MS4 Annual Report Cover Page

MCC form for period ending March 9, 2

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Choose one:

This report is being submitted on behalf of an individual MS4.

Fill in SPDES ID in upper right hand corner.

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OR

O This report is being submitted on behalf of a Single Entity

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

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O This is a joint report being submitted on behalf of a coalition.

Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.

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Cover Page 1 of 2

MS4 Annual Report Cover Page

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

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

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MS4 Municipal Compliance Certification(MCC) Form

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

SPDES ID

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Each MS4 must submit an MCC form.										
Section 1 - MCC Identification Page										
Indicate whether this MCC form is being submitted to certify endorsement	nt or ac	cent	tanc	e o	f:					
• An Annual Report for a single MS4										
O A Single Entity (Per Part II.E of GP-0-10-002)										
O A Joint Report										
Joint reports may be submitted by permittees with legally b	oinding	agı	reer	ner	ıts.					
If Joint Report, enter coalition name:										
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MS4 Municipal Compliance Certification(MCC) Form

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

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

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MS4 Municipal Compliance Certification(MCC) Form

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

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For each contact, select all that apply:

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

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MS4 Municipal Compliance Certification (MCC) Form

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

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Name of MS4 Village of Croton-on-Hudson	N Y R 2 0 A 0 4 6													
Section 3 - Partner Information														
Did your MS4 work with partners/coalition to complete some or all per	mit requirements during this reporting													
period?	● Yes ○ No													
If Yes, complete information below.														
Submit a separate sheet for each partner. Information provided accepted. If your MS4 cooperated with a coalition, submit one														
coalition. It is not necessary to include a separate sheet for each														
If No, proceed to Section 4 - Certification Statement.														
Partner/CoalitionName														
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	y Binding Agreement in accordance P-0-08-002 Part IV.G.? ✓ Yes O No													
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Additional tasks/responsibilities														
 Watershed Improvement Strategy Best Management Practices 	s 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 0

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	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/CoalitionName Indian Brook - Croton Grorge BDES Partner ID - If applicable Partner/CoalitionName(cont) SPDES Partner ID - If applicable N R R 2 0																													
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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, $2 \mid 0 \mid 1 \mid 0$

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Name of MS4 Village of Croton-on-Hudson	N	Y	R	2	0	Α	0	4	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
Marco		Gennarelli
Title (Clearly print title of individual signing report)		
Superintendent	f	Public Works
Signature		
		Date

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

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rela	The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. Pyes O No If Yes, choose one of the following Report(s) attached to the annual report Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page. URL URL URL URL URL URL URL UR																													
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MS4 Annual Report Form

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

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

Name of MS4/Coalition Village of Croton-on-Hudson	SPDES ID N Y R 2 0 A 0 4 6
Minimum Control Measure 1. Public Edu	cation and Outreach
The information in this section is being reported (check one):	cation and Outreach
On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1. Targeted Public Education and Outreach Best Managemen	nt Practices
Check all topics that were included in Education and Outreach du	ring this reporting period:
	<i>y</i>
• Construction Sites	Pesticide and Fertilizer Application
● General Stormwater Management Information	Pet Waste Management
 Household Hazardous Waste Disposal 	Recycling
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
O Infrastructure Maintenance	● Trash Management
Smart Growth	Vehicle Washing
Storm Drain Marking	Water Conservation
● Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
• Other:	O None
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2. Specific audiences targeted during this reporting period:	
● Public Employees ● Contractors	
ResidentialDevelopers	
● Businesses ● General Public	
○ Restaurants ○ Industries	
Other: O Agricultural	
Educators	

