#### MS4 Annual Report Cover Page

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

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Joint	reports	require only	y one cove	r page.		

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#### **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

Town of Lewisboro

#### **OR**

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

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

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#### **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.

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# MS4 Annual Report Cover Page

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

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

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

SPDES ID

Name of MS4 Town of Lewisboro		N	Y	R	2	0	A	2	2	7				
Each MS4 must submit an MCC form.														
Section 1 - MCC Identification Page														
Indicate whether this MCC form is being submitted to certify endorseme  • An Annual Report for a single MS4	nt or ac	сер	tano	ce c	of:									
O 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	g ag	ree	me	nts.	•								
If Joint Report, enter coalition name:														

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

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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
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name	MI Last Name											
Peter	Parsons											
Title												
Supervisor												
Address												
1 1 Main Street												
City	State Zip											
South Salem	N Y 1 0 5 9 0 -											
eMail												
supervisor@lewis	sborogov.com											
Phone County												
	County											

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

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

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

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For each contact, select all that apply:

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

First Name  Joseph	MI Last Name  M C e r m e 1 e
Title	
Town Consulting	E n g i n e e r
Address	
500 Main Street	
City	State Zip
City A r m o n k	State Zip    N   Y   1   0   5   0   4   -
Armonk	
A r m o n k  eMail	
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MCC form for period ending March 9, 2 0 2 1

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Section 4 - Certification Statement										
"I certify under penalty of law that this document and all attachmedirection or supervision in accordance with a system designed to a properly gathered and evaluated the information submitted. Based persons who manage the system, or those persons directly respons the information submitted is, the best of my knowledge and belief, aware that there are significant penalties for submitting false information and imprisonment for knowing violations."	ssure on my ible for true, mation	that or y inquestion gat accurate accur	qual uiry heri rate clud	ifie of ng , an ing	d p the the d c the	erso per info omp	onne rson orm plet ssib	el n or nati te. I pilit	on, I an ty o	n
This form must be signed by either a principal executive officer or authorized representative of that person as described in GP-0-08-0	ranki 02 Pa	ing el ırt VI	ecte .J.	ed o	ffic	ial,	, or	dul	y	
First Name  MI Last Name  Peter  Par	s o	n s	T							
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Title (Clearly print title of individual signing report)  S u p e r v i s o r										
Signature		Date	]/			]/				
Send completed form and any attachments to the DEC Central Of	fice at	t:								
MS4 Permit Coordinator										

Division of Water 4th Floor 625 Broadway Albany, New York 12233-3505 Name of MS4 Town of Lewisboro

# MS4 Municipal Compliance Certification (MCC) Form

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

SPDES ID

N Y R 2 0 A 2 2 7

Section 3 - Partner Information  Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting
period?
If Yes, complete information below.
Submit a separate sheet for each partner. Information provided in other formats will not be
accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.
If No, proceed to Section 4 - Certification Statement.
Partner/CoalitionName  E a s t o f H u d s o n W a t e r s h e d
Tall the free control of t
Address  1 1 4 2 R o u t e 3 1 1
City State Zip
Patterson         NY 12563 -
eMail
supervisor@pattersonny.org
Phone Legally Binding Agreement in accordance
( 9 1 4 ) 8 7 8 - 6 5 0 0 with GP-0-08-002 Part IV.G.? • Yes • No
What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)
O MM1
O MM2
O MM3
O MM4
MM5 Retrofit Program
O MM6
Additional tasks/responsibilities
• Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.
Stormwater Retrofit Program (IX5b).

