#### MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1

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This cover page must be completed by the report preparer.  Joint reports require only one cover page.	N	Y	R	2	0	A	2	2	7
Choose one:									
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

 $T \circ w n$ o f Lewisboro

#### OR

○ This report is being submitted on behalf of a Single Entity	
(Per Part II.E of GP-0-10-002)	
Name of Single Entity	

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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.

Name of Coalition		
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SPDES ID	SPDES ID	SPDES ID
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### MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 4

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

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MCC form for period ending March 9, 2 0 1 4

	_	SPDE	S ID					
Name of MS4 Town of Lewisboro		И У	R	2	0	A Z	2 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	ent or ac	ccepta	nce	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	g agre	eme	ents				
If Joint Report, enter coalition name:								
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MCC form for period ending March 9,  $\begin{vmatrix} 2 & 0 & 1 \end{vmatrix}$ 

		SPL	DES	ID						
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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
P e t e r	Parsons
Title	
Supervisor	
Address	
P O B O x 5 0 0 1 1 M	a i n Street
City	State Zip
City           S o u t h S a 1 e m	State Zip    N   Y   1   0   5   9   0   -
South Salem	
S o u t h S a l e m eMail	N Y 1 0 5 9 0 -

MCC form for period ending March 9, 2 0 1 4

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

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

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- 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:

- 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
Lisa	Pisera
Title	
Secretary - Plar	n n i n g D e p a r t m e n t
Address	
P . O . B o x 7 2 5	
City	State Zip
Cross River	N Y 1 0 5 1 8 -
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eMail	

MCC form for period ending March 9, 2 0 1 4

	SP	DES	ID						
Name of MS4 Town of Lewisboro	N	Y	R	2	0	A	2	2	7

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

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- 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:

- 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 M	Last Name C e r m e l e
Title		
Town Engineer		
Address		
5 0 0 Main Street		
Class		a
City		State Zip
A r m o n k		N Y 1 0 5 0 4 -
A r m o n k  eMail	. c c	N Y 1 0 5 0 4 -
Armonk  eMail	. c c	N Y 1 0 5 0 4 -

Name of MS4 Town of Lewisboro

**Section 3 - Partner Information** 

#### MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 4

SPDES ID

N Y R 2 0 A 2 2

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MCC form for period ending March 9, 2 0 1 4

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Albany, New York 12233-3505

### MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 4

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			DES ID			A 2	2 2	7
Name of MS4 Town of Lewisboro		N	YR	2	0	A 2	. 2	
Section 4 - Certification Statement								
"I certify under penalty of law that this document and all attachment direction or supervision in accordance with a system designed to as properly gathered and evaluated the information submitted. Based of persons who manage the system, or those persons directly responsible 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 that on my in ble for a true, ac	at qu nqu gath cur	ualificing of ate, are	ed point the the	erso per info omp	onne son orma olete	or ation . I a	m
This form must be signed by either a principal executive officer or authorized representative of that person as described in GP-0-08-00				offic	cial,	or d	uly	
First Name MI Last Name				T				$\top$
Peter Pars	s o n	ន						
Title (Clearly print title of individual signing report)			ı T	1	T T			
S u p e r v i s o r								
Signature	Dat	te	/		]/[			
Send completed form and any attachments to the DEC Central Offi	ice at:							
MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway								

This report is being submitted for the reporting period ending March 9, 2 0 1 4

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

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Other

### **MS4 Annual Report Form**

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	SPDES ID
Name of MS4/Coalition Town of Lewisboro	N Y R 2 0 A 2 2 7
Minimum Control Measure 1. Public Ed	ducation 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         How many MS4s contributed to this report?     </li> </ul>	
1. Targeted Public Education and Outreach Best Managen	nent Practices
Check all topics that were included in Education and Outreach	during this reporting period:
Construction Sites	<ul> <li>Pesticide and Fertilizer Application</li> </ul>
<ul> <li>General Stormwater Management Information</li> </ul>	Pet Waste Management
<ul> <li>Household Hazardous Waste Disposal</li> </ul>	<ul><li>Recycling</li></ul>
● Illicit Discharge Detection and Elimination	<ul> <li>Riparian Corridor Protection/Restoration</li> </ul>
O Infrastructure Maintenance	<ul> <li>Trash Management</li> </ul>
Smart Growth	• Vehicle Washing
O Storm Drain Marking	<ul><li>Water Conservation</li></ul>
• Green Infrastructure/Better Site Design/Low Impact Development	<ul> <li>Wetland Protection</li> </ul>
• Other:	○ None
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	:
● Public Employees ● Contractors	
<ul><li>Residential</li><li>Developers</li></ul>	
○ Businesses • General Public	
○ Restaurants ○ Industries	
○ Other: • Agricultural	

