

# STORMWATER MANAGEMENT PROGRAM (SWMP) PLAN



VILLAGE OF BUCHANAN  
WESTCHESTER COUNTY  
NEW YORK



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The Village of Buchanan, Westchester County, New York, in order to comply with the requirements of the United States Environmental Protection Agency (USEPA) and the New York State Department of Environmental Conservation (NYSDEC) has developed this Stormwater Management Program (SWMP) Plan for the purpose of documenting municipal efforts for the purpose of improving stormwater quality. This SWMP Plan has been prepared in accordance with NYSDEC State Pollution Discharge Elimination System (SPDES) General Permit for Stormwater Discharges from Municipal Separate Storm Sewer Systems Permit No. GP-0-24-001. In accordance with said permit, this SWMP Plan shall be updated periodically, no less than annually, to reflect the latest available information and to incorporate any necessary changes. The latest SWMP Plan shall be made available on the Town website.

In accordance with the USEPA Stormwater Phase II regulations, municipal operators of municipal separate storm sewer systems (MS4s) must develop, implement, and enforce a stormwater management program designed to reduce the discharge of pollutants from their MS4 to the “maximum extent practicable”, to protect water quality, and to satisfy the appropriate water quality requirements of the Clean Water Act. The rule assumes the use of narrative, rather than numeric, effluent limitations requiring the implementation of BMPs for six designated minimum control measures.

The NYSDEC is the permitting authority in New York State for the Phase II regulations. The stormwater management program must include the following six (6) minimum control measures:

1. Public Outreach and Education
2. Public Involvement/Participation
3. Illicit Discharge Detection and Elimination
4. Construction Site Stormwater Runoff Control
5. Post-Construction Stormwater Management
6. Pollution Prevention/Good Housekeeping for Municipal Operations

Other Permit Requirements include:

1. Monitoring
2. Recordkeeping
3. Reporting
4. Certification

Measurable goals are required for each of the six minimum control measures. Measurable goals are described in the Phase II rule as BMP design objectives or goals that quantify the progress of program implementation and the performance of your BMPs. There are a number of different ways you can write your measurable goals. You can consider developing measurable goals based on one or more of the following general categories:

1. *Tracking implementation over time.* Where a BMP is continually implemented over the permit term, a measurable goal can be developed to track how often, or where, this BMP

is implemented.

2. *Measuring progress in implementing the BMP.* Some BMPs are developed over time, and a measurable goal can be used to track this progress until BMP implementation is completed.
3. *Tracking total numbers of BMPS implemented.* Measurable goals also can be used to track BMP implementation numerically, e.g., the number of wet detention basins in place or the number of people changing their behavior due to the receipt of educational materials.
4. *Tracking program/BMP effectiveness.* Measurable goals can be developed to evaluate BMP effectiveness, for example, by evaluating a structural BMP's effectiveness at reducing pollutant loadings, or evaluating a public education campaign's effectiveness at reaching and informing the target audience to determine whether it reduces pollutants. A measurable goal can also be a BMP design objective or a performance standard.
5. *Tracking environmental improvement.* The ultimate goal of the NPDES storm water program is environmental improvement, which can be a measurable goal. Achievement of environmental improvement can be assessed and documented by ascertaining whether state water quality standards are being met for the receiving waterbody or by tracking trends or improvements in water quality (chemical, physical, and biological) and other indicators, such as the hydrologic or habitat condition of the waterbody or watershed.

EPA strongly recommends that measurable goals include, where appropriate, the following three components:

1. The activity, or BMP, to be completed;
2. A schedule or date of completion; and
3. A quantifiable target to measure progress toward achieving the activity or BMP.

## **Part I. Permit Coverage and Limitations**

The Village of Buchanan (“the Village”), as an Automatically Designated Municipal Separate Storm Sewer System (MS4) Operator, is not exempt from the requirements of the New York State Department of Environmental Conservation (NYSDEC) SPDES General Permit GP-0-24-001 (“GP”) as listed in GP Part I.B.1. Furthermore, the Village is not authorized to and does not permit the following discharges:

- Stormwater discharges that may adversely affect an endangered or threatened species, or its designated critical habitat;
- Stormwater discharges which adversely affect properties listed or eligible for listing in the National Register of Historic Places unless the covered entity is in compliance with requirements of the National Historic Preservation Act and has coordinated with the appropriate State Historic Preservation Office any activities necessary to avoid or minimize impacts;

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- Stormwater discharges, the permitting of which is prohibited under 40 CFR 122.4 and 6 NYCRR 750-1.3;
- The discharge of vehicle and equipment wash water from municipal facilities, including tank cleaning operations.

MS4 Name: Village of Buchanan  
Mailing Address: 236 Tate Avenue, Buchanan, NY 10511  
Receiving waters: Hudson River, Dickey Brook, Lake Meahagh

County and State roadways and associated drainage infrastructure are considered to be under the jurisdiction of separate MS4s and shall not be covered by this SWMP Plan unless otherwise agreed upon in written maintenance agreements with NYSDOT or Westchester County.

**Part II. Obtaining Permit Coverage**

An electronic Notice of Intent (NOI) has been completed and filed with NYSDEC (Appendix A). No eNOI waiver was requested. As information in the completed NOI changes, within thirty (30) days, the Village must update the information on the NOI and resubmit the completed NOI to NYSDEC.

The Village must document information from NYSDEC acknowledging previous coverage or designation in this SWMP Plan (Appendix A).

**Part III. Special Conditions**

The Village must take all necessary actions to ensure discharges comply with the terms and conditions of this SPDES general permit. If at any time the Village becomes aware (e.g., through self-monitoring or by notification from NYSDEC) that a discharge causes or contributes to the violation of an applicable water quality standard, the Village must implement corrective actions and the Village must document these actions in the SWMP Plan.

A list of violations and corrective actions is kept on file with the Building Department.