Name of MS4 Town of Lewisboro

# MS4 Municipal Compliance Certification (MCC) Form

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

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

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

If submitting this form as part of a joint report on ben	all of a coalition	ica	/ C D	עני	טנגנ	ш	Ula	11171		
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Name of MS4/Coalition Town of Lewisboro	N Y R 2 0 A 2 2 7
Minimum Control Measure 1. Public Edu	cation and Outreach
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. Targeted Public Education and Outreach Best Manageme	nt Practices
Check all topics that were included in Education and Outreach du	iring this reporting period:
<ul><li>Construction Sites</li></ul>	Pesticide and Fertilizer Application
General Stormwater Management Information	Pet Waste Management
<ul> <li>Household Hazardous Waste Disposal</li> </ul>	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:  P h o s p h o r u s r e d u c t i o n  Other  2. Specific audiences targeted during this reporting period:	○ None
● Public Employees ● Contractors	
● Residential • Developers	
○ Businesses	
○ Restaurants ○ Industries	
○ Other: • Agricultural	
Other	

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID 7 NYR 0 A 2 2 Town of Lewisboro Name of MS4/Coalition 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply: # Trained O Construction Site Operators Trained 2 2 9 1 4 #Mailings Direct Mailings 2 # Locations • Kiosks or Other Displays 5 6 1 # In List List-Serves 7 3 3 4 # In List Mailing List 0 # Days Run Newspaper Ads or Articles 0 # Attendees Public Events/Presentations # Attendees O School Program 2 4 2 # Days Run TV Spot/Program 6 3 9 1 4 Total # Distributed Printed Materials: Locations (e.g. libraries, town offices, kiosks) 1 1 Η а W n i b а r r 1 | d | i n D е р t g i В u Other: i n R r е а t 0 & е С k s Par Provide specific web addresses - not home page. Continue on next page if additional space is • Web Page: needed. URL

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

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

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

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

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#### 4. Evaluating Progress Toward Measurable Goals MCM 1

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Continue to update the webpage for stormwater management on the Town website including listing of available education materials, and notice of upcoming regional presentations and related stormwater management events, print and make available brochures and newspaper printing on targeted management practices, continue to develop a collection of educational stormwater management materials and make available to the public and continue to broadcast educational

material on public access television.

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

The Town of Lewisboro is continuing to update the website as needed. In addition, the Town has continued to gather and distribute information about stormwater management and phosphorus reduction. Residents have received an e-mail notice on stormwater management. The public has been informed on any stormwater related events.

a real distribution management or evaluated in this rene	orting period?
C. How many times was this observation measured or evaluated in this repo	
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this Measurable Goal during this	reporting period?
D. Has your Mist made progress to war a very	● 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).

Print, mail, e-mail and broadcast on public TV stormwater management information to residents. Ongoing: Continue to update the website on stormwater management, continue to collect and distribute educational materials, notify the public of upcoming presentations and related stormwater events. Continue to air stormwater public service announcements and/or stormwater-related programs on local television.

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID YR 0 A 2 2 7 Ν Town of Lewisboro Name of MS4/Coalition Minimum Control Measure 2. Public Involvement/Participation The information in this section is being reported (check one): • On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply: 1 # Events Cleanup Events #Comments O Comments on SWMP Received Phone # Community Hotlines 9 Phone # Phone# 3 1 6 6 6 3 Phone # Phone # 1 Phone # Phone # Phone # Phone # Phone # Phone# 5 7 # Attendees Community Meetings Sq. Ft. Plantings #Drains O Storm Drain Markings 0 # Attendees Stakeholder Meetings 5 4 # Events Volunteer Monitoring Other: 2. Was public notice of availability of this annual report and Stormwater Management O No Program (SWMP) Plan provided? 1 5 # In List 6 List-Serve # Days Run Newspaper Advertising # Days Run O TV/Radio Notices d a Other: Town Board A g e | n

MCM 2 Page 1 of 6

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

URL

### **MS4 Annual Report Form**

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

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

SPDES ID N Y R 2 0 A 2 2 7 Name of MS4/Coalition Town of Lewisboro 2. URL(s) con't.: Please provide specific address(es) where notice(s) can be accessed - not home page. s m c isborogov c o m 1 e w URL URL URL URL

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## **MS4 Annual Report Form**

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID N Y R 2 0 A 2 2 7 Name of MS4/Coalition Town of Lewisboro 2. URL(s) con't.: Please provide specific address(es) where notices can be accessed - not home page. URL URL URL URL