This report is being submitted for the reporting period ending March 9, 2 0 1 4

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

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This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 4 \end{vmatrix}$ 

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         7
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achieving identified in your Stormwater Management Program Plan (SWMPP), included 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 of available education materials, and notice of upcoming regional present stormwater management events, print and make available brochures and targeted management practices, continue to develop a collection of educa management materials and make available to the public and continue to be	tations and related newspaper printing on tional stormwater
material on public access television.  B. Briefly summarize the observations that indicated the overall effection.  Goal.	ctiveness of this Measurable
The Town of Lewisboro is continuing to update the website as needed. In continued to gather and distribute information about stormwater manager reduction. Residents have received an e-mail notice on stormwater manabeen informed on any stormwater related events.	nent and phosphorus
C. How many times was this observation measured or evaluated in th	uis reporting period?
	(ex.: samples/participants/eve
D. Has your MS4 made progress toward this Measurable Goal during	
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWN	<b>IPP?</b> ● Yes ○ No
E. Duiefly gymmanize the starmyvator activities planned to meet the st	ools of this MCM during

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. Create stormwater public service announcements and/or stormwater-related program to air on local television.

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID YR Ν Town of Lewisboro 0 A 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:

Cleanup Events	# Events			1
O Comments on SWMP Received	#Comments			
Community Hotlines	Phone # ( ) )	-		
Phone # ( 9 1 4 ) 7 6 3 - 5 5 9 2	Phone # ( )	-		
Phone # ( 9 1 4 ) 7 6 3 - 3 1 6 6	Phone # ( )	-		
Phone # ( )	Phone # ( ) )	-		
Phone # ( )	Phone # ( )	-		
Phone # ( )	Phone # ( )	-		
<ul><li>Community Meetings</li></ul>	# Attendees			7
○ Plantings	Sq. Ft.			
O Storm Drain Markings	#Drains			
<ul><li>Stakeholder Meetings</li></ul>	# Attendees		4	7
<ul><li>Volunteer Monitoring</li></ul>	# Events		4	8
Other:				

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? Yes

Program (SWMP) Plan provided?	Ye	es	0	No
List-Serve # In List		6	1	5
Newspaper Advertising # Days Run				
TV/Radio Notices # Days Run				
Other: Town Board Agenda				

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

This report is being submitted for the reporting period ending March 9, 2 0 1 4

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 4

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Name of MS4/Coalition Town of Lewisboro	]	N	YR	2	0	A	2	2	7
4.a. If this report was made available on the internet, what dat	te was it	po	sted?		ı <u>.</u> r				
Leave blank if this report was not posted on the internet.	0	5	/ 3	1	/	2	0	1	4
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	ng a joint	t re	port,	ans	wei	· 5.Ł	o		
5.a. Was an Annual Report public meeting held in this reporting	ng perio	<b>d?</b>			•	Yes		01	
If Yes, what was the date of the meeting?	0	5	/ 1	9	/	2	0	1	4
If No, is one planned?	•				•	Yes	S	$\bigcirc$ ]	No
5.b. Was an Annual Report public meeting held for all MS4s c	ontribut	ing	g to th	is i	rep	ort	du	rin	g
this reporting period?						Yes	S	01	No
If No, is one planned for each?					0	Yes	S	01	No
6. Were comments received during this reporting period?					0	Yes	S	• ]	No
If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.									