**Part IV. Stormwater Management Program (SWMP) Requirements**

***IV.1. Implementation Entities***

The Village in conjunction with the Village Consulting Engineer shall perform implementation of the permit. A list of entities involved with permit implementation is provided in Table 1 below.

Table 1: Permit Requirement Implementation Entities

<b>Name of Entity</b>	<b>Permit Requirement Implementation</b>
VOB Administrator’s Office	Point of Public Contact Public Information Outreach Public Participation and Involvement
VOB Highway Dept.	Illicit Discharge Detection & Elimination Pollution Prevention & Good Housekeeping Catch Basin Maintenance Sweeping
VOB Building Dept.	Construction Site Stormwater Runoff Control Post Construction Stormwater Management Code Enforcement
James J. Hahn Engineering* (Village Consulting Engineer)	Stormwater Program Coordinator SWMP Plan Annual Outfall Inspection Annual MS4 Report Staff Training SWPPP Review High Priority Construction Site Inspection

\*Alternative Implementation Option; agreement on file with the Village Clerk.

The Village may utilize other entities or the resources of those entities to assist with any portion of the SWMP development, implementation, or enforcement. These entities are collectively referred to as “alternative implantation options”. If the MS4 Operator is relying upon another entity for compliance with any portion of this SPDES general permit, there must be a legally binding, written, up to date, executed agreement in place, as required by GP Part IV.A.1.a. Within thirty (30) days of signing an agreement for alternative implementation agreements option, it must be documented in the SWMP Plan. A copy of these agreements shall be kept of file with the Village Clerk.

***IV.2. Organizational Information***

A staffing plan/organizational chart for implementation of the SWMP is provided in Appendix B. The written staffing plan/organizational chart includes job titles and other entities and the roles and responsibilities for each corresponding to the required elements of the SWMP. It also describes how information will be communicated and coordinated among all those with identified responsibilities.

*Village Administrator*

The Village Administrator serves the Village as its chief administrative and budgetary officer. He manages and controls stormwater practices. He is responsible for the efficient and effective implementation of stormwater practices. The Administrator supervises the improvement and repairs of drains, ditches, culverts, stream and water courses as well.

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Publishes annual stormwater report and make it available in the Village website. Some of the duties of the Administrator include, but are not limited to, attending all meetings of the Board of Trustees; preparing Board meeting agendas and items for review by the Mayor and Trustees; making recommendations to the Mayor and Board trustees regarding all issues affecting the Village and its residents; serving as liaison between other municipalities and government agencies; representing the Village on personnel matters, including collective bargaining agreements for Village employees; adopting policy set forth by the Village Board; overseeing Village projects and improvements, such as infrastructure and parkland and waterfront improvements; assessing the adequacy of Village operations to ensure efficiency and efficacy. The Village Administrator also researches and responds to inquiries by Village residents and other parties concerning Village operations and services. The Village Administrator also carries out any all duties and responsibilities as delegated by the Mayor and Board of Trustees.

*Village Clerk*

The Village Clerk works with the Village Administrator. The Clerk receives all public inquiries and complaints and distributes them to the appropriate department. The Clerk retains Village records.

*Village Building Inspector*

The Building Department is responsible for the Enforcement of the Local Ordinances of the Village and all applicable County and State Laws. These laws regulate among others, the sediment and erosion controls implementation and stormwater practice. The Building Department will enforce these regulations, will assist in the coordination of all aspects of compliance with the stormwater discharge permit and will alert the Village Consulting Engineer for potential problems. This includes numerous sub-programs such as technical advisory, new development, public education and outreach, commercial industrial, illicit discharge, plan review, training of staff, and coordination with other departments.

*Village Highway Department*

The Highway Department provides general maintenance and repairs for water mains, water services, fire hydrants and water main valves. It is also responsible for repairing or replacing catch basins, as well as laterals from drains and manholes and oversees closed circuit television camera inspection of storm and sanitary pipe. It is responsible for street sweeping.

*Village Wastewater Department*

The Wastewater Department's primary function is to treat the Village's wastewater and is responsible for the operation and maintenance of the sanitary sewer lines that make up the collection system. In addition to treating wastewater, the Department monitors discharges aware of procedures.



*Village Consulting Engineer*

The Village Consulting Engineer is an outside consultant on contract with the Village. The Engineer is a NYS licensed professional engineer (P.E.). Responsibilities include: implement and monitor stormwater program; overseeing the implementation of the Village's stormwater ordinance; field inspections; review of permits for engineering compliance; and review of the Village's overall stormwater conveyance and detention systems.

The Village must designate a Stormwater Program Coordinator who oversees the development, implementation, and enforcement of the SWMP; coordinates all elements of the SWMP to ensure compliance with this SPDES general permit; and develops and submits the Annual Report. The Stormwater Program Coordinator shall be the Village Consulting Engineer.

Stormwater Program Coordinator: George E. Pommer, P.E.  
Village Consulting Engineer  
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***IV.3. Availability of SWMP Plan***

The current SWMP Plan shall be made available to the Village staff, alternative implementation entities, NYSDEC, United States Environmental Protection Agency (USEPA), and the public by posting the SWMP Plan on the Village's website: [www.villageofbuchanan.com](http://www.villageofbuchanan.com).

Any supporting documents referenced herein as being on file with the Village Clerk is available with the Village Clerk's Office at 236 Tate Avenue Buchanan, NY during normal business hours or by contacting the Village Clerk at 914-737-1033.