MS4 Annual Report Form

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MS4 Annual Report Form

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

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

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MS4 Annual Report Form

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

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

	SPDES ID
Name of MS4/Coalition Village of Croton-on-Hudson	N Y R 2 0 A 0 4 6
4. Evaluating Progress Toward Measurable Goals MCM	A 1
Use this page to report on your progress and project plans to identified in your Stormwater Management Program Plan (S III.C.1. Submit additional pages as needed.	ward achieving measurable goals WMPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in	the SWMPP in this reporting period.
The Village's Public Education and Outreach program will the impacts of storm water discharges on local water bodies and the steps that can be taken to reduce pollutants in storm discharges.	, pollutants of concern and their sources.
. ,	
B. Briefly summarize the observations that indicated the Goal. The Village has chosen to evaluate the number of direct mai overall effectiveness of the Public Education and Outreach pub	llings as an indicator for measuring the
water/pollution prevention direct mailings in the 2008-2009	period. There were also two storm
C. How many times was this observation measured or ev	aluated in this reporting period?
D. Has your MS4 made progress toward this Massawahle	(ex.: samples/participants/events,
D. Has your MS4 made progress toward this Measurable	• Goal during this reporting period? • Yes O No
E. Is your MS4 on schedule to meet the deadline set forth	
F. Briefly summarize the stormwater activities planned t the next reporting cycle (including an implementation	o meet the goals of this MCM during schedule).
The Village plans to continue to evaluate the number of directive overall effectiveness of the public education and outreach The Village will conduct direct mailings related to storm was throughout the next reporting period.	h program in the next reporting cycle.

MS4 Annual Report Form

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

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

			SPDES ID			
Name of MS4/Coalition Village of Croton-on-Hudson			N Y R 2	0 A	0 4	6
Minimum Control Measure	2. Public I	nvolvemen	ıt/Particip	<u>ation</u>		
The information in this section is being reported (c	heck one):					
On behalf of an individual MS4On behalf of a coalition						
How many MS4s contributed to th	is report?					
1 What apparenting wave provided for pr	hlia nautiain	ation in imn	lomontation			
1. What opportunities were provided for pu development, evaluation and improvement		_			n	
(SWMP) Plan during this reporting period	d? Check a	ll that apply	•			
● Cleanup Events			# Events			1
O Comments on SWMP Received			# Comments			
● Community Hotlines	Phone#	(914) 2 7 1	- 3	7 7	5
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O Community Meetings			# Attendees			
Plantings			Sq. Ft.		4 0	0
O Storm Drain Markings			# Drains			
O Stakeholder Meetings			# Attendees			
 Volunteer Monitoring 			# Events			1
Other: Conservation	A d v i	s o r y	Cou	n c	i l	
2. Was public notice of availability of this a	nnual report	and Stormy	vater Mana	gemen	t	
Program (SWMP) Plan provided?				• Yo	es C	No
● List-Serve			# In List			
O Newspaper Advertising			# Days Run			\coprod
O TV/Radio Notices	1 1	·	# Days Run			
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• Web Page URL: Enter URL(s) on the following	ng two pages.	• •				

MCM 2 Page 1 of 6

MS4 Annual Report Form

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MS4 Annual Report Form

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MS4 Annual Report Form

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

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID Name of MS4/Coalition Village of Croton-on-Hudson N Y R 2 0 A 0 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 Ē n g i n е e r i n D g е t р a m e n Address V а n W С k S t У r е е t City Cro t 0 n 0 n Η u d n NA 1 0 5 s 0 2 0 Phone 9 1 8 3 O Library Address O Annual Report O SWMP Plan O Comments City Zip Phone Other O Annual Report O SWMP Plan O Comments Address City <u>Zip</u> Phone Web Page URL: Annual Report O SWMP Plan O Comments Please provide specific address of page where report can be accessed - not home page.