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 4$ 

If submitting this form as part of a joint report on behalf of a	a coalition leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition Town of Lewisboro	N Y R 2 0 A 2 2 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.	
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
Participation as a member of the CKWIC and EOHWC, schedule meetings, provide public notice at televised Town Board meeting provide full access to the public to review and request copies of a developed as part of the Town SWMP. The Town participates in	gs and the website for key events, all information collected and
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
The Town of Lewisboro held 10 stormwater committee meetings stormwater consultant attended CKWIC meetings as appropriate monitored 8 times each with supplemental monitoring on three lawith 48 participants.	e. 5 lakes in the Town were
C. How many times was this observation measured or evalua	ated in this reporting period?
	(ex.: samples/participants/e
D. Has your MS4 made progress toward this measurable goa	ll 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 me the next reporting cycle (including an implementation sch	eet the goals of this MCM during
Ongoing: Continue to schedule and conduct monthly stormwate CKWIC and EOHWC, provide public notice of all SWMP relate hold a public meeting for the annual report and participate in CS	ed events and access to all reports,

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 4 & 1 \end{vmatrix}$ 

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 Town of Lewisboro	N Y R 2 0 A 2 2 7
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported ( On behalf of an individual MS4 On behalf of a coalition	(check one):
How many MS4s contributed to t	this report?
1. Enter the number and approx. percent	of outfalls mapped: 6 9 4 # 1 0 0 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	
3.a. What types of generating sites/sewershoreporting period?	eds were targeted for inspection during this (+/- 20%)
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	O Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O 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	<ul><li>Swimming Pools</li></ul>
O Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
Other:	○ None
• Sewersheds:	
East of Hudso	

This report is being submitted for the reporting period ending March 9, 2 0 1 4

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 Town of Lewisboro	N Y R 2	2 0 A 2 2 7
3.b. What types of illicit discharges hav	e been found during this reporting period	?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
○ 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:  4. How many illicit discharges/potenti	O None	luring this
reporting period?		2
5 How many illicit discharges have be	een confirmed during this reporting perio	d? 2
o. How many miere disonarges have so	con commen and may report and pro-	
6. How many illicit discharges/illegal operiod?	connections have been eliminated during t	this reporting
7. Has the storm sewershed mapping of the If No, approximately what percent was	been completed in this reporting period? as completed in this reporting period?	● Yes ○ No 1 0 0 %
8. Is the above information available i	in GIS?	● Yes ○ No
Is this information available on the If Yes, provide URL(s):	web?	○ Yes • No
• • • • • • • • • • • • • • • • • • • •	e where map(s) can be accessed - not home p	oage.
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This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 4$ 

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This report is being submitted for the reporting period ending March 9, 2 0 1 4

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Name of MS4/Coalition		N	Y	R	2	0	А	2	2	7

#### 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.

The mechanism for reporting illicit discharges yielded 2 illicit discharge that were identified. Staff training on illicit discharges and municipal good housekeeping has resulted in improved detection and elimination of illicit discharges. 43 letters were sent out to homeowners with Planning Board septic inspection requirements. Complete conveyance mapping.

C.	How many	times wa	s this observation	measured	or evaluated	in this repo	rting period?

(ex.: samples/participants/events)

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

● Yes ○ No

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

● Yes ○ No

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

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,  $2 \mid 0 \mid 1 \mid 4$ 

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Name of MS4/Coalition	Town of Lewisboro	N	Y	R	2	0	A	2	2	7
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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):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
	Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?  • Yes	No
	.Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?  • Yes • No • I	d NT
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  ○ 09/2004 ● 03/2006 ○ 1	NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place? • Yes	No
	How many Construction Stormwater Pollution Prevention Plans (SWPPs) have been reviewed in this reporting period?	7
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?  • Yes • No • I	NT
	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	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	#		3	O No Authority
Stop Work Orders	#		3	O No Authority
Criminal Actions	#		0	O No Authority
○ Termination of Contracts	#		0	O No Authority
○ Administrative Fines	#		0	O No Authority
Civil Penalties	#		0	O No Authority
○ Administrative Orders	#		0	O No Authority
○ Enforcement Actions or Sanctions	#		0	
Other	#		0	O No Authority

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 4$ 

	SPDES ID		
Nan	ne of MS4/Coalition Town of Lewisboro NYR 2	0 A 2	2 7
	Minimum Control Measure 4. Construction Site Stormwater Runo	off 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 during this reporting period?	acre or n	nore
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	ır jurisdi	o
3.	What percent of active construction sites were inspected during this reporting	period?	○ NT
4.	What percent of active construction sites were inspected more than once?	1 0	○ NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual?  • Yes	e the NYS	S ONT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preve (SWPPPs) of construction projects that are subject to MS4 review and approvement of Yes		ns ONT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made as public review?	ailable fo	or O No

