

**City of Saratoga Springs, New York  
SPDES ID # NYR20A216**

**Stormwater Management Program**

**Annual Report  
(March 2010 – March 2011)**

**SPDES General Permit No. GP-0-10-002 for  
Stormwater Discharges From  
Municipal Separate Storm Sewer Systems (MS4's)**

**May 2011**

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

MCC form for period ending March 9, 2011

Name of MS4 Saratoga County ISWM Program

SPDES ID

NYR 20C006

Each MS4 must submit an MCC form.

**Section 1 - MCC Identification Page**

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

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

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

If Joint Report, enter coalition name:

S	a	r	a	t	o	g	a		C	o	u	n	t	y		I	n	t	e	r	m	u	n	i	c	i	p	a	l
S	t	o	r	m	w	a	t	e	r		M	a	n	a	g	e	m	e	n	t		P	r	o	g	r	a	m	

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

MCC form for period ending March 9, 2011

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

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

MCC form for period ending March 9, 

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Name of MS4 

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SPDES ID

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**Section 2 - Contact Information**

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5. Report Preparer (Consultants may provide company name in the space provided).

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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
B l u e	R	N e i l s

Title
P r o g r a m   C o o r d i n a t o r

Address
5 0   W e s t   H i g h   S t r e e t

City	State	Zip
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**MS4 Municipal Compliance Certification(MCC) Form**

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

Name of MS4 City of Saratoga Springs, NY

SPDES ID  
N Y R 2 0 A 2 1 6

**Section 2 - Contact Information**

Important Instructions - Please Read

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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
P a u l	K	M a l e

Title  
C i t y E n g i n e e r

Address  
4 7 4 B r a o d w a y

City	State	Zip
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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

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Name of MS4 

City of Saratoga Springs, NY
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SPDES ID

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**Section 2 - Contact Information**

Important Instructions - Please Read

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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 

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 Last Name 

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City 

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 State 

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 Zip 

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eMail 

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Phone 

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 County 

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

MCC form for period ending March 9, 2011

Name of MS4

SPDES ID

**Section 3 - Partner Information**

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

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/Coalition Name

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

Address

City

State

Zip

eMail

Phone

()

Legally Binding Agreement in accordance

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)?

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Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices* required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

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

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

Name of MS4

SPDES ID  
N Y R 2 0 A 2 1 6

**Section 4 - Certification Statement**

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

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

First Name  MI  Last Name

Title (Clearly print title of individual signing report)

Signature  


Date  
0 4 / 2 6 / 2 0 1 1

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 Annual Report Form**

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

2	0	1	1
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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: 

Saratoga County ISWM Program
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SPDES ID

N	Y	R	2	0	C	0	0	6
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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.**

At this point in the Program, the goal is to maintain the already well-developed Public Education/Outreach Program. The I-SWM Program metric has been the use of the "hit counter" for the I-SWM Program website. While attendance at events and trainings is a direct metric it is only indicative of the audience being captured at that moment. The website counter enables the Program to review the broader influence of direct education efforts.

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

The hit counter data is compiled on a monthly basis and compiled into a single report each year. This year the eleven month average was: 9,977 and the total (05/2010 - 03/2011 ) was: 109,755 a 31.5% increase from last year.

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

1			
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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).**

Continue implementation of the Saratoga County I-SWM Program Education/Outreach Program  
 -Maintain website; ongoing throughout the year  
 -Maintain "Town Hall" displays/kiosks; ongoing throughout the year  
 -Continue direct education/outreach programming; ongoing throughout the year  
 -Continue SW Regional Training Center w/ Don Lake; ongoing throughout the year





### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2011

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

Name of MS4/Coalition: Saratoga County ISWM Program

SPDES ID  
N Y R 2 0 C 0 0 6

### 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

S a r a t o g a C C E I S W M P r o g r a m

Address

5 0 W e s t H i g h S t r e e t

City

B a l l s t o n S p a

Zip

N Y

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Phone

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Library  Annual Report  SWMP Plan  Comments

Address

City

Zip

-

Phone

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Other  Annual Report  SWMP Plan  Comments

Address

4 3 M c M a s t e r S t r e e t

City

B a l l s t o n S p a

Zip

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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

### 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 

Saratoga County ISWM Program
------------------------------

SPDES ID  

N	Y	R	2	0	C	0	0	6
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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.