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID 7 Name of MS4/Coalition Town of Lewisboro N Y R 0 A 2 2 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents? Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed. ■ Annual Report
■ SWMP Plan
○ Comments MS4/Coalition Office Department Η 1 1 0 W а f L i b r 0 0 e w s 0 T o | w | nAddress d n R 0 а 7 9 u t 0 В 0 Zip City 5 9 0 0 Ν Y 1 1 S S o u t h а е m Phone 6 3 3 5 1 1 7 1 4 O Comments O Library Address O Annual Report O SWMP Plan Zip City Phone O Annual Report O SWMP Plan O Comments Other Address Zip City Phone SWMP Plan Comments Annual Report • Web Page URL: t i С 0 m G 0 v е rln m n b 0 0 V 1 е W s 0 r g W W W i o r m W a t 1 t  $u \mid n \mid c \mid$ s s i d С 0 С 0 m m t t е e s a n t | m | 1 h r Please provide specific address of page where report can be accessed - not home page. O Comments O eMail

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

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	was made available on the internet, what da	ate was i	t po	sted?	I			
Leave blank if t	his report was not posted on the internet.	0	5	/ 1	0	/ 2	0	2 1
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	ting a joi	nt re	port,	ans	wer 5	5.b	
	al Report public meeting held in this report was the date of the meeting?	ting peri	T	/ 1	0	• Y		O No 2 1
If No, is one	planned?					$\circ$ Y	es	• No
5.b. Was an Annua	al Report public meeting held for all MS4s	contribu	ıtinş	g to t	his			
this reporting	period?					O Y	es es	• No
If No, is one	planned for each?					O Y	l'es	No
If Yes, attach co	ts received during this reporting period?  omments, responses and changes made to onse to comments to this report.					O Y	les .	• No

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

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

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Name of MS4/Coalition Town of Lewisboro	] [							L		

#### 7. Evaluating Progress Toward Measurable Goals MCM 2

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Town continues participation as a member of the CKWIC & EOHWC & with CSLAP, schedule and conduct stormwater meetings, provide public notice through televised Town Board meetings and the website, provide full access to the public to review and request copies of all information collected and developed as part of the Town SWMP. The Town posted the Annual Report on the website and made it available for public review and comment with Notice made at public Town Board Meeting.

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

The Town Stormwater Consultant attended EOHWC meetings as appropriate 5 lakes in the Town were monitored 8 times each with supplemental monitoring on 3 lakes through the CSLAP program with 4 participants. No public comments were received with regard to the Annual Report.

C. How many times was this observation measured or evaluated in this reporting	perio	d?	
			1

(ex.: samples/participants/events)

- D. Has your MS4 made progress toward this measurable goal during this reporting period?
  - Yes No
- E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
- Yes O No
- F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Ongoing: Continue to schedule and conduct semi-monthly stormwater meetings, continue to participate in CKWIC and EOHWC, provide public notice of all SWMP related events and access to all reports, hold a public meeting for the annual report and participate in CSLAP. CSLAP volunteer monitoring is temporarily on hold for 2020 due to COVID-19 and will resume pending ability to sample safely and gain access to certified testing lab for sample processing.

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

Name of MS4/Coalition Town of Lewisboro	SPDES ID  N Y R 2 0 A 2 2 7
Minimum Control Measure 3.	<b>Illicit Discharge Detection and Elimination</b>
The information in this section is being reported ( ● On behalf of an individual MS4 ○ On behalf of a coalition How many MS4s contributed to t  1. Enter the number and approx. percent	his report?
reporting period (outfall reconnaissance	creened for dry weather discharges during this e inventory)?  1 5 8  eds were targeted for inspection during this  (+/- 20%)
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
○ Cross-Connections	O Residential Carwashing
O Distribution Centers	<ul><li>Restaurants</li></ul>
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	• Septic Maintenance
○ Hospitals	Swimming Pools
O Improper RV Waste Disposal	<ul><li>Vehicle Fueling</li></ul>
O Industrial Process Water	• Vehicle Maint./Repair Shops
Other:	O None
● Sewersheds:  E a s t o f H u d s c	

