MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 3

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MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 3

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

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Each MS4 must submit an MCC form.								
Section 1 - MCC Identification Page								
Indicate whether this MCC form is being submitted to certify endorsement	nt or ac	cepta	ance	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 b	inding	agr	eeme	nts.				
If Joint Report, enter coalition name:	Ü	Ü						
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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

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Title	
M A Y O R	
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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

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Important Instructions - Please Read	
Contact information must be provided for <u>each</u> of the following po	sitions as indicated below:
1. Principal Executive Officer, Chief Elected Official or other qua GP-0-08-002 Part VI.J).	lified individual (per
2. Duly Authorized Representative (Information for this contact m Authorized Representative is signing this form)	ust only be submitted if a Duly
3. The Local Stormwater Public Contact (required per GP-0-08-00	02 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (I coordination/implementation of SWMP).	ndividual responsible for
5. Report Preparer (Consultants may provide company name in the	e space provided).
A separate sheet must be submitted for each position listed abortilled by the same individual. If one individual fills multiple rol once and check all positions that apply to that individual.	
If a new Duly Authorized Representative is signing this report, provided and a signature authorization form, signed by the Princ Elected Official must be attached.	
For each contact, select all that apply:	
O Principal Executive Officer/Chief Elected Official	
O Duly Authorized Representative	
■ Local Stormwater Public Contact	
O Stormwater Management Program (SWMP) Coordinator	
O Report Preparer	
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Superintendent of Wate	r and Sewer
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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

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Section 2 - Contact Information

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

For each contact, select all that apply:

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

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MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 3

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

	 SPD	ES	ID						
Name of MS4 VILLAGE OF FISHKILL	N	Y	R	2	0	A	2	4	7

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 L	Last Name
J A M E S	J	MICCIO
Title (Clearly print title of individual signing report)		
M A Y O R		
Signature /		
M. M. Mara		
JAMSM/WCC		Date
programme and the second	***************************************	

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

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

This report is being submitted for the reporting period ending March 9, 2 0 1 3 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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This report is being submitted for the reporting period ending March 9, 2 0 1 3

Name of MSA/Coolisian VILLAGE OF FISHKILL	SPDES ID N Y R 2 0 A 2 4 7
Name of MS4/Coantion	
Minimum Control Measure 1. Public Edu	ication 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 Manageme	nt Practices
Check all topics that were included in Education and Outreach du	ring this reporting period:
Construction Sites	Destricts and Destricts April 1
General Stormwater Management Information	Pesticide and Fertilizer ApplicationPet Waste Management
Household Hazardous Waste Disposal	Recycling
 Illicit Discharge Detection and Elimination 	Riparian Corridor Protection/Restoration
Infrastructure Maintenance	Trash Management
Smart Growth	Vehicle Washing
O Storm Drain Marking	Water Conservation
 Green Infrastructure/Better Site Design/Low Impact Development 	Wetland Protection
Other:	O None
S M O T R A I N I N G 1 2 / 1 2 / 1 2 Other	- None
2. Specific audiences targeted during this reporting period:	
Public Employees Contractors	
ResidentialDevelopers	
BusinessesGeneral Public	
○ Restaurants	
Other: O Agricultural	
L A N D S C A P E R S L A W N C A	R E C O M P A N I E S

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

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

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This report is being submitted for the reporting period ending March 9, 2 0 1 3

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 FISHKILL SPDES ID N Y R 2	0 A 2 4 7
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieving measurable identified in your Stormwater Management Program Plan (SWMPP), including requiren III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SWMPP in this report	ting period.
EDUCATE THE GENERAL PUBLIC, DEVELOPERS AND CONTRACTORS THROUSTRIBUTION OF EDUCATIONAL BROCHURES, COOPERATION WITH THE WATERSHED COALITION DURING WATERSHED AWARENESS MONTH ACT EDUCATE CONTRACTORS IN CONSTRUCTION SITE E&SC PRACTICES. EDUCATE CONTRACTORS IN CONSTRUCTION SITE INSPECTION REQUIREMENTS. B. Briefly summarize the observations that indicated the overall effectiveness of the construction of the c	DUTCHESS FIVITIES. CATE
Goal.	
IN CONJUNCTION WITH THE DUTCHESS COUNTY MS4 COORDINATION COLOVER 4400 EDUCATIONAL BROCHURES WERE DISTRIBUTED; WATERSHED AWARENESS ACTIVITIES RECORDED 322 ATTENDEES.	
C. How many times was this observation measured or evaluated in this reporting p	period?
	1 0 amples/participants/even
D. Has your MS4 made progress toward this Measurable Goal during this reporting	
	Yes O 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).