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4.b. For how many days was/will this report be posted?

3	6	5
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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?

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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 

Saratoga County ISWM Program
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SPDES ID  

N	Y	R	2	0	C	0	0	6
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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.

On-time publication of the Annual Report (Y8) and 90% (or better) participation in clean up events by all groups.

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

Annual Report was 1 day overdue - this goal was unmet;  
100% Participation by all registered groups - this goal has been met.

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

2			
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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).

The Saratoga County Bio Assessment & Monitoring Program is still under development;  
Continue administration of all Adopt-A-Highway Programs;  
Restructure ISWM Program protocol for Annual Reporting to avoid submission of overdue combined 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 

City of Saratoga Springs, NY
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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.**

Periodically sample stormwater discharges in those areas of the City most likely to experience pollution such as the downtown commercial district, neighborhoods with older infrastructure, and areas with a recurring history of problems or public complaints. Testing parameters should be based on established pollutant(s) of concern or in conjunction with field investigations and findings.

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

A total of three (3) sampling events were conducted in the months of May, September, and December. Each event sampled outfalls located at the low point of seventeen (17) sub-drainage areas each which discharge to a primary storm water carrier. Lab tests looked for sanitary contamination (e.g. fecal coliform) which has been targeted as a pollutant of concern in the inner city district which has older infrastructure. Lab results showed no high levels of fecal coliform.

**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).**

Similar sampling events will continue through the next report year in order to monitor the quality of stormwater being discharged from areas of the City more prone to have problems due to the factors noted above. If a problem is detected the source of the contamination can be subsequently tracked and isolated through further investigation with repairs or other remediation to follow.

**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 

City of Saratoga Springs, NY
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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.**

Inventory newly constructed, or recently discovered, stormwater outfalls and show their location on the City's Stormwater Outfall Map. Also conduct a thorough field inspection of each outfall and maintain this information in an organized database. Also, re-inspect at least 20% of known outfalls each year so that each outfall is re-visited at least once every five years.

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

To date, 79 of 80 known stormwater outfalls have been inventoried, mapped, and inspected at least one time over the past five years. A total of (1) new outfall was constructed and/or discovered during the report year and added to the inventory.

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

			1
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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).**

Due to scheduling and available manpower, the task of re-inspecting outfalls (min. 20%/yr.) as part of the 5-year program was not accomplished. The City will look to resume this work in the coming report year.

**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 

City of Saratoga Springs, NY
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SPDES ID  

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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.**

Generate and maintain up-to-date mapping of the sanitary and storm sewer systems in order to provide a baseline and working tool for the City's IDDE program. In conjunction with the mapping process, conduct inspections of manholes, pipeline, and other infrastructure to identify problems that could result in stormwater pollution.

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

Since the re-mapping effort began, the entire storm and sanitary sewer systems located within the City's inner district has been re-mapped. In addition, field inspections have been performed at 1450 manholes and certain suspect sewer pipes have also been video inspected to verify their condition.

**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).**

Due to scheduling and available manpower, progress toward re-mapping and inspection of older storm and sanitary sewer systems located in the outside districts of the City was not accomplished. The City will look to resume this work in the coming report year.

**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: 

City of Saratoga Springs, NY
------------------------------

SPDES ID  

N	Y	R	2	0	A	2	1	6
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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.**

Improper dumping and discharge of pollutants poses a significant threat to stormwater quality. These sources of pollution can be effectively reduced or eliminated by way of the City's IDDE program in conjunction with increased public awareness about the negative affects of illicit forms of pollution.

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

The IDDE Program continued to be implemented to help identify, locate, and remediate sources of stormwater pollution. To raise public awareness, another (100) "Don't Pollute..." decals were installed on storm drains around the City. In addition, (9200) utility bills sent quarterly to residents included information and practical tips on stormwater pollution prevention printed on each bill.

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

	1	0	0
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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).**

The City will continue to implement its' IDDE Program. Likewise, more storm drain decals will be installed in high foot traffic areas and residents will continue to be mailed utility bills that contain educational information regarding stormwater pollution prevention.