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

	SPDES ID
Name of MS4/Coalition Town of Lewisboro	N Y R 2 0 A 2 2 7
3.b. What types of illicit discharges have	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
• Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows
• Illegal Dumping	O Straight Pipe Sewer Discharges
Other:  LaundryDisch	○ None         a r g e       t o       D r y w e l l       l
4. How many illicit discharges/potential reporting period?	l illegal connections have been detected during this
5. How many illicit discharges have bee	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 be If No, approximately what percent was	een completed in this reporting period?  • Yes • No completed in this reporting period?  • Yes • No 1 0 0 %
8. Is the above information available in Is this information available on the war If Yes, provide URL(s):  Please provide specific address of page URL	
URL	

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

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

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#### 12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Town continues to enforce a local law requiring septic system pump outs and inspections by all residents at least once every 5 years. Conduct training for Town employees following any changes to the local law addressing illicit discharges. Identify and eliminate any illicit discharges identified. Continue to require yearly septic inspections for residences with septic systems in wetland and wetland buffer as per Planning Board requirements.

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

There were 2 illicit discharges to report this period, both confirmed and 1 to be corrected. The Town Consulting Engineer completed +/-20% Town-Wide outfall reconnaissance inspections for a total of 158 outfalls. A report indicating all inspected outfalls requiring maintenance was provided to the Town Highway Department.

C. How many times was this observation measured or evaluated in this repo	rting	period	1?	
·			-	1
	(ex.:	samples/	'participa	nts/events)

- D. Has your MS4 made progress toward this measurable goal during this reporting period?
  - Yes No
- E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
- Yes No
- F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Conduct employee training. Inspect and collect data of +/-20% of the known outfalls using the reconnaissance inventory method. Ongoing:Maintain illicit discharge community hotline. Conduct inspections of alleged illicit discharges. Eliminate all illicit discharges and coordinate investigation/correction of illicit discharges with WCHD or appropriate authority when necessary. Continue to require septic system inspections, as required by the Town Code.

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

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

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# Minimum Control Measures 4 and 5.

	Construction Site and Post-Construction Control	
The	e information in this section is being reported (check one):	
● C	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1a.	Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?	○ No
1b.	.Has each Town, City and/or Village contributing to this report documented that the law equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?	v is and O NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  ○ 09/2004 ● 03/2006	ONT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	○ No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?	3 0
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?  • Yes • No	ONT
	If Yes, how many public comments were received during this reporting period?	7
5.	Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?  • Yes	al 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:

<ul><li>Notices of Violation</li></ul>	#			1	<ul><li>No Authority</li></ul>
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, 2 0 2 1 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 Town of Lewisboro		N	Y	R	2	0	A	2	2	7
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	Minimum Control Measure 4. Construction Site Stormwater Runo	ff Cont	rol
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?		
1.	How many construction projects have been authorized for disturbances of one a during this reporting period?	icre or n	ore 6
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisdi	ction 6
3.	What percent of active construction sites were inspected during this reporting p	period?	○ NT 0 %
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 NYS	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	ntion Pla al? O No	ans
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avpublic review?	ailable f ○ Yes	or O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	d.	

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

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

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

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

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Name of MS4/Coalition	Town of Lewisboro	N	Y	R	2	0	A	2	2	7

#### 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.

Review of all basic and full SWPPPs and conduct construction site inspections in accordance with the NYS manual. Implement mechanism to address non-compliance of stormwater management ordinance. Town continues to provide public access to SWPPPs. The Town continues to enforce the stormwater ordinance which reflects updates to the General Permit, as well as implement a local stormwater permit for disturbances >5,000 s.f. Town-wide.

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

100% of full and basic SWPPPs were reviewed by the Town Consulting Engineer. All plans were reviewed in accordance with the NYS Design Manual. 100% of construction sites were inspected and were inspected in accordance with the NYS Design Manual. Local Town stormwater permits have been issued as a result of the adopted stormwater ordinance.

