 0 .   | A 3          | 3 5   | 0        |
|--|--------------------------------|---------|-------|------|-------|--------------|-------|----------|
| 3.b.What types of illicit discharges have  | e been found during this repo  | rting p | eri   | od?  | 1     |              |       |          |
| 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 Discharg | ges     |       |      |       |              |       |          |
| Other:    A How many illigit discharges/notantic   | None                           | on dote | ato.  | 4 4. |       | a th         |       |          |
| 4. How many illicit discharges/potentia reporting period?  | n megai connections have bee   | en dete | ctec  | ı at | ırın  | g tii        | 18    | 0        |
| 2 02   |                                |         |       |      |       |              |       | 10       |
| 5. How many illicit discharges have be   | en confirmed during this rep   | orting  | per   | iod  | ?     |              |       | 0        |
| 6. How many illicit discharges/illegal c period?   | onnections have been elimina   | ited du | rin   | g th | iis r | epoi         | rting | <b>g</b> |
| 7. Has the storm sewershed mapping be If No, approximately what percent was                              |                                | 0.      | riod' | ?    |       | Yes          | 0 0   | No       |
| 8. Is the above information available in Is this information available on the VI If Yes, provide URL(s): |                                |         |       |      |       | Yes<br>Yes   |       | No<br>No |
| Please provide specific address of page URL  | where map(s) can be accessed   | - not h | ome   | e pa | ge.   |              |       |          |
|  |                                |         |       |      |       |              |       |          |
|  |                                |         |       |      |       |              |       |          |
|  |                                |         |       |      |       | Ť            | T     | T        |
| URL  |                                |         |       |      |       |              |       |          |
|  |                                |         |       |      |       | $\downarrow$ |       |          |
|  |                                |         |       |      |       |              |       |          |
|  |                                |         |       |      |       |              |       |          |

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

|   |   |           | SPDE    | 3 10  |               |       |
|---|---|-----------|---------|-------|---------------|-------|
| ne of MS4/Coalition Village of Shorehar                 | m   |           | NY      | R 2   | 2 0 A         | 3 !   |
| URL(s) con't.:  |   |           |         |       |               |       |
| Please provide specific addr                            | ress of page where map(s) can b               | e acces   | sed - r | ot ho | me pa         | ge    |
|   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
| IDI   |   |           |         |       |               |       |
| JRL   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
| mi  |   |           |         |       |               |       |
| JRL   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
| mi  |   |           |         |       |               |       |
| JRL   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
| JRL   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
|   |   |           |         |       |               |       |
| Has an IDDE law been ador                               | pted for each traditional MS4 a               | nd/or h   | омо П   | DDE . | arood         | IIROG |
| <del>_</del>  | ional MS4s contributing to this               |           |         | DDE I | oroccu<br>● Y |       |
|   |   |           |         |       |               |       |
| <b>70</b> 77  | 13.504  |           | н и и   |       |               |       |
| If Yes, has every traditional equivalent to the NYS Mod | l MS4 contributing to this reported IDDE Law? | rt certif | fied th |       | s law is      |       |

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

| Name of MS4/Coalition Vil                    | illage of Shoreham  |                    | PDES ID N Y R 2 0 A 3          | 5 0    |
|--|---|--------------------|--------------------------------|--------|
| 12. Evaluating Progre                        | ess Toward Measurable Goals MCN   | М 3                |                                |        |
|  | t on your progress and project plans to<br>mwater Management Program Plan (S<br>onal pages as needed. | _                  | •                              | 'art   |
| A. Briefly summarize                         | e the Measurable Goal identified in   | the SWMPP in       | this reporting perio           | od.    |
| Monitor drainage outf promptly identified an | fall and infrastructure on a regular basnd eliminated.  | is to ensure any   | illicit discharges are         |        |
| B. Briefly summarize Goal.                   | e the observations that indicated the   | e overall effecti  | veness of this Measu           | ırable |
| Village personnel regureporting period.      | ularly monitor Village infrastructure;  | no illicit dischar | ges were detected in           | this   |
| ·  | was this observation measured or e  |                    | (ex.: samples/part             |        |
| D. Has your MS4 ma                           | nde progress toward this measurabl  | e goal during th   | nis reporting period'<br>● Yes |        |
| E. Is your MS4 on sc                         | chedule to meet the deadline set fort   | th in the SWMP     | PP?  • Yes                     | ○ No   |
| •  | e the stormwater activities planned<br>g cycle (including an implementation                           | _                  |                                |        |
| The Village will continuous any identified.  | inue to monitor infrastructure for any  | illicit discharges | and promptly elimin            | iate   |