MCM 2 Page 4 of 6

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MS4 Annual Report Form

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

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

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Name	e of MS4/Coalition Village of Croton-on-Hudson		N	YR	2	0 7	0	4	6
	If this report was made available on the internet, what dat	te was it	po	sted?					
	Leave blank if this report was not posted on the internet.			/		/			
4.b.	For how many days was/will this report be posted?								
	If submitting a report for single MS4, answer 5.a If submitting	ng a join	nt re	port,	ans	wer	5.b		
5.a.	Was an Annual Report public meeting held in this reporti If Yes, what was the date of the meeting?	ng perio	od?	/		0	Yes		No
	If No, is one planned?					0,	Yes	•	No
5.b.	Was an Annual Report public meeting held for all MS4s c	ontribu	tin	g to tl	his	repo	rt d	urir	ıg
	this reporting period?					0,	Yes	0	No
	If No, is one planned for each?					0,	Yes	0	No
I	Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					0	Yes	•	No

MS4 Annual Report Form

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

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

	SPDES ID
Name of MS4/Coalition Village of Croton-on-Hudson	N Y R 2 0 A 0 4 6
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	achieving measurable goals PP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The Village's Public Involvement/Participation program will incohelp to reduce pollutants of concern and encourage the general pubecome involved in storm water management and environmental	ablic, residents and businesses to
B. Briefly summarize the observations that indicated the over Goal.	all effectiveness of this Measurable
The Village has chosen to evaluate the number of cleanup events for measuring the overall effectiveness of the Public Involvement event is held annually for Earth Day.	held in the Village as an indicator / Participation program. A cleanup
C. How many times was this observation measured or evaluat	ed in this reporting period?
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goal	during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	
F. Briefly summarize the stormwater activities planned to med the next reporting cycle (including an implementation sched	et the goals of this MCM during
The Village plans to continue to evaluate the number of cleanup e indicator for measuring the overall effectiveness of the Public Invertee Village will host cleanup events related to storm water manages tewardship periodically throughout the year.	olvement/ Participation program.

MS4 Annual Report Form

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

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

SPDES ID

Name of MS4/Coalition Village of Croton-on-Hudson	N Y R 2 0 A 0 4 6								
Minimum Control Measure 3. I	llicit Discharge Detection and Elimination								
The information in this section is being reported (check one):								
On behalf of an individual MS4On behalf of a coalition									
How many MS4s contributed to the	nis report?								
1. Enter the number and approx. percent of	of outfalls mapped: # 95%								
2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?									
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this								
O Auto Recyclers	O Landscaping (Irrigation)								
O Building Maintenance	○ Marinas								
O Churches	O Metal Plateing Operations								
O Commercial Carwashes	Outdoor Fluid Storage								
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance								
O Construction Vehicle Washouts	○ Printing								
O Cross-Connections	O Residential Carwashing								
O Distribution Centers	○ Restaurants								
O Food Processing Facilities	O Schools and Universities								
O Garbage Truck Washouts	O Septic Maintenance								
O Hospitals	O Swimming Pools								
O Improper RV Waste Disposal	O Vehicle Fueling								
O Industrial Process Water	O Vehicle Maint./Repair Shops								
Other:	None								
O Sewersheds:									

MS4 Annual Report Form

	8	SPDE	SID					
Name of MS4/Coalition Village of Croton-on-Hudson		N Y		2 0	А	0	4	6
3.b. What types of illicit discharges have	been found during this reporti	ing p	eriod	?				
O Broken Lines From Sanitary Sewer	O Industrial Connections	•						
O Cross Connections	○ Inflow/Infiltration							
Failing Septic Systems	O Pump Station Failure							
O Floor Drains Connected To Storm Sewers	 Sanitary Sewer Overflows 							
○ Illegal Dumping	O Straight Pipe Sewer Discharges			•				
Other:	○ None							
4. How many illicit discharges/potentia reporting period?	l illegal connections have been o	detec	cted d	uriı	ng ti	his		2
5. How many illicit discharges have bee					renc	ortii		2
period?								2
7. Has the storm sewershed mapping be If No, approximately what percent was	en completed in this reporting completed in this reporting period	peri d?	od?	0	Yes		● N	િ જ
8. Is the above information available in Is this information available on the w If Yes, provide URL(s):	eb?			0	Yes Yes		N O	
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MS4 Annual Report Form