C. How many times was this observation measured or evaluated in this rep	orting period?	
		1
	(ex.: samples/par	ticipants/events)
D. Has your MS4 made progress toward this measurable goal during this r	eporting period	1?
D. 11ms your 1250 12mms paragraphs	Yes	○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?		
23. In John Man Company	Ves	$\bigcirc$ No

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

Ongoing: Continue to review full and basic SWPPPs, conduct site inspections in accordance with the stormwater manual. Continue to provide public access to SWPPPs. Use revised environmental questionnaire for all Building Permit Applications to determine if coverage under SPDES or local Town stormwater permit is required.

• Other:

u

# MS4 Annual Report Form

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

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

II Suomitting	5 mio form do par	t or a joint repo		SPDES ID	
Name of MS4/Coalition	Town of Lewisboro			N Y R	2 0 A 2 2 7
Minimum C	Control Meas	sure 5. Post-	<u>Constructio</u>	n Stormwater N	<u>/Ianagement</u>
The information in this	s section is being	g reported (chec	k one):		
<ul><li>On behalf of an indi</li><li>On behalf of a coali</li></ul>	tion		40		
	any MS4s contr				
1. How many and w MS4/Coalition in	hat type of post ventoried, inspe	t-construction sected and main	stormwater ma tained in this r	nagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
Alternative Practice	es	4	4	4	
Filter Systems			1	0	
O Infiltration Basins					
Open Channels					
○ Ponds					
<ul><li>Wetlands</li></ul>			1.	0	
Other					
2. Do you use an e BMPs, inspection	ons and mainta	anance?			● Yes ○ No
3. What types of n Development/B	ion-structural etter Site Desi	practices have gn/Green Infr	e been used to astructure pri	implement Low Inciples?	mpact
<ul><li>Building Codes</li></ul>	<ul><li>Municipal C</li></ul>	omprehensive P	lans		
Overlay Districts	Open Space	Preservation Pro	ogram		
<ul><li>Zoning</li></ul>	O Local Law o	r Ordinance			
○ None	• Land Use Re	egulation/Zoning	7		
• Watershed Plans	• Other Comp	rehensive Plan			

t a i n a b i l i t y

 $C \mid o \mid m \mid m \mid i \mid t \mid t \mid e \mid e$ 

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

				SPDI	ES ID	)				
Nar	me of MS4/Coalition Town of Lewisboro			N	Y R	2	0 .	A 2	2	7
	. Are the MS4s contributing to this rep							effor Yes		No
4b	o. Does the MS4 have a banking and cre	edit system for stormwater	r manage	ment	pra	ctic		Yes		No
4c.	e. Do the SWMP Plans for each MS4 co and approval of banking and credit o	ntributing to this report in f alternative siting of a sto	nclude a j ormwater	proto mar	col f iagei	or e	t pra	ation ectico Yes	e?	No
4d	I. How many stormwater management reporting period?	practices have been imple	mented a	s par	t of	this	syst	em i	n th	is ]
5.	What percent of municipal officials/N training on Low Impace Developmen Infrastructure principles in this repo	t (LID), Better Site Design	orogram i 1 (BSD) a	mple nd o	emen ther	tati Gre	on a	ttend	led 0	] %

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

Name of MS4/Coalition Town of Lewisboro SPDES ID N Y R 2 0 A 2 2 7

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

#### 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.

Participate in the Croton Kensico Watershed Intermunicipal Coalition (CKWIC) and EOHWC regarding retrofitting programming and other aspects of regional stormwater cooperation. Continue to inspect stormwater management practices and report on condition. Continue to evaluate potential stormwater retrofit projects.

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

The Town of Lewisboro Town Consulting Engineer attends EOHWC meetings, as requested. EOHWC is currently working on Year 6-10 Retrofit Projects. Post-management stormwater structures are continuing to be identified and maintained as part of the Town's stormwater management plan.