BROCHURE PLANNED HIGHLIGHTING INDICATORS OF ILLICIT DISCHARGE AT CATCH BASINS; WATERSHED AWARENESS MONTH 2013; STORMWATER POLLUTION PREVENTION AND IDDE TRAINING CD'S BEING CIRCULTED TO MS4 COMMITTEE DPW'S; BILLBOARD CAMPAIGN TO BE IMPLEMENTED BY MS4 COMMITTEE; CONTINUED TRAINING FOR CONTRACTORS AND MUNICIPAL PERSONNEL.

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

Name of MS4/Coalition VILLAGE OF FISHKILL		ww			N	Y	R	2	0	А	2	4	7
Minimum Control Measure 2. P	ublic I	nvo	olve	eme	nt/I	Par	tic	ipa	<u>tic</u>	<u>n</u>			
The information in this section is being reported (check of	one):												
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this rep 	ort?												
1. What opportunities were provided for public development, evaluation and improvement of (SWMP) Plan during this reporting period?	the Stor	mw	ate	r Ma	anag				_	ran	n		
Cleanup Events						# E	Even	its					3
Comments on SWMP Received					# (Com	men	ts					0
Community Hotlines	Phone#	(8	4 5)	8	9	7	-	4	4	3	0
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Community Meetings					# .	Atte	nde	es					6
Plantings						S	Sq. F	t.	1	8	6	2	1
O Storm Drain Markings						# I	Draiı	1s					
Stakeholder Meetings					# .	Atte	nde	es			1	0	0
O Volunteer Monitoring						# E	Even	ts					
Other: DUTCHESSSWAMP	ART	N	E	RS	Н	I	Р						
2. Was public notice of availability of this annual Program (SWMP) Plan provided?	l report	and	I St	orm	wate	er N	Mai	ıag		ent Ye		0	No
○ List-Serve						# I	n Li	st					
Newspaper Advertising # Days Run 1													
TV/Radio Notices # Days Run													
Other:													
• Web Page URL: Enter URL(s) on the following two	o pages.												

This report is being submitted for the reporting period ending March 9, 2 0 1 3

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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$ 1 $\begin{vmatrix} 3 & 1 \end{vmatrix}$

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

SPDES ID

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Name of MS4/Coalition

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 1 & 3 \end{vmatrix}$

VILLAGE OF FISHKILL

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

SPDES ID

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This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 3 \end{bmatrix}$

	<u>.</u>	SPDI	ES ID					
Name of MS4/Coalition VILLAGE OF FISHKILL		N .	YR	2	0 7	A 2	4	7
4.a. If this report was made available on the internet, what da	ite was it	pos	sted?		_			
Leave blank if this report was not posted on the internet.	0	4	/ 1	9	/ :	2 0	1	3
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 submitt	ing a joint	t rep	port,	ans	wer	5.b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?		d?	/ 0	3		Yes 2 0	1	No 3
If No, is one planned?					9 Y	Yes	0	No
5.b. Was an Annual Report public meeting held for all MS4s	contribut	ing	to th	is I	repo	rt d	urir	ıg
this reporting period?					0 7	l'es	0	No
If No, is one planned for each?					0 1	les .	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 1	les .		No
o with in response to comments to this report.								