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

|   | SPL | DES | ID |   |   |   |   |   |   |
|---|-----|-----|----|---|---|---|---|---|---|
| Name of MS4/Coalition Village of Shoreham | N   | Y   | R  | 2 | 0 | А | 3 | 5 | 0 |

|     | Construction Site and Post-Construction Control   |                |            |
|-----|---|----------------|------------|
| The | e 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 req<br>mechanism that provides equivalent protection to the NYS SPDES General Per<br>Stormwater Discharges from Construction Activities?                                   | _              |            |
| 1b  | o. Has each Town, City and/or Village contributing to this report documented that equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney certification or using the NYSDE Analysis Workbook? | Erosion        |            |
|     | Analysis Workbook?   • Yes  | O No           | O N I      |
|     | If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La © 09/2004 • 0   | aw.<br>03/2006 | O 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 reviewed in this reporting period?  | ve been        | 0          |
| 4.  | Does your MS4/Coalition have a mechanism for receipt and consideration of pucomments related to construction SWPPPs?  • Yes   | ublic<br>○ No  | O NT       |
|     | If Yes, how many public comments were received during this reporting period?  |                |            |
| 5.  | Does your MS4/Coalition provide education and training for contractors about SWPPP process?   | the loc        | al<br>○ 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               | # |         |  | 0 | ○ No Authority                 |
|------------------------------------|---|---------|--|---|--------------------------------|
| 9 Notices of Violation             | " | $\perp$ |  |   | O 140 Mathority                |
| <ul><li>Stop Work Orders</li></ul> | # |         |  | 0 | O No Authority                 |
| O Criminal Actions                 | # |         |  |   | <ul><li>No Authority</li></ul> |
| ○ Termination of Contracts         | # |         |  |   | O No Authority                 |
| O Administrative Fines             | # |         |  |   | <ul><li>No Authority</li></ul> |
| O Civil Penalties                  | # |         |  |   | <ul><li>No Authority</li></ul> |
| O Administrative Orders            | # |         |  |   | <ul><li>No Authority</li></ul> |
| O Enforcement Actions or Sanctions | # |         |  | 0 |                                |
| Other                              | # |         |  |   | <ul><li>No Authority</li></ul> |

public review?

Village of Shoreham

## **MS4 Annual Report Form**

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

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

N Y R 2 0 A 3 5 0

 $\bigcirc$  Yes

| Name of MS4/Coantion   |                   |
|--|-------------------|
| Minimum Control Measure 4. Construction Site Stormwater Ru   | unoff 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 oduring this reporting period?  | one acre or more  |
| 2. How many construction projects disturbing at least one acre were active in during this reporting period?  | your jurisdiction |
| 3. What percent of active construction sites were inspected during this reporti  | ing period? ONT   |
|  | 1 0 0 %           |
| 4. What percent of active construction sites were inspected more than once?  | O NT              |
|  | %                 |
| 5. Do all inspectors working on behalf of the MS4s contributing to this report   |                   |
| Construction Stormwater Inspection Manual?   | Yes ○ No ○ NT     |
| 6. Does your MS4/Coalition provide public access to Stormwater Pollution Pro (SWPPPs) of construction projects that are subject to MS4 review and appropriate to the construction projects that are subject to the construction projects the const |                   |
| • Y  |                   |
| If your MS4 is Non-Traditional, are SWPPPs of construction projects made   | e available for   |