			_		10
$\boldsymbol{C}$	How many times was	this observation	measured or	r evaluated in	this reporting period?
•	HUM Many mines mas		III CHDUI CA		

(ex.: samples/participants/events)

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

• Yes O No

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

• Yes O No

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

Continue to participate in CKWIC and EOHWC. Conduct inspections on structural and non-structural stormwater practices and continue to implement necessary maintenance and repairs. Continue to seek additional stormwater retrofit projects. Commence inventory of local stormwater best management practices for projects requiring post-construction stormwater management.

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

		SPE	ES	ID						
Name of MS4/Coalition Town of Lewisboro		N	Y	R	2	0	A	2	2	7
Name of Mist, Countries	'									

# 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         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

		perfor	med withir	the past 3
Operation/Activity/Facility	Addressed in	n SWMP?	years?	•
Street Maintenance	● Yes	○ No	• Yes	○ No
Bridge Maintenance	~ TT	• No	O Yes	<ul><li>No</li></ul>
Winter Road Maintenance		○ No	• Yes	$\bigcirc$ No
Salt Storage		○ No	• Yes	○ No
Solid Waste Management		• No	O Yes	No
New Municipal Construction and Land Disturba		○ No	• Yes	$\circ$ No
Right of Way Maintenance	<b>A</b> Y 7	○ No	• Yes	$\bigcirc$ No
Marine Operations		• No	O Yes	No
Hydrologic Habitat Modification	O * 7	• No	O Yes	<ul><li>No</li></ul>
Parks and Open Space	<b>*</b> T T	○ No	🖲 Yes	○ No
Municipal Building		○ No	• Yes	$\circ$ No
Stormwater System Maintenance		○ No		$\bigcirc$ No
Vehicle and Fleet Maintenance	A 77	○ No	• Yes	○ No
Other		○ No		○ No

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

	25D	E9 ID	,			
Name of MS4/Coalition Town of Lewisboro	N	Y R 2	0 2	A 2	2	7
2. Provide the following information about municipal operat	ions good ho	ousekeep	ing	prog	ran	18:
• Parking Lots Swept (Number of acres X Number of times swep	t)	# Acres				3
• Streets Swept (Number of miles X Number of times swept)		# Miles			6	4
<ul> <li>Catch Basins Inspected and Cleaned Where Necessary</li> </ul>		#		6	9	6
O Post Construction Control Stormwater Management Practices		#				
Inspected and Cleaned Where Necessary						
<ul> <li>Phosphorus Applied In Chemical Fertilizer</li> </ul>		# Lbs.				0
Nitrogen Applied In Chemical Fertilizer		# Lbs.			2	0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N		Acres			].	
times applied to the nearest tenth.)	(diliooi oi					
3. How many stormwater management trainings have been p	orovided to 1	municipa	al en	nplov	ees	
during this reporting period?						1
4. What was the date of the last training?	0 5	/ 0 4	],[	2 0	1	8
4. What was the date of the last training?	0 3	1 0 4	] <b>/</b> [		<u> </u>	
5. How many municipal employees have been trained in this	reporting p	eriod?			2	0
6. What percent of municipal employees in relevant position	s and depart	tments r	ecei	ve_		
stormwater management training?	•			1 0	0	%

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

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

#### 7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Identify appropriate Best Management Practices (BMPs) for Town facilities. Continue to conduct street sweeping and cleaning catch basins to improve stormwater management. Maintain records of municipal septic system maintenance. Continue to reduce phosphorus use in town facility management. Completed annual inspections of Town Facilities. Maintain/repair stormwater outfalls as needed.

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

SWPPPs for all town facilities have been created and are available on location. 64 miles of municipal streets were swept, 696 catch basins cleaned, 200 drainage swales cleaned and 3 acres of parking lots swept. Fertilizer containing phosphorus was not used on municipal lands and the total number of fertilizer used was greatly reduced. Town utilizes their vacuum truck to facilitate routine maintenance of stormwater conveyance system and management practices.

C.	How many times was this observation measured or evaluated in this reporting period?	
	(ex.: samples/participants/ever	nts
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).	