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

SPDES ID N Y R 2 0 A 0 4 6 Village of Croton-on-Hudson Name of MS4/Coalition 8. URL(s) con't.: Please provide specific address of page where map(s) can be accessed - not home page URL URL URL URL 9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? ● Yes ○ No 10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? ○ Yes • No \circ NT 11. What percent of staff in relevant positions and departments has received IDDE training? 용

MS4 Annual Report Form

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

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

• "			SPDES ID	i e
Name of MS4/Coalition	Village of Croton-on-Hudson		N Y R	
12. Evaluating Pro	ogress Toward Measurable G	Goals MCM 3		
identified in your St	oort on your progress and projetormwater Management Progrational pages as needed.	ect plans toward acl am Plan (SWMPP)	hieving measura , including requ	able goals iirements in Part
A. Briefly summa	rize the Measurable Goal ide	entified in the SW	MPP in this re	porting period.
The Village IDDE discharges to the m	program will focus on identify aximum extent practicable.	ving, eliminating, re	educing and pre	venting illicit
B. Briefly summan Goal.	rize the observations that ind	licated the overall	effectiveness o	f this Measurable
measuring the over	osen to evaluate the number of all effectiveness of the IDDE p g period. Both were eliminate	program. There we	etected as an inc ere two illicit di	licator for scharges detected
C. How many time	es was this observation meas	ured or evaluated	in this reporti	ng period?
			· ·	1
D. Has your MS4 i	made progress toward this m	ieasurable goal du		<pre>.: samples/participants/ ting period?</pre>
E. Is your MS4 on	schedule to meet the deadlin	ne set forth in the S	SWMPP?	● Yes ○ No
F. Briefly summar the next reporti	rize the stormwater activities ng cycle (including an imple	planned to meet t mentation schedul	the goals of this	
Discharge Detection Assessment. Illicit	ntinue to follow the procedure n and Elimination: A Guidance discharges will be investigated lage illicit discharges local law	e Manual for Progra d and eliminated ac	am Development cording to the a	nt and Technical

MCM 3 Page 4 of 4

MS4 Annual Report Form

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

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

		SPI	DES	ID						
Name of MS4/Coalition	Village of Croton-on-Hudson	N	Y	R	2	0	А	0	4	6

<u>Minimum Control Measures 4 and 5.</u> Construction Site and Post-Construction Control

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 r mechanism that provides equivalent protection to the NYS SPDES General Postormwater Discharges from Construction Activities?		
1b. Has each Town, City and/or Village contributing to this report documented the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSD Analysis Workbook?	d Erosion EC Gap	
If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local I © 09/2004 ©	Law. 03/2006	O NT
2. Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	○ No
3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) h reviewed in this reporting period?	ave been	0
4. Does your MS4/Coalition have a mechanism for receipt and consideration of processing comments related to construction SWPPPs? • Yes		O 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 SWPPP process?	ut the loca ● Yes	al O No

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

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

MS4 Annual Report Form

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

Name of MS4/Coalition Village of Croton-on-Hudson

Name of MS4/Coalition Village of Croton-on-Hudson

Name of MS4/Coalition Village of Croton-on-Hudson

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

	Minimum Control Measure 4. Constitution Site Stormwater Runc	on con	<u> </u>
Th	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one during this reporting period?	acre or	more
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	ır jurisd	liction 0
3.	What percent of active construction sites were inspected during this reporting	period?	ONT
4.	What percent of active construction sites were inspected more than once?		ONT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? • Yes	the NY	
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preve (SWPPPs) of construction projects that are subject to MS4 review and approva-		ans
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made av public review?	- 2.0	
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	d.	