This report is being submitted for the reporting period ending March 9, 2 0 1 4 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 Town of Lewisboro 2 2 7 NYR2 0 A 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department t m t i n D r e n P | 1 | a | n | n g e p a Address 7 2 5 Ρ 0 В 0 x Zip City 5 NY 1 0 1 8 i С ro s s R V е r Phone 9 3 5 5 9 2 1 O Library Address Zip City Phone Other Address Zip City Phone Please provide specific address where SWPPPs can be accessed - not home page. O Web Page URL(s): URL URL

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 4 \end{vmatrix}$ 

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 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 identified in your Stormwater Management Program Plan (SWMIII.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
Review of all basic and full SWPPPs and conduct construction of the NYS manual. Implement mechanism to address non-complia ordinance. Town continues to provide public access to SWPPPs the stormwater ordinance to reflect updates to the General Permi stormwater permit for disturbances >5,000 s.f. Town-wide.	ance of stormwater management  The Town continues to enforce
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
100% of full and basic SWPPPs were reviewed by the Town Eng accordance with the NYS Design Manual. 100% of construction inspected in accordance with the NYS Design Manual. Local To issued as a result of the adopted stormwater ordinance.	sites were inspected and were
C. How many times was this observation measured or evalua	ted in this reporting period?  (ex.: samples/participants/event.
D. Has your MS4 made progress toward this measurable goa	l during this reporting period?
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	the SWMPP?

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

● Yes ○ No

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.

This report is being submitted for the reporting period ending March 9, 2 0 1 4

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	Town of Lewisboro			N Y R	2 0 A 2 2 7
Minimum	Control Mea	sure 5. Post	-Construction	on Stormwater N	<u> Ianagement</u>
The information in the		g reported (che	ck one):		
<ul><li>On behalf of an inc</li><li>On behalf of a coa</li><li>How m</li></ul>		ributed to this	report?		
				nnagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
Alternative Practic	ees	4	4	4	
• Filter Systems		1	1	0	
O Infiltration Basins					
Open Channels					
○ Ponds					
O Wetlands					
Other					
2. Do you use an BMPs, inspecti			abase, spreads	heet) to track post-	• Construction • Yes ○ No
3. What types of Development/E				implement Low Innciples?	apact
Building Codes	<ul><li>Municipal C</li></ul>	omprehensive F	Plans		
Overlay Districts	Open Space	Preservation Pr	ogram		
<ul><li>Zoning</li></ul>	O Local Law or	r Ordinance			
○ None	● Land Use Re	egulation/Zonin	g		
<ul><li>Watershed Plans</li></ul>	Other Compr	rehensive Plan			
• Other:					

t y

i

i n a b

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

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 4$ 

		SPDES ID	
Nar	ne of MS4/Coalition Town of Lewisboro	N Y R 2 0 A 2 2 7	7
4a.	Are the MS4s contributing to this report involved in a regional/w	vatershed wide planning effort? ● Yes ○ N	ю
4b	Does the MS4 have a banking and credit system for stormwater n	management practices? ○ Yes ● N	0
4c.	Do the SWMP Plans for each MS4 contributing to this report included and approval of banking and credit of alternative siting of a storm		О
4d	How many stormwater management practices have been implement reporting period?	nented as part of this system in 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?	(BSD) and other Green	<b>%</b>

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 4$ 

	SPDES ID
Name of MS4/Coalition Town of Lewisboro	N Y R 2 0 A 2 2 7
6. Evaluating Progress Toward Measurable Goals MCM 5	
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.	
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
Participate in the Croton Kensico Watershed Intermunicipal Corregarding retrofitting programming and other aspects of regiona to inspect stormwater management practices and report on cond	al stormwater cooperation. Continue
B. Briefly summarize the observations that indicated the over Goal.	erall effectiveness of this Measurable
The Town of Lewisboro Town Engineer attends CKWIC meeting Year 4 and Year 5 Retrofit Projects. Post-management stormward identified and maintained as part of the Town's stormwater man	ater structures are continuing to be
C. How many times was this observation measured or evalu-	ated in this reporting period?
·	1
D. Has your MS4 made progress toward this measurable go	ex.: samples/participants/oal during this reporting period?  ■ Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in	
F. Briefly summarize the stormwater activities planned to m the next reporting cycle (including an implementation sch	neet the goals of this MCM during
Continue to participate in CKWIC and EOHWC. Conduct insp non-structural stormwater practices and continue to implement	