This report is being submitted for the reporting period ending March 9, 2 0 1 3

Name of MS4/Coalition VILLAGE OF FISHKILL	N Y R 2 0 A 2 4 7
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 (SWM III.C.1. Submit additional pages as needed.	d achieving measurable goals IPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
STRENGTHEN PARTNERSHIPS WITH WATERSHED GRO SPONSORSHIP AT "TRIBUTARY" LEVEL FOR WATERSH CONDUCT PUBLIC HEARING FOR ANNUAL REPORT. D. ACTIVITIES AND ISSUES AT MONTHLY PUBLIC VILLAGE	ED AWARENESS MONTH. ISCUSS CURRENT SWMP
B. Briefly summarize the observations that indicated the ove	erall effectiveness of this Measurable
322 ATTENDEES AT WATERSHED AWARENESS MONTH HAVE BEEN HELD FOR EACH ANNUAL REPORT AND TO HAS BEEN RECEIVED.	I EVENTS. PUBLIC HEARINGS O DATE NO PUBLIC COMMENT
C. How many times was this observation measured or evalua	ated in this reporting period?
D. Has your MS4 made progress toward this measurable goa	(ex.: samples/participants/ev. Il during this reporting period?
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	_
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	● Yes ○ No eet the goals of this MCM during edule).
CONTINUE TO SUPPORT OUTREACH BY PURSUING PAR WATERSHED GROUPS. REVISIONS TO SWMP PLAN THA PROGRESS WILL BE PRESENTED AT PUBLIC MEETING(S	T ARE CURRENTLY IN

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 3 & 1 \end{vmatrix}$

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

SPDES ID

Name of MS4/Coalition VILLAGE OF FISHKILL	N Y R 2 0 A 2 4 7
Minimum Control Massure 2 Illia	it Diaghouse Detection and Elimination
winning Control Measure 5. Inic	it Discharge Detection and Elimination
The information in this section is being reported (chec	k one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this remains the contributed to the contr	eport?
1. Enter the number and approx. percent of ou	utfalls mapped: 1 6 # 1 0 0 %
2. How many of these outfalls have been screen reporting period (outfall reconnaissance inv	
3.a. What types of generating sites/sewersheds we reporting period?	vere targeted for inspection during this
○ Auto Recyclers	Landscaping (Irrigation)
● Building Maintenance ○ 1	Marinas
ChurchesO N	Metal Plateing Operations
● Commercial Carwashes ○ (Outdoor Fluid Storage
Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
● Construction Vehicle Washouts ○ I	Printing
Cross-Connections	Residential Carwashing
O Distribution Centers	Restaurants
○ Food Processing Facilities S	Schools and Universities
○ Garbage Truck Washouts ○ S	Septic Maintenance
○ Hospitals ○ S	Swimming Pools
○ Improper RV Waste Disposal	Vehicle Fueling
○ Industrial Process Water	Vehicle Maint./Repair Shops
Other:	None
● Sewersheds: FISHKILL CREEK	/ O L D F O R G E B R O O K

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 3 \end{bmatrix}$

	SPDES ID
Name of MS4/Coalition VILLAGE OF FISHKILL	N Y R 2 0 A 2 4 7
3.b. What types of illicit discharges have	e been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	○ Inflow/Infiltration
○ Failing Septic Systems	O Pump Station Failure
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
Other: c o n t a m i n a t e d	O None s u m p p u m p d i s c h a r g e
4. How many illicit discharges/potentia	al illegal connections have been detected during this
reporting period?	
5. How many illicit discharges have been	en confirmed during this reporting period?
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during this reporting
7. Has the storm sewershed mapping b If No, approximately what percent was	• • •
8. Is the above information available in Is this information available on the VIII Is yes, provide URL(s):	
• • •	where map(s) can be accessed - not home page.
URL	
URL	

This report is being submitted for the reporting period ending March 9, 2 0 1 3

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This report is being submitted for the reporting period ending March 9, 2 0 1 3

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	SPDES ID
Name of MS4/Coalition VILLAGE OF FISHKILL	N Y R 2 0 A 2 4 7
12. Evaluating Progress Toward Measurable Goals MCM 3	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
100% OF THE CATCH BASINS INSPECTED THIS YEAR AND CLEANING ARE CURRENTLY SCHEDULED TO BE CLEAN TERMINATION OF WINTER SANDING OPERATIONS; AND INSPECTED THIS YEAR.	TED FOLLOWING
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
ONE ILLICIT DISCHARGE WAS IDENTIFIED THIS REPORT RESULT OF DEWATERING A FLOODED BASEMENT TO A DISCHARGE CONTAINED PETROLEUM PRODUCTS. THE THE CONTAMINATION CLEAN UP WAS PERFORMED BY REMEDIATION COMPANY.	STORM SEWER. THE NYSDEC WAS ALERTED AND
C. How many times was this observation measured or evaluate	ed in this reporting period?
D. Has your MS4 made progress toward this measurable goal	(ex.: samples/participants/events,
27 IIII Jour Mare Progress to war was measurable goar	Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	et the goals of this MCM during
CONTINUED INSPECTION OF CATCH BASINS AND OUTFA	ALLS; ALL OF THE CATCH