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

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

|  |   |        |               | _          |        |          |      |      |     |     |      |      |      |     |     |       |    |       | _    |    |         | SPI  | DES  | ID  |     |     |      |          |           |   |
|--|---|--------|---------------|------------|--------|----------|------|------|-----|-----|------|------|------|-----|-----|-------|----|-------|------|----|---------|------|------|-----|-----|-----|------|----------|-----------|---|
| Name   | of MS4  | /Coal  | itioı         | n V        | /illag | ge of    | Sho  | ehar | n   |     |      |      |      |     |     |       |    |       |      |    |         | N    | Y    | R   | 2   | 0   | A    | 3        | 5         | 0 |
|  | 6. con't.: Submit additional pages as needed. |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
| • M:   | S4/Coal                                       | lition | Of            | ffic       | ر د    |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
| • IVI  | Depart  |        |               | 1110       |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  | Vi  |        |               | a          | g      | е        |      | С    | 1   | е   | r    | k    | 1    | s   |     | 0     | f  | f     | i    | С  | е       |      |      |     |     |     |      |          |           |   |
|  | Addres  | SS     |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  | 8 0   |        | W             | 0          | 0      | d        | v    | i    | 1   | 1   | е    |      | R    | 0   | a   | d     |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  | City<br>S h                                   | 0      | r             | е          | h      | a        | m    |      |     |     |      |      |      |     |     |       | N  | 1 7   | 7    |    | Zip 1   | 1    | 7    | 8   | 6   | ]_  |      |          |           |   |
|  | Phone   |        |               |            |        | <u>а</u> |      |      |     |     |      |      |      |     |     |       | 1  | '   - |      |    | _       |      |      |     |     | _   |      | l        |           |   |
|  | <b>(</b> 6                                    | 3      | 1             | )          | 8      | 2        | 1    | _    | 0   | 6   | 8    | 0    |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
| O Lil  | brarv   |        |               | <i>,</i> I |        |          |      | 1    |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  | Addres  | SS     |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  |   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  | City  |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    | Zip     |      |      |     |     | ,   |      |          |           | _ |
|  |   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     | -   |      |          |           |   |
|  | Phone   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       | _    |    |         |      |      |     |     | ,   |      |          |           |   |
|  | (   |        |               | )          |        |          |      | -    |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
| O Ot   | hor   | -      |               | , ,        |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
| $\bigcirc$ $\bigcirc$ $\bigcirc$ $\bigcirc$ $\bigcirc$ | Addres  | SS     |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  |   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  | City  |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    | <br>Zip |      |      |     |     |     |      |          |           |   |
|  |   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     | _   |      |          |           |   |
|  | Phone   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       | _    |    |         |      |      |     |     | J   |      |          |           |   |
|  | (   |        |               | )          |        |          |      | -    |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
| $\circ$ W  | eb Page                                       | UR     | L(s)          | ):         | P      | leas     | se p | rov  | ide | spe | cifi | ic a | ddre | ess | whe | ere : | SW | PP]   | Ps c | an | be a    | acce | esse | d - | not | hoi | me 1 | page     | e.        |   |
|  | URL   |        |               | ,          |        |          |      |      |     | •   |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  |   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  |   |        | İ             |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          | $\exists$ | _ |
|  |   |        | +             |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          | $\dashv$  | _ |
|  |   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |
|  | URL   |        | $\neg$        |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          | $\neg$    |   |
|  |   |        | $\frac{1}{1}$ |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      | $\dashv$ | $\dashv$  | 닉 |
|  |   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      | _        | $\exists$ |   |
|  |   |        |               |            |        |          |      |      |     |     |      |      |      |     |     |       |    |       |      |    |         |      |      |     |     |     |      |          |           |   |

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

| SPDES ID   |
|--|
| Name of MS4/Coalition Village of Shoreham N   Y   R   2   0   A   3   5   0  |
| 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.   |
| Provide appropriate materials to contractors and oversight of applicable construction sites to reduce construction site stormwater runoff.   |
| B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.  |
| No sites over one acre exist in the Village, and the Village consists almost entirely of land used for single-family residential purposes. The Village Building Inspector conducts a plan review for all building permits and requires installation of drainage structures and installation of soil & erosion control measures as needed to reduce construction site stormwater runoff and to off-set the environmental impact of new impervious surfaces. |
| C. How many times was this observation measured or evaluated in this reporting period?   |
| 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 to advance measures which will reduce construction site stormwater runoff.   |
|  |