MS4 Annual Report Form

	SPDES ID									
Name of MS4/Coalition Village of Croton-on-Hudson		N Y I	2	0 A	. 0	4 6				
6. con't.:										
Submit additional pages as needed.										
MS4/Coalition Office										
Department										
	e n t									
Address 1 Van Swyck Street		1			TT					
City	Zip									
Croton-on-Hudson NY	1 1 1	0 5 2	2 0	-						
Phone				L	-					
(9 1 4) 2 7 1 - 4 7 8 3										
O Library										
Address					TT					
City	Zip									
				_	П					
Phone	ــــــــــــــــــــــــــــــــــــــ	——————————————————————————————————————		L	1					
Other										
Address		· .								
City	Zip		$\overline{}$		T . T					
Phone				- L						
(
O Web Page URL(s): Please provide specific address where SWPPPs	s can be ac	ressed .	not l	home	nace					
URL	o can be ac	-	1101 1	ionic	page.					
						\Box				
						\pm				
URL			Ш							
				+		+				
				+						

MS4 Annual Report Form

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

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

		SPL	ES	ID						
Name of MS4/Coalition	Village of Croton-on-Hudson	N	Y	R	2	0	A	0	4	6

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.

The Village's Construction Site Storm Water Runoff Control program will provide equivalent protection to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activity. This includes reviewing SWPPPs submitted to the Village for projects disturbing an acre or greater of land.

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

The threshold for a SPDES General Permit for Stormwater Discharges from Construction Sites is rarely met within the Village. However, the Village will review SWPPPs as they are submitted and plans to evaluate the percent of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Construction Site Storm Water Management program.

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

(ex.: samples/participants/events)

- D. Has your MS4 made progress toward this measurable goal during this reporting period?
 - Yes No
- E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

● Yes ○ No

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

The Village plans to continue to evaluate the number of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Construction Site Storm Water Management program. The Village will review SWPPPs as they are submitted to the Village for review, comment and approval. The Village will continue to follow the Village Written Procedures for MCMs 4&5: Construction Site Storm Water Runoff Control and Post-Construction Storm Water Management.

MS4 Annual Report Form

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

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

Name of MS4/Coalitio	Village of Croton-on	-Hudson		N N	Y R 2	0 A 0	0 4 6
<u>Minimum</u>	Control Mea	sure 5. Post	-Construction	on Stormw	ater Ma	ınagem	ent
The information in t	his section is beir	ng reported (che	ck one):				
On behalf of an inOn behalf of a coa	dividual MS4 alition		, <u>, , , , , , , , , , , , , , , , , , </u>				
How n	nany MS4s cont	ributed to this	report?				
1. How many and MS4/Coalition i	what type of pos inventoried, insp	st-construction ected and mair	stormwater ma tained in this r	anagement pra eporting perio	actices ha	s your	
		#	#	# Times			
A 410		Inventoried	Inspections	Maintained			•
Alternative Practice	ces	0					
• Filter Systems				6			
Infiltration Basins		0					
Open Channels	•	0					
Ponds		4	8	7	*		
Wetlands		0					
• Other		1	6	6			
2. Do you use an	electronic tool (e.g. GIS, data	base, spreadsl	heet) to track	c post-coi	nstructio	n'
BMPs, inspecti	ons and mainta	nance?	, 1			• Yes	O No
3. What types of a Development/B	non-structural Better Site Desig	practices have gn/Green Infra	been used to astructure pri	implement L nciples?	ow Impa	nct	
O Building Codes	O Municipal Co	omprehensive Pl	ans				
Overlay Districts	Open Space F	Preservation Pro	gram				
○ Zoning	O Local Law or	Ordinance					
None	O Land Use Re	gulation/Zoning					
O Watershed Plans	Other Compre	ehensive Plan					
Other:							