***IV.4. Mapping***

The MS4 Operator must develop and maintain comprehensive system mapping documented in the SWMP Plan in a readily accessible format. The Village has comprehensive drainage maps, provided in Appendix H, which is in the process of being added to a GIS map hosted by Westchester County, which will be made available on the County website. Mapping shall include the following information:

- MS4 outfalls<sup>1</sup>

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<sup>1</sup> Information available on *Village Drainage Maps, Appendix H*

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- Interconnections<sup>2</sup> (*Any point of stormwater discharge from pipes, ditches, swales, or other points of concentrated flow, where the Village's MS4 is discharging to another MS4 or private storm sewer system*)
- Preliminary storm-sewershed boundaries<sup>3</sup>
- MS4 infrastructure<sup>4</sup>
  - Conveyance system
    - Type (closed pipe or open drainage);
    - Conveyance description for closed pipes (material, shape, dimensions);
    - Conveyance description for open drainage (channel/ditch lining material, shape, dimensions)<sup>5</sup>; and
    - Direction of flow;
  - Culvert crossings (location and dimensions)
  - Stormwater structures
    - Type (drop inlet, catch basin, or manhole); and
    - Number of connections to catch basins, and manholes
- Basemap information
  - Automatically and additionally designated areas<sup>6</sup>;
  - Names and location of all surface waters of the State, including<sup>7</sup>:
    - Waterbody classification;
    - Waterbody Inventory/Priority Waterbodies List (WI/PWL);
      - Impairment status; and
      - POC, if applicable;
    - TMDL watershed areas;
  - Land use, including: Industrial, Residential, Commercial, Open Space, and Institutional<sup>8</sup>;
  - Roads<sup>9</sup>; and
  - Topography<sup>10</sup>.

By January 2, 2027, the Village must update their comprehensive mapping in GIS to identify outfalls discharging to Lake Meahagh. Additionally, in the Lake Meahagh storm sewershed, plant nurseries, commercial lawn care facilities, and golf courses, must be identified.

#### ***IV.5. Legal Authority***

The Village, to the extent allowable by State and local law, is required to develop, implement, and maintain adequate legal authority to control pollutant discharges to implement the requirements of

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<sup>2</sup> Information available on *Village Drainage Maps, Appendix H*

<sup>3</sup> Information available on *Village Drainage Maps, Appendix H*

<sup>4</sup> Information available on *Village Drainage Maps, Appendix H*

<sup>5</sup> Open channels have been identified and mapping is ongoing.

<sup>6</sup> Information available on NYSDEC Stormwater Interactive Map: <https://gisservices.dec.ny.gov/gis/stormwater/>.

<sup>7</sup> Information available on NYSDEC Stormwater Interactive Map: <https://gisservices.dec.ny.gov/gis/stormwater/>.

<sup>8</sup> Information available on Westchester County GIS: <https://giswww.westchestergov.com/gismap/>.

<sup>9</sup> Information available on Westchester County GIS: <https://giswww.westchestergov.com/gismap/>.

<sup>10</sup> Information available on Westchester County GIS: <https://giswww.westchestergov.com/gismap/>

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the SPDES general permit. This is achieved by Village Code Chapter 166 “Stormwater Management”<sup>11</sup>. The Code is reevaluated and amended from time to time. Any resolutions for amendments that have been made or will be made to the Code are kept on file with the Village Clerk.

***IV.6. Enforcement Response Plan***

As required by GP Part IV.E.1., the Village is required to maintain an enforcement response plan (ERP) which clearly describes the action(s) to be taken for violations that the MS4 Operator has enacted for illicit discharge, construction, and post-construction.

To ensure proper BMP performance, enforcement procedures and mechanisms should be established for the municipal fixed facilities and field programs. Enforcement actions may occur as a result of a problem found during an inspection or in response to a complaint that is received. Several different types of enforcement mechanisms and penalties can be utilized to ensure compliance. The internal enforcement procedures, directed toward Village staff, include initial verbal warnings, written warnings, and more serious disciplinary actions if verbal and written warnings do not result in appropriate action. External enforcement procedures which pertain to municipal contractors maybe undertaken primarily by the Village’s inspectors, managers, and supervisors who possess enforcement authority through established policies and procedures or ordinances. Depending on the severity of the violation, enforcement could range from the issuance of a notice of noncompliance to the loss of a contract or lease, or a fine.

Village Code Chapter 166-14 “Enforcement; penalties for offenses.” details the process for notices of violations and penalties<sup>12</sup>.

As mentioned in Part III of this SWMP Plan, a list of violations and corrective actions is kept on file with the Building Department.

**Part V. Recordkeeping, Reporting, and SWMP Evaluation**

Pursuant to GP Part V.B.1., all reporting to NYSDEC, including annual reports, interim progress certifications, and NOIs, shall be submitted electronically. No electronic submission waiver is requested.

***V.1. Annual Reports***

The reporting period for the Annual Report is January 3 of the current year to January 2 of the following year (“Reporting Year”). The Annual Report must be submitted to NYSDEC by April 1 of the year following the end of the Reporting Year. Annual Reports for the past five years are

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<sup>11</sup> Village Code: <https://ecode360.com/BU0230>

<sup>12</sup> Village Code: <https://ecode360.com/BU0230>

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provided in Appendix C. Reports more than 5 years old may be removed from the Appendix and shall be kept on file with the Village Clerk.

***V.2. Interim Progress Certifications***

Twice a year, the Village must submit to NYSDEC an Interim Progress Certification (IPC) that verifies the activities included in this SPDES general permit have been completed by the date specified using the form provided by NYSDEC. An IPC for the period of January 3 through June 30 of the same year must be submitted to NYSDEC by October 1 of the same year. An IPC for the period of July 1 through January 2 of the following year must be submitted to NYSDEC by April 1 of the following year along with the Annual Report. Submission of the Annual Report is not a substitute for submission of the IPC. Completed IPCs for the past five years are provided in Appendix D. IPCs more than 5 years old may be removed from the Appendix and shall be kept on file with the Village Clerk.