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

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

N Y R 2 0 A 3 5 0

| Name of MS4/Coalition  | Village of Shoreham           | N Y R            | 2 0 A 3 5 0    |                                      |                           |
|--|-------------------------------|------------------|----------------|--------------------------------------|---------------------------|
| Minimum  | Control Mea                   | sure 5. Post     | t-Constructio  | on Stormwater N                      | <b>Aanagement</b>         |
|  |                               |                  |                |                                      |                           |
| The information in the   | nis section is beir           | ng reported (che | ck one):       |                                      |                           |
| <ul><li>On behalf of an inc</li><li>On behalf of a coa</li></ul> |                               |                  |                |                                      |                           |
|  | nany MS4s cont                | ributed to this  | report?        |                                      |                           |
|  |                               |                  |                | nnagement practices eporting period? | has your                  |
| M194/Coantion 1  | nventorieu, ms <sub>k</sub>   | #                | #              | # Times                              |                           |
|  |                               | Inventoried      | Inspections    | Maintained                           |                           |
| O Alternative Practic  | ces                           |                  |                |                                      |                           |
| O Filter Systems   |                               |                  |                |                                      |                           |
| <ul><li>Infiltration Basins</li></ul>                            |                               |                  |                |                                      |                           |
| Open Channels  |                               |                  |                |                                      |                           |
| ○ Ponds  |                               |                  |                |                                      |                           |
| ○ Wetlands   |                               |                  |                |                                      |                           |
| Other  |                               |                  |                |                                      |                           |
| 2. Do you use an BMPs, inspect                                   |                               | ` •              | abase, spreads | heet) to track post-                 | -construction  ○ Yes • No |
| 3. What types of Development/E                                   |                               |                  |                | implement Low In nciples?            | npact                     |
| <ul><li>Building Codes</li></ul>                                 | <ul><li>Municipal C</li></ul> | Comprehensive F  | Plans          |                                      |                           |
| Overlay Districts  | Open Space                    | Preservation Pr  | ogram          |                                      |                           |
| <ul><li>Zoning</li></ul>   | O Local Law o                 | or Ordinance     |                |                                      |                           |
| ○ None   | O Land Use R                  | egulation/Zoning | g              |                                      |                           |
| O Watershed Plans  | Other Comp                    | rehensive Plan   |                |                                      |                           |
| Other:   |                               |                  |                |                                      |                           |

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

|   | SPI        | JES IL | )    |           |                    |           |    |
|---|------------|--------|------|-----------|--------------------|-----------|----|
| Name of MS4/Coalition Village of Shoreham   | N          | YR     | 2    | 0 A       | . 3                | 5         | 0  |
| 4a. Are the MS4s contributing to this report involved in a regional/w   | atershed v | vide p | lann | _         | <b>ffort</b><br>es |           | No |
| 4b. Does the MS4 have a banking and credit system for stormwater  | manageme   | nt pra | ctic | es?       |                    |           |    |
|   |            |        |      | $\circ$ Y | es                 |           | No |
| 4c. Do the SWMP Plans for each MS4 contributing to this report inc<br>and approval of banking and credit of alternative siting of a stor  |            |        |      |           | etice              | ?         | No |
| 4d. How many stormwater management practices have been implement reporting period?  | ented as p | art of | this |           |                    |           |    |
| 5. What percent of municipal officials/MS4 staff responsible for protraining on Low Impace Development (LID), Better Site Design (Infrastructure principles in this reporting period? |            |        |      |           | end                | <b>ed</b> | %  |