### 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: 

City of Saratoga Springs, NY																			
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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? 

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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? 

	1	9
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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
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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:**

- |                                                        |   |                                                                                                                                                                                                                                                                                                                         |   |  |   |   |                                               |
|--------------------------------------------------------|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|--|---|---|-----------------------------------------------|
| <input checked="" type="radio"/> Notices of Violation  | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">1</td><td style="width: 20px; height: 20px; text-align: center;">2</td></tr></table> |   |  | 1 | 2 | <input type="radio"/> No Authority            |
|                                                        |   | 1                                                                                                                                                                                                                                                                                                                       | 2 |  |   |   |                                               |
| <input type="radio"/> Stop Work Orders                 | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>                                           |   |  |   |   | <input type="radio"/> No Authority            |
|                                                        |   |                                                                                                                                                                                                                                                                                                                         |   |  |   |   |                                               |
| <input type="radio"/> Criminal Actions                 | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>                                           |   |  |   |   | <input checked="" type="radio"/> No Authority |
|                                                        |   |                                                                                                                                                                                                                                                                                                                         |   |  |   |   |                                               |
| <input type="radio"/> Termination of Contracts         | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>                                           |   |  |   |   | <input type="radio"/> No Authority            |
|                                                        |   |                                                                                                                                                                                                                                                                                                                         |   |  |   |   |                                               |
| <input type="radio"/> Administrative Fines             | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>                                           |   |  |   |   | <input checked="" type="radio"/> No Authority |
|                                                        |   |                                                                                                                                                                                                                                                                                                                         |   |  |   |   |                                               |
| <input type="radio"/> Civil Penalties                  | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>                                           |   |  |   |   | <input checked="" type="radio"/> No Authority |
|                                                        |   |                                                                                                                                                                                                                                                                                                                         |   |  |   |   |                                               |
| <input type="radio"/> Administrative Orders            | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>                                           |   |  |   |   | <input type="radio"/> No Authority            |
|                                                        |   |                                                                                                                                                                                                                                                                                                                         |   |  |   |   |                                               |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>                                           |   |  |   |   |                                               |
|                                                        |   |                                                                                                                                                                                                                                                                                                                         |   |  |   |   |                                               |
| <input type="radio"/> Other                            | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>                                           |   |  |   |   | <input type="radio"/> No Authority            |
|                                                        |   |                                                                                                                                                                                                                                                                                                                         |   |  |   |   |                                               |

**MS4 Annual Report Form**

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

2	0	1	1
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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: 

City of saratoga Springs, NY
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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? 

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

		9
--	--	---

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

	1	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, 2011

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

Name of MS4/Coalition: City of saratoga Springs, NY

SPDES ID  
N Y R 2 0 A 2 1 6

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

C i t y E n g i n e e r s O f f i c e

Address

4 7 4 B r o a d w a y C i t y H a l l

City

S a r a t o g a S p r i n g s

N Y

Zip

1 2 8 6 6 -

Phone

( 5 1 8 ) 5 8 7 - 7 0 9 8

○ 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 

City of saratoga Springs, NY
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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.**

Establish standard procedures and assign qualified personnel to review construction plans, stormwater pollution prevention plans, erosion and sediment control plans, and engineering/design documents to insure projects subject to City Local Law No. 1 (2008) and SPDES General Permit GP-0-10-001 are in compliance with these and other stormwater guidelines.

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

A total of nineteen (19) project proposals subject to local and State stormwater regulation were reviewed by the City Engineer (P.E., CPESC) to verify compliance with the NY- SPDES General Permit for Construction Activity, NYS Stormwater Management Design Manual, NYS Standards and Specifications for Erosion and Sediment Control, and/or other stormwater management guidelines.

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

		1	9
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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).**

Future project proposals required to comply with stormwater management regulations will continue to be reviewed by the City Engineer to insure they are designed and constructed in compliance with State and local regulations and guidelines.

**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 

City of Saratoga Springs, NY																			
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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.**

Administer a site inspection program that monitors active construction projects, requires scheduled inspections and reporting by the project owner or operator, provides for routine inspections by City personnel, and allows for enforcement action by City and/or State officials.