MS4 Annual Report Form

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

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

	SPD	ES ID						
Nan	ne of MS4/Coalition Village of Croton-on-Hudson	Y R	2	0	A	0	4	6
	. Are the MS4s contributing to this report involved in a regional/watershed w	ide pl	ann	_	effo Yes			No
				-	10	3		140
4b.	. Does the MS4 have a banking and credit system for stormwater managemen	t pra	ctic					
				0	Yes	S ,		No
	Do the SWMP Plans for each MS4 contributing to this report include a proto and approval of banking and credit of alternative siting of a stormwater man			t pr		ce?		No
4d.	. How many stormwater management practices have been implemented as pa	rt of 1	this	sys	tem	in	thi	s
	reporting period?						0	
5.	What percent of municipal officials/MS4 staff responsible for program impletraining on Low Impace Development (LID), Better Site Design (BSD) and o				ttei	nde	d	
	Infrastructure principles in this reporting period?						0	%

MS4 Annual Report Form

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

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

SPDES ID

Name of MS4/Coalition Village of Croton-on-Hudson N Y R 2 0 A 0 4 6
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.
The Village Post-Construction Storm Water Management program will address storm water runoff from regulated new development and redevelopment projects to the Village's MS4.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
The Village has chosen to evaluate the number of times Village post-construction storm water management practices are maintained as an indicator for measuring the overall effectiveness of the Post-Construction Storm Water Management program. The six BMPs under the Village's jurisdiction were maintained 19 times during this reporting period.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/ev D. Has your MS4 made progress toward this measurable goal during this reporting period? • Yes • No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
● Yes ○ No F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).
The Village plans to continue to evaluate the number of times Village post-construction storm water management practices are maintained as an indicator for measuring the overall effectiveness of the Post-Construction Storm Water Management program. The Village will add BMPs to the inventory as necessary in the next reporting period.

MS4 Annual Report Form

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

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

SPDES ID

Name of MS4/Coalition Village of Croton-on-Hudson			N Y R 2 0	A 0 4 6]
Minimum Control Measure 6. Stormy	vater Mana	gement fo	r Municinal (Oneration	16
Minimum Control Measure of Stormy	vater iviana.	gement 10	i iviumeipai (<u>operation</u>	13
The information in this section is being reported (che	eck one):				
On behalf of an individual MS4					
On behalf of a coalition					
How many MS4s contributed to this	report?				
1. Choose/list each municipal operation/facility Pollutants of Concern to the MS4 system. operation/facility has been addressed in the Program(SWMP) Plan and whether a self-reporting period. A self-assessment is performed.	For each open e MS4's/Coal -assessment h formed to: 1)	ration/facili ition's Stori as been per determine t	ty indicate whe nwater Manag formed during he sources of po	ther the ement the	
potentially generated by the permittee's op effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already.	identify the m	ood housek		n, if it's nent ty/Facility	
effectiveness of existing programs and 3) that will be addressed by the pollution pre	identify the m	ood housek <u>(</u> <u>p</u>	eeping progran <u>Self-Assessr</u> <u>Decration/Activit</u>	n, if it's ment ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already.	identify the m vention and g Addressed in	ood housek <u>(</u> <u>p</u>	eeping progran Self-Assessa Operation/Activiterformed within years?	n, if it's ment ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility	identify the movention and g Addressed in Yes	ood housek Q SWMP? O No	eeping progran Self-Assessa Operation/Activiterformed within years?	n, if it's ment ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance	Addressed in Yes O Yes	ood housek Q p SWMP? O No No	Self-Assessr Deration/Activiterformed within years? Yes	ment ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance Bridge Maintenance Winter Road Maintenance	Addressed in Yes Yes Yes	ood housek	Self-Assessing program Self-Assessing peration/Activitien within years? Yes Yes Yes	n, if it's nent ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance	Addressed in Yes Yes Yes Yes Yes Yes Yes	OOD housek C P	Self-Assessa Deration/Activiterformed within years? Yes Yes Yes Yes	n, if it's nent ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance	Addressed in • Yes	OOD housek C P	Self-Assessing program Self-Assessing program of the program of t	n, if it's ment ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbate	Addressed in Addressed in Yes Yes Yes Yes Yes Yes Yes Ye	OOD HOUSEK	Self-Assessi Deration/Activiterformed within years? Yes Yes Yes Yes Yes Yes Yes Y	n, if it's nent ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance	Addressed in Yes Yes Yes Yes Yes Yes Yes Yes Yes Ye	OOD housek C P	Self-Assessr Deration/Activiterformed within	n, if it's nent ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance	Addressed in Addressed in Yes Yes Yes Yes Yes Yes Yes Ye	OOD HOUSEK ONO NO NO NO NO NO NO NO NO	Self-Assessing program Self-Assessing program of the program of t	n, if it's nent ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturban Right of Way Maintenance Marine Operations Hydrologic Habitat Modification	Addressed in Addressed in Yes Yes Yes Yes Yes Yes Yes Ye	OOD HOUSEK	Self-Assessr Deration/Activiterformed within years? Yes	n, if it's ment ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbat Right of Way Maintenance Marine Operations Hydrologic Habitat Modification Parks and Open Space	Addressed in Yes Yes Yes Yes Yes Yes Yes Yes Yes Ye	OOD housek	Self-Assessi Deration/Activiterformed within years? Yes Yes Yes Yes Yes Yes Yes Y	n, if it's ment ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance	Addressed in Addressed in Yes Yes Yes Yes Yes Yes Yes Ye	OOD HOUSEK (P) SWMP? O NO O	Self-Assessi Deration/Activiterformed within Years? Yes	n, if it's nent ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance Bridge Maintenance Winter Road Maintenance Salt Storage Solid Waste Management New Municipal Construction and Land Disturbat Right of Way Maintenance Marine Operations Hydrologic Habitat Modification Parks and Open Space Municipal Building Stormwater System Maintenance	Addressed in Addressed in Yes Yes Yes Yes Yes Yes Yes Ye	OOD HOUSEK ONO NO NO NO NO NO NO NO NO	Self-Assessi Deration/Activiterformed within years? Yes Yes Yes Yes Yes Yes Yes Y	n, if it's ment ty/Facility the past 3	
effectiveness of existing programs and 3) that will be addressed by the pollution pre not done already. Operation/Activity/Facility Street Maintenance	Addressed in Yes Yes Yes Yes Yes Yes Yes Yes Yes Ye	OOD HOUSEK ONO NO NO NO NO NO NO NO NO	Self-Assessr Deration/Activiterformed within years? Yes Yes Yes Yes Yes Yes Yes Y	n, if it's nent ty/Facility the past 3	