BASINS IN STORMWATER COLLECTION SYSTEM WITHIN THE VILLAGE HAVE BEEN LOCATED USING GPS AND HAVE BEEN MAPPED IN A GIS SYSTEM WHICH WILL BEGIN TO BE IMPLEMENTED DURING THE NEXT REPORTING PERIOD FOR TRACKING MAINTENANCE.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 1 \end{vmatrix}$ 3

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

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Name of MS4/Coalition	VILLAGE OF FISHKILL	Ν	Y	R	2	0	А	2	4	7

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

	Construction Site and Post-Construction Control		
Tł	ne 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?		
12	a. Has each MS4 contributing to this report adopted a law, ordinance or other reg mechanism that provides equivalent protection to the NYS SPDES General Peri Stormwater Discharges from Construction Activities?	ulatory mit for • Yes	○ No
11	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 I Sediment Control through either an attorney cerfification or using the NYSDEC Analysis Workbook?	Erosion	w is and ONT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Lar © 09/2004 • 03	w. 3/2006	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?	e been	0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs? • Yes	blic ○ No	ONT
	If Yes, how many public comments were received during this reporting period?		0
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	the loca ● Yes	ıl O No

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

O Notices of Violation	#		0	No Authority
O Stop Work Orders	#		0	O No Authority
O Criminal Actions	#		0	O No Authority
O Termination of Contracts	#		0	O No Authority
O Administrative Fines	#		0	O No Authority
O Civil Penalties	#		0	O No Authority
O Administrative Orders	#		0	O No Authority
O Enforcement Actions or Sanctions	#		0	
Other	#		0	O No Authority

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 1 \end{vmatrix}$ 3

	SPDES ID		
Na	me of MS4/Coalition VILLAGE OF FISHKILL N Y R 2	0 A 2	4 7
	Minimum Control Measure 4. Construction Site Stormwater Runo	off Con	<u>itrol</u>
Th	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?		
1.	How many construction projects have been authorized for disturbances of one a during this reporting period?	acre or	more 0
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	liction 0
3.	What percent of active construction sites were inspected during this reporting p	period?	
4.	What percent of active construction sites were inspected more than once?	1 0	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? Yes	the NY	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approva		ans
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?		
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	1.	

This report is being submitted for the reporting period ending March 9, 2 0 1 3

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

SPDES ID VILLAGE OF FISHKILL N Y R 2 0 A 2 4 Name of MS4/Coalition 6. con't.: Submit additional pages as needed. ■ MS4/Coalition Office Department BU I L D IN G ZON I N G D E P A RTMEN Address 1 0 9 5 IN S Т EE M A R Т City Zip \mathbf{F} Ι SH K IL L NY 1 2 5 2 4 Phone 8 4 5 9 7 4 3 O Library Address City Zip Phone Other Address City Zip Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL URL

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

This report is being submitted for the reporting period ending March 9, 2 0 1 3

				SPDES	S ID		
Name of MS4/Coalitio	VILLAGE OF FISHE	KILL		N Y	R 2	0 A 2	2 4 7
<u>Minimum</u>	Control Mea	sure 5. Post	-Constructio	n Stormwate	er Mar	ıagem	<u>ent</u>
The information in t	his section is bein	g reported (chec	ck one):				
On behalf of an in On behalf of a coa		ributed to this 1	report?				
1. How many and	-	st-construction	stormwater ma			your	
		# Inventoried	# Inspections	# Times Maintained			
O Alternative Practic	ces						
O Filter Systems							
O Infiltration Basins							
Open Channels		1	1	0			
Ponds		2	2	0			
○ Wetlands							
Other		1	1	0			
2. Do you use an BMPs, inspecti			base, spreadsl	neet) to track po		structio	on No
3. What types of Development/E					Impac	et	
O Building Codes	O Municipal Co	omprehensive Pl	ans				
Overlay Districts	Open Space I	Preservation Pro	gram				
O Zoning	O Local Law or	Ordinance					
None	O Land Use Re	gulation/Zoning					
O Watershed Plans	Other Compr	ehensive Plan					
Other:							-