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

| SPDES ID  |
|---|
| Name of MS4/Coalition Village of Shoreham N   Y   R   2   0   A   3   5   0   |
| 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.  |
| Monitor post-construction activities for all projects required to file a Notice of Intent.  |
| B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.   |
| No projects within the Village were required to file a Notice of Intent during the current reporting period. Stormwater infrastructure that is required to be monitored and was installed prior to the current reporting period is all property of the Village and is regularly inspected and maintained by Village personnel in compliance with MCM 6. |
| C. How many times was this observation measured or evaluated in this reporting period?  (ex.: samples/participants/ev   |
| 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 to monitor construction activity within the Village and ensure any applicable projects file an NOI and are monitored appropriately.   |
|   |

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

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

| SPI   | DES | ID |   |   |   |   |   |   |
|---|-----|----|---|---|---|---|---|---|
| Name of MS4/Coalition Village of Shoreham N | Y   | R  | 2 | 0 | А | 3 | 5 | 0 |

## Minimum Control Measure 6. Stormwater Management for Municipal Operations

|   | _ |
|---|---|
| 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. 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

 $\bigcirc$  No

performed within the past 3 **Operation/Activity/Facility** Addressed in SWMP? vears? Street Maintenance..... • Yes ○ No ...... • Yes  $\bigcirc$  No ● No ..... ○ Yes Bridge Maintenance.... O Yes No Winter Road Maintenance.... • Yes ○ No ..... • Yes  $\bigcirc$  No Salt Storage.... O Yes ● No ..... ○ Yes No Solid Waste Management..... O Yes No .....Yes  $\bigcirc$  No ○ No Yes New Municipal Construction and Land Disturbance.. • Yes  $\bigcirc$  No Right of Way Maintenance..... • Yes  $\bigcirc$  No ● No ..... ○ Yes No Marine Operations.... O Yes Hydrologic Habitat Modification..... O Yes ● No ..... ○ Yes No Parks and Open Space..... 

Yes  $\bigcirc$  No Municipal Building..... • Yes ○ No ..... • Yes  $\bigcirc$  No ○ No ..... • Yes  $\bigcirc$  No Stormwater System Maintenance..... • Yes ○ No Yes  $\bigcirc$  No Vehicle and Fleet Maintenance..... • Yes

Other..... O Yes

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

|  | SPDES ID             |            |      |
|--|----------------------|------------|------|
| Name of MS4/Coalition Village of Shoreham  | N Y R 2              | 0 A 3      | 5 0  |
| 2. Provide the following information about municipal operat  | ions good housekeep  | oing progr | ams: |
| • Parking Lots Swept (Number of acres X Number of times swep   | t) # Acres           |            | 1    |
| • Streets Swept (Number of miles X Number of times swept)  | # Miles              |            | 2 8  |
| • Catch Basins Inspected and Cleaned Where Necessary   | #                    |            | 2 7  |
| O Post Construction Control Stormwater Management Practices<br>Inspected and Cleaned Where Necessary                             | #                    |            |      |
| 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 N times applied to the nearest tenth.) | # Acres Umber of     |            | ].   |
| 3. How many stormwater management trainings have been put during this reporting period?  | provided to municipa | al employe | 0    |
| 4. What was the date of the last training?   | 1 0 / 0 1            | / 2 0      | 1 9  |
| 5. How many municipal employees have been trained in this  | reporting period?    |            | 0    |
| 6. What percent of municipal employees in relevant positions stormwater management training?                                     | s and departments r  |            | 0 %  |