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

A total of twelve (12) construction projects were active during the report year each of which was inspected by a qualified individual designated by the project owner or operator in accordance with SPDES Permit GP-0-10-001. Inspection reports were submitted to the City Engineers Office for review. Additional inspections were also routinely performed by trained City personnel.

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

		1	2
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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).**

The City will continue to administer an inspection program to insure construction sites are managed and built according to the project's Stormwater Pollution Prevent Plan and approved construction drawings. Projects that fail to meet these requirements will be subject to enforcement action by the City and/or State.

**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

City of Saratoga Springs, NY

SPDES ID

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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.**

Provide assistance to project owners and/or contractors regarding general requirements mandated by SPDES General Permit No. GP-0-10-001 in addition to specific requirements contained in the project's Stormwater Pollution Prevention Plan, Erosion and Sediment Control Plan, and/or approved construction drawings.

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

The City Engineer held a pre-construction meeting with the project owner and/or general contractor of (6) projects at which time stormwater requirements were reviewed and any questions or concerns put forth by the owner and/or contractor were addressed. The City also maintained a list-serve e-mail directory of local engineers, designers, and contractors through which stormwater information was distributed.

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

			6
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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).**

Pre-construction meetings will continue to be a requirement of the City Engineer before any project is granted permission to break ground. The City will continue to provide information (e.g. regulation changes, policy updates, training announcements) by e-mail to local engineers, designers, and contractors.



**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 

City of Saratoga Springs, NY																			
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?  

1	0	0
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 %

### 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 

City of Saratoga Springs, NY
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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.

Inventory newly constructed or recently discovered stormwater management practices and document their location, general description, practice classification, ownership, and maintenance requirements.

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

Construction plans and as-built drawings submitted by the developer to the City Engineers Office were used to identify newly constructed stormwater management practices which were subsequently added to the existing database of information. Field inspections were also used to verify practices and gather additional information.

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

			4
--	--	--	---

*(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).

The City Engineers Office will continue to maintain an up-to-date inventory and database of stormwater management practices that are identified during the project review process or when specified on final as-built drawings which are required by the City Engineer in order to officially close-out the project.

**MS4 Annual Report Form**

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

2	0	1	1
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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 

City of Saratoga Springs, NY			
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SPDES ID

N	Y	R	2	0	A	2	1	6
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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.**

Promote the innovative design of stormwater management practices on a site-by-site basis by working with the project developer, engineer and/or designer to insure the appropriateness and long-term effectiveness of the practices being proposed.

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

Project proposals requiring Stormwater Pollution Prevention Plans and engineered drainage plans for nineteen (19) development proposals were thoroughly reviewed by the City Engineer and City Planning Board.

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

		1	9
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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).**

All future project proposals requiring Stormwater Pollution Prevention Plans and detailed drainage plans will be reviewed to insure SMP's meet State and local stormwater requirements, and also conform to and/or enhance the overall character of the project along with neighboring properties.

**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 

City of Saratoga Springs, NY																													
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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>	
Street Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Bridge Maintenance.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Other.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No

**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 

City of Saratoga Springs, NY
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SPDES ID

N	Y	R	2	0	A	2	1	6
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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 

			1	0
--	--	--	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

		2	8	1
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		1	3	2
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

				0
--	--	--	--	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

		1	2	6
--	--	---	---	---
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

		1	2	6
--	--	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

			3	.	0
--	--	--	---	---	---

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

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

**4. What was the date of the last training?**

0	3	/	0	3	/	2	0	1	1
---	---	---	---	---	---	---	---	---	---

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

	7	2
--	---	---

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

	9	5	%
--	---	---	---

**MS4 Annual Report Form**

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

2	0	1	1
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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 

City of Saratoga Springs, NY									
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SPDES ID

N	Y	R	2	0	A	2	1	6
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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.**

Provide regular in-house training to public works crews on the causes and impacts of stormwater pollution and provide instruction on performing their jobs in a manner that reduces or eliminates potential pollution. Opportunities for education should also be made available to staff from the Engineering, Planning, Building, Code Enforcement, and other City offices involved in stormwater management.

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

(72) employees of various divisions within the Public Works Department including streets & highways, sewer & water, and buildings & grounds attended an in-house training class which addressed hazardous spill prevention and clean-up, erosion and sediment control, illicit discharge detection, and best management practices at the highway garage. In addition, (7) employees from the Engineering, Planning, and Code Enforcement Offices also attended outside sponsored workshops.