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 1 \end{vmatrix}$ 3

	SPDES ID				
Naı	me of MS4/Coalition VILLAGE OF FISHKILL N Y R 2	0 7	A 2	4	7
4a	. Are the MS4s contributing to this report involved in a regional/watershed wide plann	_	effor Yes		No
4b	. Does the MS4 have a banking and credit system for stormwater management practice	es?			
		0	Yes		No
4c.	. Do the SWMP Plans for each MS4 contributing to this report include a protocol for each and approval of banking and credit of alternative siting of a stormwater management	pra		?	No
4d.	. How many stormwater management practices have been implemented as part of this reporting period?	syste	em ir	th	is
5.	What percent of municipal officials/MS4 staff responsible for program implementation	n at	tend	ed	

This report is being submitted for the reporting period ending March 9, 2 0 1 3

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 FISHKILL SPDES ID N Y R 2 0 A 2 4 7
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.
REQUIRE POST CONSTRUCTION STORMWATER CONTROLS FOR REDEVELOPMENT PROJECTS WITH LAND DISTURBANCE ACTIVITIES EXCEEDING 0.5 ACRE; INSPECT 100% OF EXISTING BMP'S OWNED BY VILLAGE OR WITH STORMWATER MAINTENANCE AGREEMENT IN PLACE.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
ONE REDEVELOPMENT PROJECT WITH GREATER THAN 0.5 ACRE DISTURBANCE WAS APPROVED DURING THIS REPORTING PERIOD AND EXISTING BMP'S HAVE BEEN INSPECTED. NO MAINTENANCE HAS BEEN REQUIRED AND NO VIOLATIONS HAVE BEEN ISSUED.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/event 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 HAS OBTAINED GPS EQUIPMENT AND HAS BEGUN TO CREATE MAPPING OF THE BMP'S IN CONJUNCTION WITH ONGOING INSPECTIONS AND MAINTENANCE. CATCH BASINS HAVE BEEN INSPECTED AND WILL BE CLEANED AS REQUIRED. 100% OF BMP'S WILL BE INSPECTED AND MAINTAINED AS NECESSARY.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 3$