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

| Name of MS4/Coalition Village of Shoreham  | NY             | 7 R 2 0      | A 3                    | 5    | 0              |
|--|----------------|--------------|------------------------|------|----------------|
| 7. Evaluating Progress Toward Measurable Goals MCM 6   |                |              |                        |      |                |
| Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.  | _              | _            |                        | Par  | t              |
| A. Briefly summarize the Measurable Goal identified in the S   | WMPP in thi    | s reportir   | ıg per                 | iod  | •              |
| Maintain Village properties and infrastructure in accordance with  | all applicable | regulation   | ns.                    |      |                |
|  |                |              |                        |      |                |
|  |                |              |                        |      |                |
| B. Briefly summarize the observations that indicated the over  | all effectiven | ess of this  | Meas                   | sura | <br>able       |
| Goal.  |                |              |                        |      |                |
| Village personnel routinely inspect and clean stormwater infrastr street sweeping. 100% of roadways are swept each year and 100 year. The Village performed infrastructure repairs and replacemed drainage system this year. | % of catch bas | sins are cle | eaned o                | eac  | h              |
| C. How many times was this observation measured or evaluate  | ed in this rep | orting pe    | eriod?                 |      |                |
|  |                |              |                        | 5    | 6              |
| D. Has your MS4 made progress toward this measurable goal  | during this r  |              |                        |      | ipants/eve     |
| 7. Tras your 19154 made progress toward this measurable goal   | during this i  | -            | -                      |      | No No          |
| E. Is your MS4 on schedule to meet the deadline set forth in t   | he SWMPP?      |              |                        |      |                |
| F. Briefly summarize the stormwater activities planned to me<br>the next reporting cycle (including an implementation sche   | 0              |              | Yes<br>C <b>M du</b> i |      | No<br><b>g</b> |
| The Village will continue to fund and support good housekeeping  | g measures.    |              |                        |      |                |
|  |                |              |                        |      |                |
|  |                |              |                        |      |                |
|  |                |              |                        |      |                |

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

|                       |                     | SPDES ID |   |   |   |   |   |   |   |   |   |
|-----------------------|---------------------|----------|---|---|---|---|---|---|---|---|---|
| Name of MS4/Coalition | Village of Shoreham |          | N | Y | R | 2 | 0 | A | 3 | 5 | 0 |
|                       |                     |          |   |   |   |   |   |   |   |   |   |

| S4s must answer the qu                   |   |  |                        |
|--|---|--|------------------------|
| MS4 Description                          | Answer                                    | Check NA                                   | (POC)                  |
| NYC EOH Watershed                        | 1 2 2 4 5 6 7 2 4 9 2 9 5 0               | - 10.11.12                                 | Phoen's arms           |
| Traditional Land Use                     | 1,2,3,4,5,6,7a-d,8a,8b,9                  | 10,11,12                                   | Phosphorus             |
| Traditional Non-Land Use Non-Traditional | 1,2,3,4,7a-d,8a,8b,9<br>1,2,77a-d,8a,8b,9 | 5,10,11,12<br>3,4,5,10,11,12               | Phosphorus Phosphorus  |
| Onondaga Lake Watershed                  | 1,2,//a-u,oa,ou,y                         | 3,4,3,10,11,12                             | r nospnorus            |
| Traditional Land Use                     | 1,6,7a-d,8a,9                             | 2,3,4,5,8b,10,11,12                        | Phosphorus             |
| Traditional Non-Land Use                 | 1,6,7a-d,8a,9                             | 2,3,4,5,8b,10,11,12<br>2,3,4,5,8b,10,11,12 | Phosphorus             |
| Non-Traditional                          | 1,6,7a-d,8a,9                             | 2,3,4,5,8b,10,11,12                        | Phosphorus             |
| Greenwood Lake Watershed                 | -   | -  | -                      |
| Traditional Land Use                     | 1,4,6,7a-d,8a,9                           | 2,3,5,8b,10,11,12                          | Phosphorus             |
| Traditional Non-Land Use                 | 1,4,6,7a-d,8a,9                           | 2,3,5,8b,10,11,12                          | Phosphorus             |
| Non-Traditional                          | 1,4,6,7a-d,8a,9                           | 2,3,5,8b,10,11,12                          | Phosphorus             |
| Oyster Bay                               | -   | -  | -                      |
| Traditional Land Use                     | 1,4,7a-d,9,10,11,12                       | 2,3,5,6,8a,8b                              | Pathogens              |
| Traditional Non-Land Use                 | 1,4,7a-d,9,10,11,12                       | 2,3,5,6,8a,8b                              | Pathogens              |
| Non-Traditional                          | 1,4,7a-d,9                                | 2,3,4,5,8a,8b,10,11,12                     | Pathogens              |
| Peconic Estuary                          | -   | -  | -                      |
| Traditional Land Use                     | 1,4,7a-d,8a,9,10,11,12                    | 2,3,5,6,8b                                 | Pathogens and Nitrogen |
| Traditional Non-Land Use                 | 1,4,7a-d,8a,9,10,11,12                    | 2,3,5,6,8b                                 | Pathogens and Nitrogen |
| Non-Traditional                          | 1,4,7a-d,8a,9                             | 2,3,4,5,8b,10,11,12                        | Pathogens and Nitrogen |
| Oscawana Lake Watershed                  | -   | -  | -                      |
| Traditional Land Use                     | 1,4,6,7a-d,8a,9                           | 2,3,5,8b,10,11,12                          | Phosphorus             |
| Traditional Non-Land Use                 | 1,4,6,7a-d,8a,9                           | 2,3,5,8b,10,11,12                          | Phosphorus             |
| Non-Traditional                          | 1,4,6,7a-d,8a,9                           | 2,3,5,8b,10,11,12                          | Phosphorus             |
| LI 27 Embayments                         | -   | -  | -                      |
| Traditional Land Use                     | 1,2,3,4,7a-d,9,10,11,12                   | 5,6,8a,8b                                  | Pathogens              |
| Traditional Non-Land Use                 | 1,2,3,4,7a-d,9,10,11,12                   | 5,6,8a,8b                                  | Pathogens              |
| Non-Traditional                          | 1,2,3,4,7a-d,9                            | 5,6,8a,8b,10,11,12  program addressing in  | Pathogens              |