***V.3. SWMP Evaluation***

Once every five (5) years, the Village must evaluate the SWMP for compliance with the terms and conditions of this SPDES general permit, including the effectiveness or deficiencies of components of the individual SWMP Plan, and the status of achieving the requirements outlined in this SPDES general permit. The SWMP evaluation must be documented in this SWMP Plan.

The current extensive revisions of the SWMP Plan constitutes the 2024 SWMP Evaluation. The next evaluation shall be performed in 2029.

**Part VI. Minimum Control Measures (MCMs) for Traditional Land Use Control MS4 Operators**

***VI.1. MCM 1 – Public Education and Outreach Program***

It is the policy of the Village to conduct a program to educate the public on the problems associated with impaired stormwater quality, the conditions which contribute to impaired water quality, and the actions which can be taken by the community both individually and as a whole to improve the quality of stormwater runoff. The Village will develop and operate programs to inform residents and businesses of the problems associated with impaired water quality through the distribution of information as discussed herein.

It is the goal of the Village to ensure that sufficient information is made available to the public on impairments to stormwater quality and what needs to be done in order for individuals and businesses to make informed decisions on how best to contribute to the overall SWMP effort.

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*VI.1.a. Focus Areas*

By January 2, 2027, the Village must identify and document the focus areas in the SWMP Plan. The focus areas to be considered are as follows:

- Areas discharging to waters with Class AA-S, A-S, AA, A, B, SA, or SB (and mapped);
  - Hudson River & Lents Cove (Class SB)
  - Unnamed Lake on ConEdison Property (43.20-2-4) (Class B)
- Sewersheds for impaired waters (and mapped);
  - Lake Meahagh (phosphorus impaired)
- TMDL watersheds (not applicable – no TMDL watersheds in the Village);
- Areas with construction activities;
- Areas with on-site wastewater systems (not applicable – no SSTs in the Village);
- Residential, commercial, and industrial areas (mapped);
- Stormwater hotspots; and
- Areas with illicit discharges.

Thereafter, the Village must, by April 1, annually review and update the focus areas and document the update in this SWMP Plan.

*VI.1.b. Target Audiences*

By January 2, 2027, the Village must identify and document the applicable target audience(s) and associated pollutant generating activities that the outreach and education will address for each focus area identified in the SWMP Plan. The target audiences are as follows:

- Residents;
- Commercial: Business owners and staff;
- Institutions: Managers, staff, and students;
- Construction: Developers, contractors, and design professionals;
- Industrial: Owners and staff; and
- Village staff.

Thereafter, the Village must, by April 1, annually review and update the target audiences and document the update in this SWMP Plan.

*VI.1.c. Education & Outreach Topics*

By January 2, 2027, the Village must identify and document in the SWMP Plan the education and outreach topics and how the education and outreach topics will reduce the potential for pollutants to be generated by the target audiences for the focus areas.

Thereafter, the Village must by April 1 annually review and update the education and outreach topics and document the update in this SWMP Plan.

*VI.1.d. Illicit Discharge Education*

What types of discharges are allowable?

Pursuant to Village Code §166-6 A.(1), the following discharges into the storm sewer system are permitted, unless the NYSDEC or the municipality has determined them to be substantial contributors of pollutants: waterline flushing or other potable water sources, landscape irrigation or lawn watering, existing diverted stream flows, rising groundwater, uncontaminated groundwater infiltration to storm drains, uncontaminated pumped groundwater, foundation or footing drains, crawl space or basement sump pumps, air-conditioning condensate, irrigation water, springs, water from individual residential car washing, natural riparian habitat or wetland flows, dechlorinated swimming pool discharges, residential street wash water, water from emergency fire-fighting activities, and any other water source not containing pollutants. Such permitted discharges shall be made in accordance with an appropriate plan for reducing pollutants.

What is an illicit discharge and why is it prohibited?

Pursuant to Village Code §166-6 A., no person shall discharge or cause to be discharged into the storm sewer system any materials other than stormwater except as permitted by Village Code §166-6 A.(1).

The environmental hazards associated with illicit discharges and improper disposal of waste.

Illicit discharges into the storm sewer system and improper disposal of waste materials can have a deleterious effect on the natural environment and the waters within the Village. The introduction of pollutants into the environment through stormwater runoff or illegal connections can degrade the environment and adversely impact the health, safety, and general welfare of the citizens of the Village.

Proper handling and disposal practices for common behaviors within the community.

All persons in the Village shall prevent illicit discharges into the storm sewershed. This shall include such items as:

- Using phosphorus-free fertilizer on lawns.
- Dechlorinating and neutralizing pools before lower during end of season maintenance.
- Do not pour waste oils, solvents, or other chemicals into storm drains.
- Use only phosphate-free, biodegradable car wash soap.

How to report illicit discharges they may observe.

Any person observing a suspected illicit discharge should report it to the Village Clerk, refer to Organizational Chart.

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*VI.1.e. Distribution Method of Educational Messages*

Once every five (5) years, the Village must identify and document in this SWMP Plan the methods that are used for the distribution of educational messages, such as printed materials, electronic materials, mass media, workshops or focus groups, displays in public areas, or social media.

By January 2, 2027, following the completion of identifying focus areas, target audiences, and outreach topics, the Village must deliver an educational message to each target audiences for each focus area based on the defined education and outreach topics and document the completion of this requirement in this SWMP Plan. This shall be repeated every five (5) years thereafter.

No later than starting after January 2, 2027, the Village shall provide educational messages with information specific to phosphorus to the target audience in the Lake Meahagh storm sewershed and document the completion of this requirement in this SWMP Plan. This message shall be done twice a year, once between March-August and once September-February.

An inventory of outreach distribution will provided as an Appendix.

