

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2023

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, 2023

Name of MS4

SPDES ID

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for *each* 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
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name MI Last Name

Title

Address

City State Zip -

eMail

Phone County

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First Name MI Last Name

Title

Address

City State Zip

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- Duly Authorized Representative
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- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name MI Last Name
B a r b a r a B a r o s a

Title
P r i n c i p a l P l a n n e r

Address
8 4 1 F a i r S t r e e t

City State Zip
C a r m e l N Y 1 0 5 1 2 -

eMail
b a r b a r a . b a r o s a @ p u t n a m c o u n t y n y . g o v

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

First Name Neal MI Last Name Tomann

Title Soil and Water District Manager

Address 841 Fair Street

City Carmel State NY Zip 10512

eMail neal.tomann@putnamcountyny.gov

Phone (845) 878-3480 County Putnam

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2023

SPDES ID

Name of MS4 Putnam County

NYR20A343

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: K e v i n MI: M Last Name: B y r n e

Title (Clearly print title of individual signing report): C o u n t y E x e c u t i v e

Signature: [Handwritten signature of Kevin Byrne]

Date: 05/04/2023

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

Putnam County

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First Name

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MI

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Last Name

T	u	l	l	y															
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Title (Clearly print title of individual signing report)

A	c	t	i	n	g		A	d	m	i	n	i	s	t	r	a	t	o	r		o	f		P	l	a	n	n	i	n	g
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Signature

																													
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Date

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

MS4 Municipal Compliance Certification(MCC) Form

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

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First Name

B a r b a r a

MI

Last Name

B a r o s a

Title (Clearly print title of individual signing report)

P r i n c i p a l P l a n n e r

Signature

Barbara Barosa

Date

6 4 / 2 8 / 2 0 2 3

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

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Name of MS4 Putnam County

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First Name

N e a l

MI

Last Name

T o m a n n

Title (Clearly print title of individual signing report)

S o i l a n d W a t e r D i s t r i c t M a n a g e r

Signature

Handwritten signature: Neal A. Tomann

Date

04/28/2023

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

MS4 Annual Report Form

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

Name of MS4/Coalition

Putnam County

SPDES ID

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3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

- | | | | | | | | |
|--|---------------------|--|---|---|---|---|---|
| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td>2</td><td>6</td></tr></table> | | | | 2 | 6 |
| | | | 2 | 6 | | | |
| <input type="radio"/> Direct Mailings | # Mailings | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> | | | | | 0 |
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| <input checked="" type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td>1</td><td>4</td></tr></table> | | | | 1 | 4 |
| | | | 1 | 4 | | | |
| <input type="radio"/> List-Serves | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
| | | | | | | | |
| <input checked="" type="radio"/> Mailing List | # In List | <table border="1" style="display: inline-table;"><tr><td> </td><td>2</td><td>6</td><td>0</td><td>0</td></tr></table> | | 2 | 6 | 0 | 0 |
| | 2 | 6 | 0 | 0 | | | |
| <input checked="" type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td>3</td></tr></table> | | | | | 3 |
| | | | | 3 | | | |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td>1</td><td>0</td><td>0</td><td>0</td></tr></table> | | 1 | 0 | 0 | 0 |
| | 1 | 0 | 0 | 0 | | | |
| <input type="radio"/> School Program | # Attendees | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
| | | | | | | | |
| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> | | | | | |
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| <input checked="" type="radio"/> Printed Materials: | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td> </td><td>1</td><td>0</td><td>0</td><td>0</td></tr></table> | | 1 | 0 | 0 | 0 |
| | 1 | 0 | 0 | 0 | | | |

Locations (e.g. libraries, town offices, kiosks)

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M	u	n	i	c	i	p	a	l		l	i	b	r	a	r	i	e	s	/	
C	o	u	n	t	y		P	a	r	k	/		T	F		F	a	r	m	
C	o	u	n	t	y		C	o	m	m	u	n	i	t	y		D	a	y	

Other:

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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

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URL

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Putnam County

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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.

Putnam County employs a number of education strategies and stormwater protection initiatives. Public programs include Contractor soil and erosion training, lake management seminars, newsletters, in person consulting and cartographic services. Technical improvements include purchasing asset management software (Cartegraph), expanding our ArcGIS capacity and the use of field data collection apps.

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

We are seeing a steady increase in two areas. We are getting more phone calls and inquiries about stormwater issues from both private individuals and municipalities which is an indication that our messaging is working. Also, our data sets are growing. They are larger, more orgnaized and easier to share than in the past.

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

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(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).

Better mapping of flood inundation areas. Identification of failing and undersized culverts. Improve public outreach concerning storm drains with direct connections to potable water supplies and the Hudson River estuary.

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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?