Name of MS4/Coalition VILLAGE OF FISHKILL			SPDES I		A 2 4 7	
Minimum Control Measure 6. Stormy	water Mana	gement f	or Mun	icipal	Operations	
The information in this section is being reported (ch	eck one):					
On behalf of an individual MS4						
On behalf of a coalition How many MS4s contributed to this	s report?					
1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already. Self-Assessment Operation/Activity/Facility performed within the past 3						
·			Sel Operation	f-Assess on/Activ	ement ity/Facility n the past 3	
Operation/Activity/Facility	Addressed in	SWMP?	Sel Operation	f-Assess on/Activ ed within years:	ement ity/Facility n the past 3	
Operation/Activity/Facility Street Maintenance	Addressed in	SWMP?	Sel Operation performo	f-Assess on/Activ ed within years:	ement ity/Facility n the past 3 No	
Operation/Activity/Facility Street Maintenance	Addressed in • Yes • Yes	SWMP? O No No	Sel Operation performe	if-Assess on/Activ ed within years'. Yes Yes	ment ity/Facility n the past 3 No No	
Operation/Activity/Facility Street Maintenance Bridge Maintenance Winter Road Maintenance	Addressed in • Yes ○ Yes ○ Yes	SWMP? O No No	Sel Operation	f-Assess on/Actived within years: Yes Yes Yes	ement ity/Facility n the past 3 No No No	
Operation/Activity/Facility Street Maintenance	Addressed in	SWMP? O No No No No	Sel Operation performe	if-Assess on/Actived within years: Yes Yes Yes Yes Yes	ement ity/Facility n the past 3 No No No No No	
Operation/Activity/Facility Street Maintenance	Addressed in	SWMP? O No No No No No	Sel Operation performe	df-Assess on/Actived within years: Yes Yes Yes Yes Yes Yes	ment ity/Facility n the past 3 No No No No No No	
Operation/Activity/Facility Street Maintenance	Addressed in	SWMP? O No No No No No No	Sel Operation performe	f-Assess on/Actived within years: Yes Yes Yes Yes Yes Yes Yes Yes	ment ity/Facility n the past 3 No No No No No No No	
Operation/Activity/Facility Street Maintenance	Addressed in	SWMP? O No No No No No No No No No No	Sel Operation performo	f-Assess on/Actived within years: Yes Yes Yes Yes Yes Yes Yes Yes Yes	ement ity/Facility n the past 3 No No No No No No No No No No No No No	
Operation/Activity/Facility Street Maintenance	Addressed in Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	SWMP? O No No No No O No O No No No No No No No	Sel Operation performe	df-Assess on/Actived within years: Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	ment ity/Facility n the past 3 No No No No No No No No No No No No No	
Operation/Activity/Facility Street Maintenance	Addressed in	SWMP? O No No No No O No O No O No No No No No No No No	Sel Operation performs	df-Assess on/Actived within years: Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	ment ity/Facility n the past 3 No No No No No No No No No No No No No	
Operation/Activity/Facility Street Maintenance	Addressed in Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	SWMP? O No No No No No No No No No No No No No No No No	Sel Operation performo	f-Assess on/Actived within years: Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	ment ity/Facility n the past 3 No No No No No No No No No No No No No	
Operation/Activity/Facility Street Maintenance	Addressed in Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	SWMP? O No No No No No No No No No No No No No No No No No No	Sel Operation performe	df-Assess on/Actived within years: Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	ment ity/Facility n the past 3 No No No No No No No No No No No No No	
Operation/Activity/Facility Street Maintenance	Addressed in	SWMP? O No	Sel Operation performs	df-Assess on/Actived within years' Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	ment ity/Facility n the past 3 No No No No No No No No No No No No No	
Operation/Activity/Facility Street Maintenance	Addressed in	SWMP? O No No No No No No No No No No No No No No No No No No	Sel Operation performe	df-Assess on/Actived within years' Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	ment ity/Facility n the past 3 No No No No No No No No No No No No No	

This report is being submitted for the reporting period ending March 9, 2 0 1 3

	SPDES ID
Name of MS4/Coalition VILLAGE OF FISHKILL	N Y R 2 0 A 2 4 7
2. Provide the following information about municipal operat	tions good housekeeping programs
Parking Lots Swept (Number of acres X Number of times swep	pt) # Acres 0 4 8
• Streets Swept (Number of miles X Number of times swept)	# Miles 5
O Catch Basins Inspected and Cleaned Where Necessary	# 2 3 2
Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	# 3
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
3. How many stormwater management trainings have been p	provided to municipal employees
during this reporting period?	3
4. What was the date of the last training?	1 2 / 1 2 / 2 0 1 2
5. How many municipal employees have been trained in this	reporting period?
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments receive

III.C.1. Submit additional pages as needed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

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 FISHKILL

N Y R 2 0 A 2 4 7

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part

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

100% OF VILLAGE STREETS AND PARKING AREAS WERE SWEPT; 100% OF VILLAGE CATCH BASINS WERE INSPECTED; DPW STAFF WERE TRAINED IN GOOD HOUSEKEEPING & IDDE; POST-CONSTRUCTION VILLAGE SMO AND VILLAGE ENGINEER TRAINED IN GREEN INFRASTRUCTURE; CONSTRUCTION SITE SMO TRAINED IN MUNICIPAL CONSTRUCTION SITE INSPECTIONS.

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

STREET AND PARKING LOT SWEEPING REDUCED DICHARGE OF SEDIMENT AND DEBRIS TO THE STORMWATER COLLECTION SYSTEM; CATCH BASIN INSPECTION IDENTIFIED 95 CATCH BASINS THAT REQUIRE CLEANING.