***VI.2. MCM 2 – Public Involvement/Participation***

The Village is required to comply with applicable State and local public notice requirements, and to encourage public participation in developing, implementing, and reviewing SWMP. The EPA believes that an active and involved community is crucial to the success of SWMP because it allows for broader public support, shorter implementation schedules due to public and legal challenges, and increased citizen volunteers with a broader base of expertise. It is the goal of the Village that all residences and businesses have an opportunity to better understand and “buy in” to the idea that stormwater is the concern of each and every homeowner and business and that participating in the process of improving stormwater will have a positive impact on the overall quality of life in the Village.

Annually, the Village must provide an opportunity for public involvement and participation in the development and implementation of the SWMP. The Village must document the public involvement and participation opportunities in the SWMP Plan. Common opportunities include: citizen advisory group on stormwater management, public hearings or meetings, citizen volunteers to educate other individuals about the SWMP, coordination with other pre-existing public involvement/participation opportunities, reporting concerns about activities or behaviors observed, and stewardship activities.

Annually, the Village must inform the public of the opportunity for their involvement/participation in the development and implementation of the SWMP and how they can become involved. The Village will distribute this information through such measures as: announcement at Village meetings, public notices, printed materials, electronic materials (e.g., websites, email listservs), displays in public areas (e.g., Village Hall, library, parks), or social media.

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The general public and businesses will be invited to participate in the Village's stormwater management efforts. Ways for the public to participate may include, but will not be limited to:

- Roadside cleanups
- Stream walks
- Ensuring contracted landscapers are utilizing proper methods of lawn fertilization and native plantings
- Seeding or providing ground cover to areas on one's property where erosion may be occurring

Public concerns regarding stormwater management and compliance with permit requirements shall be directed to the Village Clerk, refer to the Organizational Chart.

Annually, the Village must provide an opportunity for the public to review and comment on the publicly available SWMP Plan. The public must have the ability to ask questions and submit comments on the SWMP Plan. The SWMP Plan shall be posted to the Village website and shall presented annually to the Village Board with an opportunity for the public to comment on the document. A record of the annual adoption of the SWMP Plan shall be kept on file with the Village Clerk's office.

The Village shall include a summary of comments received on the SWMP Plan and draft Annual Report in the SWMP Plan. Within thirty (30) days of when public input is received, the MS4 Operator must update the SWMP Plan, where appropriate, based on the public input received.

***VI.3. MCM 3 – Illicit Discharge Detection and Elimination***

The objective of this MCM is to gain a thorough awareness of the Village's systems and to then determine the types and sources of illicit discharges entering the local stormwater system, and establish the legal, technical and education methods to eliminate these discharges. It is the policy of the Village to inspect its stormwater outfalls on an annual basis and where illicit discharges are found, determine their source and take action to terminate said discharge to the stormwater drainage system.

The Village must develop, implement, and enforce a program which systematically detects, tracks down, and eliminates illicit discharges to the MS4. This MCM is designed to manage the MS4 so it is not conveying pollutants associated with flows other than those directly attributable to stormwater runoff.

The public shall report suspected illicit discharges to the Village Clerk, refer to the Organizational Chart.

Within thirty (30) days of an illicit discharge, the Village must document each report of an illicit discharge in the SWMP Plan with the following information: date of the report, location of the illicit discharge, nature of the illicit discharge, follow up actions taken or needed (including response times), and inspection outcomes and any enforcement taken.



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*VI.3.a. Monitoring Locations*

By January 2, 2027, the Village must develop and maintain an inventory of the monitoring locations in the SWMP Plan. Monitoring locations include MS4 Outfalls, Interconnections, and Municipal facility intraconnections. The information required by GP Part VI.C.1.c.i. shall be included in the inventory. The locations shall be prioritized between high priority and low priority monitoring locations. After the initial prioritization, the Village must annually update the monitoring location prioritization in the inventory based on information gathered. A list of prioritized monitoring locations will be provided as an Appendix.

By January 2, 2026, the Village must develop and implement a monitoring locations inspection and sampling program. The monitoring locations inspection and sampling program must be documented in this SWMP Plan. The monitoring locations inspection and sampling procedures shall be per GP Part VI.C.1.e.i. Documentation of all monitoring location inspections, including any sampling results, using the Monitoring Locations Inspection and Sampling Field Sheet (Appendix D of the GP) shall be included in this SWMP Plan. Annually, by April 1, the Village must review and update the monitoring and sampling procedures based on inspection and sampling results and document any changes to procedures in this SWMP Plan.

The training provisions must be implemented for the Village's monitoring locations inspection and sampling procedures. Staff must be trained prior conducting monitoring and sampling. Thereafter, staff shall be retrained every five years or when there are updates to procedures. The names, titles, and contact information for the individuals who have received monitoring and sampling training shall be recorded and update annually.

*VI.3.b. Track Down Program*

By January 2, 2026, the Village must develop and implement an illicit discharge track down program to identify the source of illicit discharges and the responsible party. The illicit discharge track down program must be documented in this SWMP Plan. The track down program shall include the procedures required by GP Part VI.C.2.a. Annually, by April 1, the Village must review and update the track down procedures and document any changes to procedures in this SWMP Plan.

The training provisions must be implemented for the Village's track down procedures. Staff must be trained prior conducting track downs. Thereafter, staff shall be retrained every five years or when there are updates to procedures. The names, titles, and contact information for the individuals who have received track down training shall be recorded and update annually.

*VI.3.c. Elimination Program*

By January 2, 2026, the Village must develop and implement an illicit discharge elimination program. The illicit discharge elimination program must be documented in this SWMP Plan. The elimination program shall include the procedures required by GP Part VI.C.3.a. Annually, by April

**SWMP Plan  
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1, the Village must review and update the elimination program and document any changes to procedures in this SWMP Plan.

The training provisions must be implemented for the Village's elimination procedures. Staff must be trained prior conducting eliminations. Thereafter, staff shall be retrained every five years or when there are updates to procedures. The names, titles, and contact information for the individuals who have received training shall be recorded and update annually.