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 4 \end{vmatrix}$ 

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	SPD	ES	ID						
Name of MS4/Coalition Town of Lewisboro	N	Y	R.	2	0	A	2	2	7

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

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
years?

			performed within the past 3
Operation/Activity/Facility	Addressed in	a SWMP?	<u>years?</u>
Street Maintenance	• Yes	○ No	• Yes • No
Bridge Maintenance	○ Yes	● No	○ Yes • No
Winter Road Maintenance	• Yes	○ No	• Yes • No
Salt Storage	• Yes	○ No	• Yes • No
Solid Waste Management	O Yes	● No	○ Yes • No
New Municipal Construction and Land Disturba	nce • Yes	○ No	● Yes ○ No
Right of Way Maintenance	• Yes	○ No	● Yes ○ No
Marine Operations	O Yes	● No	○ Yes • No
Hydrologic Habitat Modification		• No	○ Yes • No
Parks and Open Space	<b>A</b>	○ No	● Yes ○ No
Municipal Building		○ No	● Yes ○ No
Stormwater System Maintenance		○ No	● Yes ○ No
Vehicle and Fleet Maintenance		○ No	• Yes • No
Other	···· O Yes	○ No	○ Yes ○ No

This report is being submitted for the reporting period ending March 9, 2 0 1 4

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		SPL	DES ID	,					
Name of MS4/Coalition Town of Lewisboro		N	YR	2	0	A	2	2	7
2. Provide the following information about municipal operat	tions good	d h	ousek	сеер	ing	pr	ogı	ram	ıs:
• Parking Lots Swept (Number of acres X Number of times swep	ot)		# Ac	res					2
• Streets Swept (Number of miles X Number of times swept)			# Mi	les				9	3
Catch Basins Inspected and Cleaned Where Necessary				#				8	8
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary				#					
			ДΤ	1					
<ul> <li>Phosphorus Applied In Chemical Fertilizer</li> </ul>			# L	DS.					0
Nitrogen Applied In Chemical Fertilizer			# L	bs.				2	0
O Pesticide/Herbicide Applied	Truma la our o		# Acre	s [					
(Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	vuillber of	L							
3. How many stormwater management trainings have been p	provided	to	muni	cips	al e	mp	loy	ees	
during this reporting period?	•			•					1
		Γ	1 - [		٦ .				
4. What was the date of the last training?	0	8	/ 1	. 3	]/	2	0	1	3
5. How many municipal employees have been trained in this	reportin	g p	eriod	?				1	3
6. What percent of municipal employees in relevant position	s and dei	oar	tmen	ts ro	ecei	ive			
stormwater management training?		r				1	0	0	%

This report is being submitted for the reporting period ending March 9,  $2 \mid 0 \mid 1 \mid 4$ 

If submitting this form as part of a joint report on hehalf of a coalition le

If submittir	ng this form as part of	of a joint report on bel	ialt of a coalition		iD blank.	
				SPDES ID	0 7 0	2 7
Name of MS4/Coalition	Town of Lewisboro			N Y R 2	0 A 2	2 7
7. Evaluating Pro	gress Toward Me	easurable Goals MC	CM 6			
Use this page to repidentified in your St III.C.1. Submit addi	tormwater Manage	ess and project plans ement Program Plan eeded.	toward achieving (SWMPP), incl	ng measurable luding require	goals goals in	Part
A. Briefly summar	rize the Measural	ble Goal identified i	n the SWMPP	in this repor	ting peri	iod.
street sweeping and municipal septic sy	d cleaning catch baystem maintenance	nt Practices (BMPs) asins to improve store. Continue to reduce pections of Town Fac	mwater manage phosphorus us	ement. Maint	ain record	act ls of
B. Briefly summar Goal.	rize the observati	ions that indicated t	he overall effe	ctiveness of t	his Meas	urable
municipal streets w	vere swept, 88 cate orus was not used	been created and are ch basins cleaned and on municipal lands a l with the Town of N	l 60 water chutend the total nur	es cleaned. Fe mber of fertiliz	ertilizer zer used v	was uum
C. How many time	es was this observ	vation measured or	evaluated in t	his reporting	period?	
						1
						ticipants/even
D. Has your MS4	made progress to	oward this measural	ble goal during	g this reportio		
					Yes	○ No
E. Is your MS4 on	n schedule to mee	et the deadline set fo	rth in the SWI	MPP?		
					<ul><li>Yes</li></ul>	○ No
		ter activities planne ing an implementati		goals of this N	4CM du	ring
Ongoing: Continulandscaping. Upda Facilities.	e to use BMPs to cate SWPPPs as nec	conduct street sweep cessary. Continue to	ing, catch basin perform annua	cleaning, salt l inspections o	t storage a	and