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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:

<input type="radio"/> Cleanup Events	# Events	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>																														
<input type="radio"/> Comments on SWMP Received	# Comments	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>																														
<input checked="" type="radio"/> Community Hotlines	Phone #	(<table border="1" style="display: inline-table;"><tr><td>8</td><td>4</td><td>5</td></tr></table>) <table border="1" style="display: inline-table;"><tr><td>8</td><td>7</td><td>8</td></tr></table> - <table border="1" style="display: inline-table;"><tr><td>7</td><td>9</td><td>1</td><td>8</td></tr></table>	8	4	5	8	7	8	7	9	1	8																				
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<input checked="" type="radio"/> Community Meetings	# Attendees	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>1</td><td>0</td><td>0</td></tr></table>			1	0	0																									
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<input checked="" type="radio"/> Stakeholder Meetings	# Attendees	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td>2</td></tr></table>				2																										
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2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? Yes No

<input type="radio"/> List-Serve	# In List	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>																														
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Web Page URL: Enter URL(s) on the following two pages.

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County

SPDES ID

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2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URL

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MS4 Annual Report Form

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

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Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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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.

- MS4/Coalition Office Annual Report SWMP Plan Comments

Department

H i g h w a y a n d F a c i l i t i e s D e p t

Address

8 4 2 F a i r S t r e e t

City

C a r m e l N Y

Zip

1 0 5 1 2 -

Phone

(8 4 5) 8 7 8 - 6 3 3 1

- Library Annual Report SWMP Plan Comments

Address

City

Zip

-

Phone

() -

- Other Annual Report SWMP Plan Comments

Address

P l a n n i n g D e p a r t m e n t

City

C a r m e l N Y

Zip

1 0 5 1 2 -

Phone

(8 4 5) 8 7 8 - 3 4 8 0

- Web Page URL: Annual Report SWMP Plan Comments

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Please provide specific address of page where report can be accessed - not home page.

- eMail Comments

U p o n r e q u e s t

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	5	/	1	8	/	2	0	1	6
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4.b. For how many days was/will this report be posted?

3	6	5
---	---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?
 Yes No

If Yes, what was the date of the meeting?

0	5	/	1	7	/	2	0	2	3
---	---	---	---	---	---	---	---	---	---

If No, is one planned?

 Yes No
5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?
 Yes No

If No, is one planned for each?

 Yes No
6. Were comments received during this reporting period?
 Yes No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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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.

The County continued the following programs: Household Hazardous Waste Collection, E-Waste Collection, Prescription Drug Take Back, Tree Program, and PARC Litter Patrol as well as Contractor soil & erosion training, lake management seminars, newsletters, in person consulting and cartographic services. Technical improvements include purchasing asset management software (Cartegraph), expanding our ArcGIS capacity and the use of field data collection apps.

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

The participation in the programs above has remained steady. We are also seeing a steady increase in two areas. We are getting more phone calls and inquiries about storm water issues from both private individuals and municipalities which is an indication that our messaging is working. Also our data sets are growing. They are larger, more organized and easier to share than in the past.

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

0	0	2	0
---	---	---	---

(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).

Putnam County will provide public involvement and participation by holding the following programs: Household Hazardous Waste Collection (spring and fall), E-Waste Collection (permanent sites in all six towns), Prescription Drug Take Back (minimum three times per year), Seedling/Tree Program (annually), PARC Litter Patrol (March to November weather permitting), Better mapping of flood inundation areas. Identification of failing or undersized culverts. Improve public outreach concerning storm drains with direct connections to potable water supplies and the Hudson River.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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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.

Continuation of County's septic repair permitting program and additional IDDE detection and elimination. Putnam County employs a number of education strategies and storm water protection initiatives. Public programs include Contractor soil and erosion training, lake management seminars, newsletters, in person consulting and cartographic services. Technical improvements include purchasing asset management software (Cartegraph), expanding our ArcGIS capacity and use of

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

During this reporting period, the County made the following observations: 329 repair permits were issued by the County, and 71 illicit discharges were reported, of which 30 were confirmed and 22 were eliminated. The County Septic System Data and Inspection Forms were also used to notify the County of septic failures.

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

			4
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(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).

To continue the following actions: the County Septic System Repair Permitting Program (including pre and post inspections), to inspect new residential and commercial sites for proper erosion control measures, and to continue and expand the illicit discharge detection and elimination efforts. Better mapping of flood inundation areas. Identification of failing or undersized culverts. Improve public outreach concerning storm drains with direct connections to potable water supplies and the Hudson River estuary.

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
 On behalf of a coalition

How many MS4s contributed to this report?