***VI.4. MCM 4 – Construction Site Stormwater Runoff Control***

It is the policy of the Village to require all construction sites with one acre or more of disturbance to submit a Stormwater Pollution Prevention Plan (SWPPP). The SWPPP shall be prepared in accordance with the New York State Department of Environmental Conservation State Pollution Discharge Elimination System (SPDES) General Permit for Stormwater Discharges from Construction Activity Permit No. GP-0-20-001, NYSDEC Stormwater Management Design Manual (latest edition), and the New York Standards and Specification for Erosion and Sediment Control (latest edition). Reduction of stormwater discharges from construction activity disturbing less than one acre must also be included in the Village's program if that construction activity is part of a larger common plan of development or sale that would disturb one acre or more.

The Village must develop, implement, and enforce a program to ensure construction sites are effectively controlled. This MCM is designed to prevent pollutants from construction related activities, as well as promote the proper planning and installation of post-construction SMPs.

The public shall report complaints related construction stormwater activity to the Village Clerk, refer to Organizational Chart. The Village must document reports of construction site complaints in this SWMP Plan with the following information: date of the report, location of the construction site, nature of complaint, follow up actions taken or needed, and inspection outcomes and any enforcement taken.

***VI.4.a. Construction Oversight Program***

By January 2, 2025, the Village must develop and implement a construction oversight program. The construction oversight program must be documented in this SWMP Plan specifying the information required by GP Part IV.D.3.a. Annually, by April 1, the Village must review and update the construction oversight program and document any changes to procedures in this SWMP Plan.

The training provisions must be implemented for the Village's construction oversight procedures. Staff must be trained prior conducting construction oversight. Thereafter, staff shall be retrained every five years or when there are updates to procedures. The names, titles, and contact information for the individuals who have received training shall be recorded and update annually. Those involved in the construction activity itself (e.g., contractor, subcontractor, qualified inspector) are required to have received four hours of NYSDEC endorsed training in proper erosion and sediment control principles from a NYSDEC endorsed entity.

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*VI.4.b. Construction Site Inventory*

An inventory of all applicable construction sites is provided in Appendix E. By January 2, 2025 all sites shall be prioritized as high or low pursuant to GP Part VI.D.5.a. Annually, after the initial prioritization, the Village must update the construction site prioritization in the inventory based on information gathered as part of the construction oversight program.

*VI.4.c. SWPPP Review*

The Village must ensure individuals, responsible for reviewing SWPPPs for acceptance, receive four hours of NYSDEC endorsed training in proper erosion and sediment control principles from a NYSDEC endorsed entity. This training must be completed every three (3) years. Individuals who meet the definition of a qualified professional (e.g. Professional Engineer) or qualified inspector are exempt from this requirement. The names, titles, and contact information for the individuals who have received training shall be recorded and update annually.

Reviewed and accepted SWPPPs shall be added to the Construction Site Inventory.

*VI.4.d. Pre-Construction Meeting*

Prior to commencement of construction activities, the Village must ensure a pre-construction meeting is conducted. The owner/operator, the Village representative, the trained contractors responsible for implementing the SWPPP, and the qualified inspector (if required) must attend the pre-construction meeting in order to: confirm coverage, verify trained contractors, and review construction oversight.

The date of the pre-construction meeting shall be included in the Construction Site Inventory.

*VI.4.e. Construction Site Inspections and Close-Out*

The Village must ensure individuals responsible for construction site inspections have received the requisite training. The names, titles, and contact information for the individuals who have received training shall be recorded and update annually.

The Village shall annually inspect all sites with construction activity identified in the Construction Site Inventory during active construction after the pre-construction meeting or sooner if deficiencies are noted that require attention.

No later than starting after January 2, 2027, high priority construction sites located in the Lake Meahagh storm sewershed must be inspected during active construction after the pre-construction meeting. If the Village is completing the inspection, the construction site must be inspected every ninety (90) days. If the construction site's qualified inspector submits weekly inspection reports to the Village, the Village must inspect the construction site once every six (6) months or sooner if any deficiencies are noted that require attention. The Village must document the construction site inspections in this SWMP Plan.

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When a project is ready to close-out, the Village must ensure a final construction site inspection is conducted and documented. Any deficiencies shall be corrected by the appropriate party to the satisfaction of the Village prior to signing the Notice of Termination. Closed-out sites shall be documented in the Construction Site Inventory.

Document all inspections using the Construction Site Inspection Report Form (GP Appendix D) or an equivalent form. The Village must include the completed Construction Site Inspection Reports in this SWMP Plan.

***VI.5. MCM 5 – Post-Construction Stormwater Management***

It is the policy of the Village to ensure that all post-construction stormwater management practices (SMP) are properly operated and maintained in accordance with the requirements of the applicable SPDES General Permits.

The Village must develop, implement, and enforce a program to ensure proper operation and maintenance of post-construction SMPs for new or redeveloped sites. This MCM is designed to promote the long-term performance of post-construction SMPs in removing pollutants from stormwater runoff.

Sites with required post-construction SMPs shall be included as part of the Construction Site Inventory.

***VI.5.a. Post-Construction SMP Inspection & Maintenance Program***

By January 2, 2025, the Village must develop and implement a post-construction SMP inspection and maintenance program. The postconstruction SMP inspection and maintenance program must be documented in this SWMP Plan specifying the information required by GP Part VI.E.4.a. Annually, by April 1, the Village must review and update the post-construction SMP inspection program and document any changes to procedures in this SWMP Plan.

Post-construction SMP inspections shall use the Post-Construction SMP Inspection Checklist or an equivalent form. All completed inspections shall be documented in this SWMP Plan.

The Village shall ensure individuals responsible for post-construction SMP inspections have received the requisite training. The names, titles, and contact information for the individuals who have received training shall be recorded and update annually.