MS4 Annual Report Form

·	_	SPD	ES ID						
Name of MS4/Coalition Village of Croton-on-Hudson		N	YR	2	0	A	0 4	1 6	;
2. Provide the following information about municipal operat	ions good	l ho	ousek	eep	ing	pro	gra	ıms	:
• Parking Lots Swept (Number of acres X Number of times swep	t)		# Acr	es					
• Streets Swept (Number of miles X Number of times swept)			# Mil	es			Ť		
 Catch Basins Inspected and Cleaned Where Necessary 				#				T	ĺ
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 				# [6	
 Phosphorus Applied In Chemical Fertilizer 			# Lb	s.					٦
Nitrogen Applied In Chemical Fertilizer			# Lb	s.				T	ĺ
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.) 	umber of	#	Acres					•	֡֝֝֝֟֝֟֝֟֝֟֝֟֝֟֝֟֝֟֝֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
3. How many stormwater management trainings have been p during this reporting period?	rovided t	o n	nunic	ipal	l en	nplo	yee	s]
4. What was the date of the last training?	1	0	/		/[2 (0 0	7	
5. How many municipal employees have been trained in this i	reporting	pe	riod?	1				0	
6. What percent of municipal employees in relevant positions stormwater management training?	and depa	artr	ments	re	ceiv	/ e	0]%	