--	--	--

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? Yes No

1b. 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 certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

		3
--	--	---

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

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 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:

- Notices of Violation #

				0
--	--	--	--	---

 No Authority
- Stop Work Orders #

				0
--	--	--	--	---

 No Authority
- Criminal Actions #

				0
--	--	--	--	---

 No Authority
- Termination of Contracts #

				1
--	--	--	--	---

 No Authority
- Administrative Fines #

				0
--	--	--	--	---

 No Authority
- Civil Penalties #

				0
--	--	--	--	---

 No Authority
- Administrative Orders #

				0
--	--	--	--	---

 No Authority
- Enforcement Actions or Sanctions #

				0
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- Other #

				0
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 No Authority

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

--	--	--

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

		2
--	--	---

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

		2
--	--	---

3. What percent of active construction sites were inspected during this reporting period? NT

1	0	0
---	---	---

 %

4. What percent of active construction sites were inspected more than once? NT

1	0	0
---	---	---

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

N	Y	R	2	0	3	4	3
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6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

H i g h w a y s & F a c i l i t i e s

Address

8 4 2 F a i r S t r e e t

City

C a r m e l

N Y

Zip

1 0 5 1 2 -

Phone

(8 4 5) 8 7 8 - 6 3 3 1

○ Library

Address

City

Zip

-

Phone

() -

○ Other

Address

City

Zip

-

Phone

() -

○ Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

URL

URL

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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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.

Putnam County employs a number of education strategies and storm water protection initiatives. Public programs include Contractor soil and erosion training, lake management seminars, newsletters, in person consulting and cartographic services. Technical improvements include purchasing asset management software (Cartegraph), expanding our ArcGIS capacity and the use of field data collection apps.

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

Active construction sites were inspected regularly (at least weekly) by qualified consulting inspectors, and the County ensured that any inspectors acting on our behalf utilized the New York State Stormwater Pollution Prevention Manual.

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

		1	2
--	--	---	---

(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).

All new SWPPPs will continue to be reviewed by qualified staff. Active construction sites will be inspected regularly, using the New York State Stormwater Pollution Prevention Manual.

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		0
--	--	---

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impact Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

1	0	0
---	---	---

 %

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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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.

Putnam County employs a number of education strategies and stormwater protection initiatives. Continue to inventory, inspect and maintain post construction stormwater management practices. The inventory will be updated annually and practices will be inspected annually. Maintenance will be performed as needed based on the inspections. Recently purchased software (Cartegraph) will help to track post construction stormwater management assets.

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

The County continued to inventory, inspect and maintain the post construction stormwater management practices to ensure effectiveness.

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

		1	2
--	--	---	---

(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).

To continue to inventory, inspect and maintain post construction stormwater management practices.

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

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?

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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.

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Solid Waste Management.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Right of Way Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Parks and Open Space.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Other.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County									
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SPDES ID

N	Y	R	2	0	3	4	3
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2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres

				6
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles

		1	1	6
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary #

		2	6	0
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

			2	5
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs.

			1	0
--	--	--	---	---
- Nitrogen Applied In Chemical Fertilizer # Lbs.

	3	8	8	0
--	---	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

	4	7	4	.	0
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3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

				3
--	--	--	--	---

4. What was the date of the last training?

0	8
---	---

 /

0	9
---	---

 /

2	0	2	2
---	---	---	---

5. How many municipal employees have been trained in this reporting period?

	3	0
--	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

	3	0
--	---	---

 %

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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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.

To continue and expand maintenance and good housekeeping practices.

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

Municipal operations and good housekeeping included sweeping, catch basin cleaning, cleaning of existing stormwater management practices were performed and met goals.

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

			3
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(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).

To continue and expand maintenance and good housekeeping practices throughout the year.

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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Additional Watershed Improvement Strategy Best Management Practices

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?

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MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed			
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
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			
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	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay			
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary			
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments			
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? Yes No N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes No N/A

If N/A, go to question 3.

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

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 %

Estimate what percentage was mapped in this reporting period.

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 %

MS4 Annual Report Form

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

2	0	2	3
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes No N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?

		5
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 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? Yes No N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? Yes No N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? Yes No N/A

7b. How many projects have been sited in this reporting period?

		1
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7c. What percent of the projects included in 7b have been completed in this reporting period?

		0
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 %

7d. What percent of projects planned in previous years have been completed?

		0
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 %

No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes No N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? Yes No N/A

MS4 Annual Report Form

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

2	0	2	3
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Name of MS4/Coalition

Putnam County

SPDES ID

N	Y	R	2	0	3	4	3
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- 9. Has your MS4/Coalition developed and implemented a program of native planting?
 Yes No N/A

- 10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?
 Yes No N/A

- 11. Does your MS4/Coalition have a pet waste bag program?
 Yes No N/A

- 12. Does your MS4/Coalition have a program to manage goose populations?
 Yes No N/A

PUTNAM COUNTY'S MS4 ANNUAL REPORT

-PUBLIC NOTICE-

Putnam County's 2023 MS4 Annual Report for the Stormwater Management Program is available on the internet for public review on Putnam County's website at www.putnamcountyny.gov/highwaydept/MS4. Comments can be submitted using the "Annual Report Comment Form" on the website. Putnam County's MS4 Annual Report is also available for review at the Putnam County Department of Highways & Facilities, located at 842 Fair Street, Carmel, New York 10512, and the Putnam County Department of Planning, Development, & Public Transportation, located at 841 Fair Street, Carmel, New York 10512.