***VI.6. MCM 6 – Pollution Prevention and Good Housekeeping***

This MCM requires the Village to examine and subsequently alter their own actions to help ensure a reduction in the amount and type of pollution that collects on streets, parking lots, open spaces, and storage and vehicle maintenance areas, and that results from actions such as environmentally

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damaging land development and flood management practices or poor maintenance of storm sewer systems.

The Village must develop and implement a pollution prevention and good housekeeping program for municipal facilities and municipal operations to minimize pollutant discharges. This MCM is designed to ensure the Village's own activities do not contribute pollutants to surface waters of the State.

*VI.6.a. Best Management Practices*

By January 2, 2027, the Village must incorporate best management practices (BMPs) into the municipal facility program and municipal operations program to minimize the discharge of pollutants associated with municipal facilities and municipal operations, respectively. The BMPs to be considered are as follows and must be documented in this SWMP Plan: Minimize Exposure; Follow a Preventive Maintenance Program; Spill Prevention and Response Procedures; Erosion and Sediment Controls; Manage Vegetated Areas and Open Space on Municipal Property; Salt Storage Piles or Pile Containing Salt; Waste, Garbage, and Floatable Debris; and Alternative Implementation Options.

For high priority Village facilities must maintain the No Exposure Certification and document them in this SWMP Plan. The No Exposure Certification ceases to apply when activities or materials become exposed.

*VI.6.b. Municipal Facility Program*

By January 2, 2027, the Village must develop and implement a municipal facility program. The municipal facility program must be documented in this SWMP Plan specifying the information required by GP VI.F.2.a.i. Annually, by April 1, the Village must review and update the municipal facility program and document any changes to procedures in this SWMP Plan.

The Village shall ensure individuals responsible for municipal facility procedures have received the requisite training. The names, titles, and contact information for the individuals who have received training shall be recorded and update annually.

*VI.6.c. Municipal Facility Inventory and Prioritization*

By January 2, 2026, the Village must develop and maintain an inventory of all municipal facilities in this SWMP Plan with the information required by GP Part VI.F.b.i. Annually, the Village must update the inventory if new municipal facilities are added.

By January 2, 2027, the Village must prioritize all known municipal facilities as High Priority and Low Priority per GP Part VI.F.2.c.i. Annually, after the initial prioritization, the Village must update and document the municipal facility prioritization in the inventory based on information gathered as part of the municipal facility program, including cases where a No Exposure Certification ceases to apply.

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By January 2, 2029, the Village must develop and implement a municipal facility specific SWPPP for each High Priority municipal facility and retain a copy of the specific SWPPP on site of the facility. It shall include the information required by GP Part VI.F.2.d.i.

Once every five years following the most recent assessment, the Village must complete and document a comprehensive site assessment for each High Priority and Low Priority municipal facility as identified in the Municipal Facility Inventory using the Municipal Facility Assessment Form (GP Appendix D) or an equivalent form.

*VI.6.d. Municipal Operations & Maintenance*

Municipal operations are: street and bridge maintenance; winter road maintenance; MS4 maintenance; open space maintenance; solid waste management; new construction and land disturbances; right-of-way maintenance; marine operations; or hydrologic habitat modification.

By January 2, 2027, the Village must develop and implement a municipal operations program. The municipal operations program must be documented in this SWMP Plan specifying the information required by GP Part VI.F.3.a.i. Annually, by April 1, the Village must review and update the municipal operations program and document any changes to procedures in this SWMP Plan.

The Village shall ensure individuals responsible for municipal operations procedures have received the requisite training. The names, titles, and contact information for the individuals who have received training shall be recorded and update annually.

The municipal operations program shall include: catch basin inspection and maintenance; and roads, bridges, parking lots, & right of way maintenance.

The Village's procedures for sweeping and/or cleaning municipal streets, bridges, parking lots, and right of ways owned/operated by the Village include:

- All Village roads, bridges, parking lots, and right of ways must be swept and/or cleaned once every five (5) years in the spring (following winter activities such as sanding). This requirement is not applicable to uncurbed roads with no catch basins.
- Annually, from April 1 through October 31, roads in business and commercial areas must be swept. This requirement is not applicable to uncurbed roads with no catch basins.
- Annually, between April 1 and October 31, all local roads within the Lake Meahagh storm sewershed shall be swept. Uncurbed local roads with no catch basins are exempt. A record of street sweeping shall be kept in this SWMP Plan.

Within six months of MS4 outfall inspection, the Village must initiate actions to repair all outfall protection and/or bank stability problems identified during the inspection. Repairs must be completed in accordance with the latest edition of the NYS Standards and Specifications for Erosion and Sediment Control and document completion of this requirement in this SWMP Plan.

**Part VII. Minimum Control Measures (MCMs) for Traditional Non-Land Use Control & Non-Traditional MS4 Operators**

As the Village is neither a Traditional Non-Land Use Control Operator nor a Non-Traditional MS4 Operators, all requirements of GP Part VII. are not applicable.

**Part VIII. Enhanced Requirements for Impaired Waters**

***VIII.1. Pollutant Specific BMPs for Phosphorus***

A portion of the Village’s storm sewershed discharges into an impaired water – Lake Meahagh. In Lake Meahagh (WI/PWL No. 1301-0053), phosphorus is the pollutant of concern.

***VIII.1.a Public Education & Outreach***

Refer to Section VI.1. “MCM 1 – Public Education and Outreach Program” of this SWMP Plan.

***VIII.1.b. Pollution Prevention and Good Housekeeping***

Refer to Section VI.6. “MCM 6 – *Pollution Prevention and Good Housekeeping*” of this SWMP Plan.