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

		7	9
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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).**

Education and training are a key element to the success of the City's Stormwater Management Program. Public Works employees will be required to attend an in-house training session(s) focusing attention on municipal operations that could impact stormwater quality. Personnel from other departments whose work responsibilities involve stormwater management will also be encouraged to attend classes and educational offerings.

**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

City of Saratoga Springs, NY

SPDES ID

N	Y	R	2	0			
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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.**

Keep equipment and vehicles in sound working condition to minimize leaks and spills, and perform routine maintenance, repairs, and washing indoors to prevent polluted stormwater runoff. Also focus attention on fueling practices to minimize spills and be prepared to respond in the event of accidental spills.

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

Operators routinely inspect equipment and vehicles to identify leaks or other problems while mechanics perform regular inspections and maintenance. All mechanical work is done indoors. Washing with soaps or detergents is also done indoors and floor drains discharge to an oil-water separator. The fuel island is monitored by the garage dispatcher and spill clean-up materials are available near the pumps. Such pollution prevention measures were practiced throughout the year.

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

	3	6	5
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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).**

Areas or facilities involved in the repair, fueling, or washing of equipment and vehicles are potential pollutant "hot spots" and will continue to be closely monitored and employees will also be instructed to perform their work duties in ways that minimize the potential for polluted runoff.

**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: 

City of Saratoga Springs, NY
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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.**

Implement a street sweeping program to remove dirt, sand, and general debris from City streets and roads to prevent these pollutants from reaching the storm sewer system or nearby waterbodies. Also perform periodic storm drain cleaning to remove sump sediment and debris.

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

All City streets and roads were swept at least one time following the end of the winter sand and salt season. Additionally, streets in and around the downtown business district, the Saratoga Horse Track, and other inner district neighborhoods were swept regularly during the Spring, Summer and Fall seasons. (132) catch basins were cleaned of sediment and debris using the City's vacuum-sewer jet combination unit (VacCon).

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

1	3	2
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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).**

Similarly scheduled street sweeping will be performed during the next report year using a current fleet of two Pelican sweepers. This work continues to remove large quantities of sand, street litter, and other debris from streets and roadways keeping these materials from reaching the storm sewer system. Debris that winds up in the sumps of storm drains will be removed through periodic cleaning using a VacCon unit.

**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

City of Saratoga Springs, NY

SPDES ID

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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.**

Improper handling, storage, and disposal of hazardous materials has potential to result in stormwater pollution. Training workers and implementing best management practices including spill prevention, response, and clean-up can help to prevent stormwater pollution from occurring.

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

Hazardous materials are stored indoors or undercover on impervious surfaces. Storage tanks and drums have adequate spill containment and are regularly inspected. Used motor oil/filters, parts solvent, soiled rags, paints and spirits, and other hazardous wastes are collected by a licensed waste disposal contractor(s). (72) employees received training designed to promote the proper use and disposal of hazardous materials.

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

		7	2
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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).**

Hazardous materials will continue to be handled, stored, and disposed of in manners that prevent stormwater pollution. Employees will also continue to receive training to raise awareness of the potential impacts and to promote best management practices in the workplace.

### MS4 Annual Report Form

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

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Name of MS4/Coalition

City of Saratoga Springs, NY

SPDES ID

N Y R 2 0 A 2 1 6

### 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?

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

MS4 Description	Answer	Check NA	(POC)
<b>NYC EOH Watershed</b>			
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
<b>Onondaga Lake Watershed</b>			
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
<b>Greenwood Lake Watershed</b>			
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
<b>Oyster Bay</b>			
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
<b>Peconic Estuary</b>			
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
<b>Oscawana Lake Watershed</b>			
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
<b>LI 27 Embayments</b>			
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.   %

Estimate what percentage was mapped in this reporting period.   %

### 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 

City of Saratoga Springs, NY																			
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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? 

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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? 

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

--	--	--

 %

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

--	--	--

 %  
 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, 

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Name of MS4/Coalition 

City of Saratoga Springs, NY																			
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SPDES ID  

N	Y	R	2	0	A	2	1	6
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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