

Progress Report for Part IX.A

Permit #	NYR20A256	Watershed Name	East of Hudson
MS4 Name	Village of Brewster	Reporting Period Ending (mm/dd/yyyy)	03 / 09 / 2017

Watershed Improvement Strategy

Describe the strategy to reduce the discharge of phosphorous to this waterbody. Include new sources that may have been identified and any modifications to the strategy to better address new sources.

Routine inspections have found no new sources of phosphorus discharges within the Village limits. The Tonetta Brook Tributary and Wells Brook Stormwater Retrofit are regularly inspected and maintained. No problems have been found at either site.

Public Education & Outreach

1. Description of the education program

The Village continues to provide outreach materials in English and Spanish, community clean up events, public meetings and partnerships.

2. Who is the target audience and what is the message delivered to each target audience?

Target audiences include residents, businesses, and municipal staff. Target audiences are advised as to the sensitivity of the watershed and instructed on BMP's.

3. Identify how many educational materials have been developed and distributed 0
4. Identify how many educational materials have been developed and distributed that focus on:
 - a. understanding the Phosphorous issues 0
 - b. Septic systems as a source of Phosphorus 0
Non-Traditional MS4
 - c. Phosphorous concerns with fertilizer use 0
 - d. Phosphorous concerns with grass clippings and leaves entering the MS4 0
 - e. Construction sites as a source of Phosphorus 0
 - f. Phosphorous concerns with detergent use 0

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5. Education plan and goals for the next 6 months

Educational literature with a focus on spring maintenance and car washing will be included in Village Mailings to residents and businesses.

Illicit Discharge Detection and Elimination

Non-Traditional MS4 (Skip Question 6-6e)

6. Number of On-Site Wastewater Treatment Systems (OWTS) with a design capacity of less than 1000 gpd that are located in sewersheds that drain to the listed waterbody _____0

a. Number of OWTS inspected in this reporting _____

b. Number of OWTS in need of maintenance or rehabilitation _____

c. Number of OWTS where maintenance or rehabilitation has been performed in this reporting period. _____

d. State the plan for OWTS that have not been addressed in 6c this reporting period

e. Describe the OWTS inspection program: Who is responsible for performing OWTS inspections? (eg:Septage Haulers, DOH, engineer, consultant); What methods are used? Are there trends in systems that need maintenance vs systems that need rehabilitation?

7. Number of Illicit Discharges detected within sewershed of listed waterbody in this reporting period. _____0

a. Number reported in 7 that have been eliminated _____

b. List of Illicit Discharge locations that have not been eliminated in this reporting period and the target date for elimination

Location	Target Date (mmddyyyy)
<input style="width: 400px; height: 20px;" type="text"/>	____/____/____
<input style="width: 400px; height: 20px;" type="text"/>	____/____/____
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Location

Target Date (mmddyyyy)

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Construction Site Stormwater Runoff Control

Non-Traditional MS4 (Skip Question 8)

- 8. Number of SWPPPs reviewed and approved during this reporting period _____ 1
- 9. Number of active construction sites within sewersheds of impaired waterbody during this reporting period: _____ 0
 - a. Number of sites reported in 9 that are **between** 5000 sqft and 1 acre _____
 - b. Number of sites inspected in this reporting period _____
 - c. Number of sites in need of corrective action _____
 - d. Number of sites where corrective action was completed in this reporting period _____
 - e. Discuss inspections. Discuss trends that may have been observed in this reporting period. State reasoning for not inspecting all active construction sites. (if applicable)

10. Construction Site Stormwater Runoff Control plan and goals for the next 6 months

The Village continues with its establish Planning Board review process and its provisions for long-term operation and maintenance of stormwater facilities and BMP's that are constructed. The Village began its review of the new draft permit GP-0-17-002.

Post Construction Stormwater Management

- 11. Number of Stormwater Management Practices (SMPs) located in sewersheds that drain to the listed waterbody _____ 2
 - a. Number reported in 11 that have been inspected in this reporting period _____ 2
 - b. Number of SMPs in need of maintenance or rehabilitation _____ 0
 - c. Number of SMPs where maintenance or rehabilitation has been performed in this reporting period. _____ 0
 - d. Number of SMPs where phosphorous pollutant problems have been identified. _____ 0
 - e. Number reported in 11d where the pollutant problem has been addressed. _____

f. Who is responsible for performing SMP inspections?

The Village Building Department and the Village Engineer perform inspections.

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g. Is the criteria in Ch 5, 6, and 10 of the NYS Stormwater Management Design Manual being applied? (If no, please describe deviations) Y N

h. State procedures to identify sites with post construction controls that are not functioning as designed (ie, rill erosion, pollutant bypass)?

Village Engineer inspects for performance.

12. Describe the retrofit program. Include the funding sources and design description of retrofits. Identify all retrofits that have been constructed and maintained during this reporting period.

Inspection and maintenance of the two Village retrofits is performed semi-annually or as needed. Said retrofits remove 83.6 kg of phosphorus annually.

13. Post-Construction Stormwater Management plan and goals for the next 6 months

The inspection and maintenance standards adopted by the Village are derived from the NYSDEC and are intended to be as protective or more protective than those described in state and federal guidelines. The Village will continue with these practices and has begun its review of the new draft permit.

Municipal Operations Pollution Prevention/Good Housekeeping

Non-Traditional MS4 (Skip Question 14)

14. Number of catch basin and manhole sumps within sewersheds discharging to listed waterbody _____

a. Number reported in 14 that have been inspected in this reporting period _____

b. Number reported in 14a cleaned in this reporting period _____

15. Number of conveyance system outfalls within sewersheds discharging to listed waterbody 7 9

a. Number reported in 15 that have been inspected in this reporting period. 7 9

b. Number reported in 15a maintained in this reporting period. 0

c. Number reported in 15a repaired in this reporting period. 0

16. Amount by weight in pounds of turf fertilizer containing phosphorous that was applied on municipally owned lands in this reporting period. 0

17. Describe turf management practices implemented during this reporting period. Include strategies implemented to introduce native plants to reduce fertilization and mowing

The Village has adopted a program of native planting. Turf management practices are not applicable to the Village.

MS4 Semi Annual Report Form Certification

Semi Annual Report form for period ending

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 (MMDDYYYY)

Name of MS4

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SPDES ID

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Certification Statement - MS4 Official (Principal Executive Officer or Ranking Elected Official) or a Duly Authorized Representative of the MS4 Official

"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, to 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 of 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-0-15-003 Part VI.J.

First Name

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 Last Name

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Title (Clearly print title of individual signing report)

M	a	y	o	r															
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Signature


Date

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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