Ongoing: Continue to use BMPs to conduct street sweeping, catch basin cleaning, salt storage and landscaping. Update SWPPPs as necessary. Continue to perform annual inspections of Town Facilities and maintain/repair stormwater outfalls.

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

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

ne of MS4/Coalition Town of Le	ewisdoro		N Y R 2 0 A 2 2
Additional Water	rshed Improvemen	t Strategy Best Mar	nagement Practices
e information in this section	n is being reported (check	c one):	
On behalf of an individual N	AS4		
On behalf of a coalition		_	
How many MS4	4s contributed to this re	eport?	
~ 4 · 1	also als NA a	a indicated in the table	helow
S4s must answer the qu	estions or check NA a	s indicated in the table	below.
	A	Check NA	(POC)
MS4 Description	Answer	- CHECK ITA	-
NYC EOH Watershed	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Land Use	1,2,3,4,3,6,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Traditional Non-Land Use	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-u,8a,80,9	3,4,3,10,11,12	-
Onondaga Lake Watershed	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
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 Greenwood Lake Watershed	1,0,7a-0,0a,9	- 1	-
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	2,3,5,86,10,11,12	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 Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments	-	-	Pathogens
Traditional 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 5,6,8a,8b,10,11,12	Pathogens
Traditional Non-Land Use	1 1 2 2 4 76 4 0	1 3.0.88.80.10.11.12	1 attiogens
Traditional Non-Land Use Non-Traditional	1,2,3,4,7a-d,9		

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

Yes O No O N/A

If N/A, go to question 3.

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

Estimate what percentage was mapped in this reporting period.

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

				SPD	ES ID		
Naı	me of MS4/Coalition	Town of Lewisboro		N	Y R 2	0 A 2	2 7
3.		/Coalition have a ce Plan Program?	Stormwater Conveyan	ce System (infr	astructur • Yes	ce) Inspe O No	ection
4.	Estimate the pe	rcentage of on-sit for rehabilitated	e wastewater treatmen as necessary in this rep	t systems that horting period?	ave been	inspect 1 0	<b>ed</b> 0 %
5.	NYSDEC SPDI (GP-0-08-001) t	ES General Permi	ed a program that pro it for Stormwater Discl its in stormwater runo t or more?	harges from Co	nstructio	n Activi	ties
6.	runoff from ne equal to one ac Permit for Stor	w development ar re that provides e rmwater Discharg	ned a program to addre nd redevelopment projection to quivalent protection to ses from Construction A Design Manual Enhan	ects that disturb o the NYS DEC Activities (GP-0	o greater SPDES ( -08-001),	than or General includii	
7a	. Does your MS4 phosphorus/nit	/Coalition have a crogen/pathogen l	retrofitting program toading?	o reduce erosio	n or • Yes	○ No	O N/A
7t	.How many pro	jects have been si	ted in this reporting pe	eriod?			0
7c	. What percent o	of the projects inc	luded in 7b have been	completed in th	is reporti	ing perio	od?
7d	l.What percent (	of projects planne	ed in previous years ha	ve been complet	red?		0 %
					○ No	Projects	Planned
82	a.Has your MS4/ procedures pol lands?	Coalition develor	oed and implemented a s proper fertilizer appl	turf manageme ication on muni	ent practi icipally o • Yes	ices and wned O No	O N/A
81	o.Has your MS4, procedures pol municipally ov	licy that addresse	oed and implemented a s proper disposal of gra	turf manageme ass clippings an	ent practi d leaves t • Yes	ices and from O No	O N/A

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

Name of MS4/Coalition Town of Lewisboro	SPDES ID N Y R 2	0 A 2	2 2 7
9. Has your MS4/Coalition developed and implemented a program	m of native plant • Yes	ting? ○ No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet was prohibiting goose feeding?	aste on municipa O Yes	l prope O No	rties and ● N/A
11. Does your MS4/Coalition have a pet waste bag program?	○ Yes	O No	• N/A
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	O No	● N/A