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

(ex.: samples/participants/events)

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

Yes O No

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

● Yes ○ No

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

100% OF THE CATCH BASINS HAVE BEEN MAPPED IN CONJUNCTION WITH ESTABLISHING A VILLAGE GIS SYSTEM. THE GIS SYSTEM WILL CONTINUE TO BE DEVELOPED TO RECORD CATCH BASIN CONDITION AND NEED FOR CLEANING AND REPAIR. OUTFALLS AND BMPS WILL ALSO BE MAPPED DURING THIS YEAR'S INSPECTION AND MAINTENANCE WILL BE RECOMMENDED AS NECESSSARY.

This report is being submitted for the reporting period ending March 9, 2 0 1 3

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

ame of MS4/Coalition					
Additional Wate	ershed Improvemen	nt Strategy Best M	anagement Prac	<u>tices</u>	
ne information in this section	on is being reported (chec	k one):			
On behalf of an individual On behalf of a coalition	MS4				
	S4s contributed to this re	eport?			
ra 1					
S4s must answer the qu	estions or check NA a	s indicated in the tab	le below.		
MS4 Description	Answer	Check NA	(POC)		
NYC EOH Watershed	-	-	-		
Traditional Land Use Traditional Non-Land Use	1,2,3,4,5,6,7a-d,8a,8b,9 1,2,3,4,7a-d,8a,8b,9	10,11,12 5,10,11,12	Phosphorus		
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus Phosphorus		
Onondaga Lake Watershed	-	-	- I nosphorus		
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus		
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus		
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus		
Greenwood Lake Watershed	-	-	-		
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Non-Traditional Oyster Bay	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pothogona		
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens Pathogens		
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens		
Peconic Estuary	-	-	- Tathogens		
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitro	gen	
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitro		
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitroge		
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 Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	*****	
LI 27 Embayments	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Fraditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens		
	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b			
Fraditional Non-Land Use	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens Pathogens		

This report is being submitted for the reporting period ending March 9, 2 0 1 3

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		SPDES ID		
Na	ame of MS4/Coalition VILLAGE OF FISHKILL	N Y R 2	0 A	2 4 7
3.	. Does your MS4/Coalition have a Stormwater Conveyance S and Maintenance Plan Program?	System (infrastructi • Yes	ure) Ins O No	pection O N/A
4.	. Estimate the percentage of on-site wastewater treatment sys and maintained or rehabilitated as necessary in this reporti		n inspe	cted 0 %
5.	Has your MS4/Coalition developed a program that provided NYSDEC SPDES General Permit for Stormwater Discharg (GP-0-08-001) to reduce pollutants in stormwater runoff from disturb five thousand square feet or more?	ges from Constructi	on Activ	vities
6.	Has your MS4/Coalition developed a program to address por runoff from new development and redevelopment projects to equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Active the New York State Stormwater Design Manual Enhanced Standards?	that disturb greater NYS DEC SPDES vities (GP-0-08-001)	than of General	r I
7a	a. Does your MS4/Coalition have a retrofitting program to red phosphorus/nitrogen/pathogen loading?	luce erosion or ○ Yes	○ No	● N/A
7b	o. How many projects have been sited in this reporting period	?		
	. What percent of the projects included in 7b have been comp	_	ing per	iod?
/d	I. What percent of projects planned in previous years have be	-	Dusianta	% Plans d
Ba.	.Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper fertilizer application lands?	management practi	ices and	Planned N/A
Bb.	e.Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper disposal of grass climunicipally owned lands?	management practi ippings and leaves to O Yes	ices and from ○ No	I ● N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 3

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		SPDES ID							
Name of MS4/Coalition VILLAGE OF FISHKILL	N	Y	R	2	0	A	2	4	7
9. Has your MS4/Coalition developed and implemented a program	m of na	tiv	e pl	lan	tin	g?			
) Y	es	С	No)	1	N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet was prohibiting goose feeding?	iste on i			_	_	_			and N/A
11. Does your MS4/Coalition have a pet waste bag program?		C) Y	es	0	No	,	® 1	N/A
12. Does your MS4/Coalition have a program to manage goose populations?		C) Ye	es	0	No)	N	V/A