Non-Traditional

Traditional Land Use

Traditional Non-Land Use

LI 27 Embayments

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

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

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

			SPDES ID
ame of MS4/Coalition Town of L	ewisboro		N Y R 2 0 A 2 2
Additional Wate	rshed Improvemen	nt Strategy Best M	anagement Practices
The information in this section	n is being reported (check	c one):	
On behalf of an individual M	MS4		
On behalf of a coalition			
How many MS	4s contributed to this re	eport?	
110 W many 1V18	is continued to this is	Pozt	
AS4s must answer the qu	estions or check NA a	s indicated in the tab	le below.
vio48 must answer the qu	estions of effect that a	s indicated in the tab	ie below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	Allswei	CHEEKIVA	
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Land Use Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	1,2,77a-u,8a,80,9	3,4,3,10,11,12	- Indeptorus
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Land Use Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12 2,3,4,5,8b,10,11,12	Phosphorus
	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12 2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional  Greenwood Lake Watershed	1,0,7a-u,6a,9	2,3,4,3,80,10,11,12	-
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Land Use 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	1,4,0,7a-u,8a,9	2,3,3,00,10,11,12	-
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	1, T, / a u, /	2,3,7,3,00,00,10,11,12	
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	1,77,74-4,04,7		-
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Land Use Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,+,0,/a-u,0a,7	4,3,3,00,10,11,14	THOOPHOLES

1.	Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?  • Yes	○ No	O N/A
2.	Has 100% of the MS4/Coalition conveyance system been mapped in GIS?  ● Yes	○ 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.		0 %

1,2,3,4,7a-d,9,10,11,12

1,2,3,4,7a-d,9,10,11,12

1,2,3,4,7a-d,9

5,6,8a,8b,10,11,12

5,6,8a,8b

5,6,8a,8b

Pathogens

Pathogens

Pathogens

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 4 & 1 \end{vmatrix}$ 

						_	SPL	ES ID				,	
Na	me of MS4/Coalition	Town of Lewisboro	S-82-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-				N	YR	2	0 A	. 2	2	7
3.	Does your MS4 and Maintenan			ater Conv	eyance	System (	(infr	astruo • Ye		r <b>e) I</b> r O N		ctio O N	
4.	Estimate the pe and maintained	_						iave b	een	insp		- 1	%
5.	Has your MS4/NYSDEC SPDF (GP-0-08-001) t disturb five tho	CS General Per o reduce pollu	rmit for Sto tants in sto	rmwater rmwater i	Dischar	ges from	ı Co	nstru	ctio acti	n Ac	tivit s tha	ties	I/A
6.	Has your MS4/runoff from new equal to one act Permit for Stor the New York S Standards?	v development e that provide mwater Disch	and redevents equivalents	elopment it protecti Construct	projects on to the tion Acti	that dis e NYS D ivities (G	turb EC SP-0	o grea SPDE -08-00	ter CS ( )1), lova	than Sene incli	or ral udin	ı <b>g</b> O N	I/A
7a	. Does your MS4 phosphorus/nit			ting progr	am to re	educe er	osio	n or • Ye	es	O N	O	O N	Ī/A
7b	.How many proj	ects have been	sited in thi	is reportii	ng perio	d?						1	0
7c	. What percent o	f the projects i	ncluded in	7b have b	een com	ipleted i	n th	is rep	orti	ng p	erio		%
7d	.What percent o	f projects plan	ned in prev	vious year	s have b	een com	plet	ed?			3	0	%
								0	No	Proje	cts F	Planr	ıed
8a	.Has your MS4/0 procedures poli lands?							cipall	y ov			O N	Ī/A
<b>8</b> b	.Has your MS4/0 procedures poli municipally ow	cy that addres							es f			O N	I/A

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

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 of	_	_	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste oprohibiting goose feeding?	_		rties and • N/A
11. Does your MS4/Coalition have a pet waste bag program?	O Yes	○ No	• N/A
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	O No	• N/A