MS4 Annual Report Form

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

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

	SPDES ID
Name of MS4/Coalition Village of Croton-on-Hudson	N Y R 2 0 A 0 4 6
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
The Village Municipal Storm Water Management and Good House operations that collect, store or release sediments, wastes or other	
The Village has chosen to continue to evaluate the number of cate necessary annually as an indicator for measuring the overall effect Water Management and Good Housekeeping Program. The Villa necessary catch basins in this reporting period.	tiveness of the Municipal Storm
C. How many times was this observation measured or evaluat	ted in this reporting period?
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	he SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	_
The Village plans to continue the ongoing catch basin inspection and reporting cycle. The Village will continue to follow the BM Municipal Pollution Prevention and Good Housekeeping Assistant	Ps outlined in the NYSDEC

MS4 Annual Report Form

·	 SPI	DES	ID						
Name of MS4/Coalition Village of Croton-on-Hudson	N	Y	R	2	0	A	0	4.	6

Name of MS4/Coalition vinage of	1 Croton-on-11ddson		N I R Z U A U 4.
Additional Water	ershed Improvemer	nt Strategy Best Ma	nnagement Practices
The information in this section	on is being reported (check	k one):	
 On behalf of an individual On behalf of a coalition How many MS MS4s must answer the quantum of the properties of the pro	S4s contributed to this re		e 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

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

	1,2,5,±,7d-d,7	5,0,84,80,10,11,12	rau	iogens	
1.	Does your MS4/Coalition have an education		pacts of		
	phosphorus/nitrogen/pathogens on waterbo	odies?	O Yes	○ No	• N/A
2.	Has 100% of the MS4/Coalition conveyanc	e system been mapped in	GIS?		
		•	○ Yes	O No	N/A
	If N/A, go to question 3.				
	If No, estimate what percentage of the convey	ance system has been map	ped so far.		%
	Estimate what percentage was mapped in this	reporting period.	•		%
				L	

MS4 Annual Report Form

·		SPDES ID	
Name of MS4/Coalition Village of Croton-on-Huds	on	N Y R 2	0 A 0 4 6
3. Does your MS4/Coalition have a sand Maintenance Plan Program?	- ·	System (infrastructu ○ Yes	re) Inspection ○ No ● N/A
4. Estimate the percentage of on-site and maintained or rehabilitated a		≦'	n inspected %
5. Has your MS4/Coalition develope NYSDEC SPDES General Permit (GP-0-08-001) to reduce pollutant disturb five thousand square feet	t for Stormwater Dischar ts in stormwater runoff fi	ges from Construction	on Activities
6. Has your MS4/Coalition developed runoff from new development and equal to one acre that provides eq Permit for Stormwater Discharge the New York State Stormwater I Standards?	d redevelopment projects juivalent protection to the es from Construction Acti	s that disturb greater e NYS DEC SPDES ivities (GP-0-08-001)	than or General , including
7a. Does your MS4/Coalition have a phosphorus/nitrogen/pathogen lo		educe erosion or • Yes	○ No ● N/A
7b.How many projects have been site	ed in this reporting perio	d?	
7c. What percent of the projects inclu	uded in 7b have been com	ipleted in this report	ting period?
7d. What percent of projects planned	in previous years have b	een completed?	%
8a.Has your MS4/Coalition develope procedures policy that addresses lands?		f management practi	
8b.Has your MS4/Coalition develope procedures policy that addresses municipally owned lands?	-		

MS4 Annual Report Form

				SPDES ID						
Name of MS4/Coalition Village of Croton-on-Hudson	N	Y	R	2	0 7	0	4 6			
9. Has your MS4/Coalition developed and implemented a program o	f na	tive	e pla	ant	ing?					
		С	Ye	:S	$\circ V$	О	• N/A			
10. Has your MS4/Coalition enacted a local law prohibiting pet waste prohibiting goose feeding?	on				-	_				
promoteing goose reeding:		C	Ye	S	\circ N	O	• N/A			
11. Does your MS4/Coalition have a pet waste bag program?		С	Ye	:S	ΟN	o	• N/A			
12. Does your MS4/Coalition have a program to manage goose populations?		0	Ye	S	ON	0	• N/A			