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

|     |   | SPDES ID  |   |             |
|-----|---|---|---|-------------|
| Naı | me of MS4/Coalition Village of Shoreham   | N Y R 2   | 0 A 3 5                                 | 5 0         |
| 3.  | Does your MS4/Coalition have a Stormwater Conveyance and Maintenance Plan Program?  | <b>System (infrastructu</b><br>○ Yes                            | · -                                     | tion<br>N/A |
| 4.  | Estimate the percentage of on-site wastewater treatment sy and maintained or rehabilitated as necessary in this report  |   | n inspected                             | l<br>]%     |
| 5.  | Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Discharg (GP-0-08-001) to reduce pollutants in stormwater runoff fredisturb five thousand square feet or more?   | ges from Construction   | on Activitie<br>ivities that            |             |
| 6.  | Has your MS4/Coalition developed a program to address prunoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Actithe New York State Stormwater Design Manual Enhanced Standards? | that disturb greater<br>e NYS DEC SPDES<br>vities (GP-0-08-001) | than or<br>General<br>, including<br>al | N/A         |
| 7a. | Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?  | educe erosion or<br>• Yes                                       | ○ No ○                                  | N/A         |
| 7b  | How many projects have been sited in this reporting period  | d?  |   |             |
|     | What percent of the projects included in 7b have been com   |   | ing period                              | ?           |
| 7d  | What percent of projects planned in previous years have b   | •   | Projects Pla                            | %           |
| 8a  | Has your MS4/Coalition developed and implemented a turp procedures policy that addresses proper fertilizer application lands?   | f management pract  | ces and<br>wned                         | N/A         |
| 8b  | Has your MS4/Coalition developed and implemented a turprocedures policy that addresses proper disposal of grass of municipally owned lands?   |   | from                                    | N/A         |

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

|   | SPI     |      |    |     |      |     |     |              |
|---|---------|------|----|-----|------|-----|-----|--------------|
| Name of MS4/Coalition Village of Shoreham   | N       | Y    | R  | 2   | 0 .  | A 3 | 3 5 | 0            |
| 9. Has your MS4/Coalition developed and implemented a program                                 | of na   | tive | nl | ant | ino' | 9   |     |              |
| 7. This your 1415 it Countrion developed and implemented a program                            | or ma   |      | _  |     | _    |     |     | N/A          |
| 10. Has your MS4/Coalition enacted a local law prohibiting pet was prohibiting goose feeding? | te on 1 |      |    | -   | -    | -   |     | s and<br>N/A |
| 11. Does your MS4/Coalition have a pet waste bag program?                                     |         |      | Ye | es  | 0]   | No  | •   | N/A          |
| 12. Does your MS4/Coalition have a program to manage goose populations?                       |         | 0    | Ye | es  | 0]   | No  |     | N/A          |