***VIII.2. Pollutant Specific BMPs for Silt/Sediment***

As the Village has no silt/sediment impaired waters, all requirements of GP Part VIII.B. are not applicable

***VIII.3. Pollutant Specific BMPs for Pathogens***

As the Village has no pathogen impaired waters, all requirements of GP Part VIII.C. are not applicable

***VIII.4. Pollutant Specific BMPs for Nitrogen***

As the Village has no nitrogen impaired waters, all requirements of GP Part VIII.D. are not applicable

***VIII.5. Pollutant Specific BMPs for Floatables***

As the Village has no floatable impaired waters, all requirements of GP Part VIII.E. are not applicable

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**Part IX. Watershed Improvement Strategy Requirements for TMDL Implementation**

As no part of the Village is within a NYSDEC TMDL watershed, all requirements of GP Part IX. are not applicable.

P:\Village of Buchanan\Stormwater\SWMP Plan\VOB SWMP Plan 2024-07.docx



## **Appendix A**

# MS4 Notice of Intent

version 1.0

(Submission #: HQ1-44J3-882VR, version 1)

## Details

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**Submitted** 2/16/2024 (0 days ago) by Mary Head

**Alternate Identifier** NYR20A342

**Submission ID** HQ1-44J3-882VR

**Status** Submitted

## Form Input

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### MS4 Operator Information

**Is this NOI for an MS4 Operator continuing coverage?**

Yes

**Permit ID #:**

NYR20A342

**MS4 Operator Type**

Traditional land use control

#### **Traditional Land Use Control**

Traditional land use control MS4 Operator requirements are found in Part VI of the MS4 General Permit.

**Municipality Name or Legal Entity Name**

Village of Buchanan

**Legal Municipal/Entity Mailing address**

236 Tate Avenue

Buchanan, NY 10511

Westchester

## Ranking Official

Official Title	First and Last Name	Phone	Email
Other: Village Administrator	Marcus Serrano	914-737-1033	mserrano@villageofbuchanan.com

## NOI Preparer

NOI Preparer Title	First and Last Name	Phone	Email
Municipal Engineer	George Pommer, P.E.	845-279-2220	gpommer@hahn-eng.com

## NAICS Codes

Federal, State or Local Government - 924110  
Military Bases - 928110  
Highway, road or other thoroughfare system - 237310  
Large Hospitals - 622110  
Public Colleges and Universities - 611310  
Correctional Institutions - 922140  
[NAICS Code Lookup](#)

## NAICS Code

924110

## Is the MS4 Operator working with other MS4 Operators to implement the Stormwater Management Program?

No

## Does the MS4 Operator have any facilities that need to obtain MSGP coverage under MSGP permit?

No

## MS4 Location Information

### MS4 Facility Name

Village of Buchanan

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On the map below, place the pin at the center of the MS4 Operator. This can be either the geographic center or the population center.

### Central point of the MS4 Operator

41.2620383,-73.93819429999999

## Waterbody Information (1 of 2)

If the MS4 Operator discharges to multiple waterbodies, all waterbodies must be listed. Use the 'Duplicate Waterbody Information' or 'Add New Waterbody Information' buttons to add as many waterbodies as necessary.

To find the names of waterbodies, including any impaired waterbodies, use the DEC's Stormwater Interactive Map. Under the Permit Related Layers check the box for the Impaired Waterbodies for MS4GP and the box for Waterbody Inventory/Priority Waterbodies List.

[Stormwater Interactive Map](#)

**Waterbody name and segment receiving MS4 Operator discharges**

Lake Meahagh - 1301-0053

**Is this waterbody segment listed in Appendix C (List of Impaired Waters) of the MS4 General Permit?**

Yes

An MS4 discharging to a waterbody listed in Appendix C must meet the requirements of Part VIII. for the pollutant(s) of concern listed in Appendix C.

**For which pollutant(s) of concern is the waterbody impaired?**

Phosphorus

**Is this waterbody segment listed in Table 3 (Approved TMDL Watersheds with MS4 Contribution) of the MS4 General Permit?**

No

**Waterbody Information (2 of 2)**

If the MS4 Operator discharges to multiple waterbodies, all waterbodies must be listed. Use the 'Duplicate Waterbody Information' or 'Add New Waterbody Information' buttons to add as many waterbodies as necessary.

To find the names of waterbodies, including any impaired waterbodies, use the DEC's Stormwater Interactive Map. Under the Permit Related Layers check the box for the Impaired Waterbodies for MS4GP and the box for Waterbody Inventory/Priority Waterbodies List.

[Stormwater Interactive Map](#)

**Waterbody name and segment receiving MS4 Operator discharges**

Minor Tribs to East of Hudson - 1301-0133

**Is this waterbody segment listed in Appendix C (List of Impaired Waters) of the MS4 General Permit?**

No

Is this waterbody segment listed in Table 3 (Approved TMDL Watersheds with MS4 Contribution) of the MS4 General Permit?

No

## CERTIFICATION

The MS4 Operator has read and understands the SPDES MS4 General Permit, GP-0-24-001, as it pertains to permit requirements as well as the timeframes for compliance set forth in the permit.

Yes

I am the ranking elected official or Principal Executive Officer for the MS4 Operator and will be signing the form electronically.

No

Attach completed certification form.

[ms4eNOIcertification - Village of Buchanan-signed.pdf - 02/16/2024 12:16 PM](#)

**Comment**

NONE PROVIDED

## Attachments

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Date	Attachment Name	Context	User
2/16/2024 12:16 PM	ms4eNOIcertification - Village of Buchanan-signed.pdf	Attachment	Mary Head

## Status History

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	User	Processing Status
2/2/2024 2:24:07 PM	Mary Head	Draft
2/16/2024 12:17:22 PM	Mary Head	Submitting
2/16/2024 12:17:31 PM	Mary Head	Submitted

## Processing Steps

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Step Name	Assigned To/Completed By	Date Completed
Form Submitted	Mary Head	2/16/2024 12:17:31 PM

**NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION**

**Division of Water**

625 Broadway, Albany, New York 12233-3500  
P: (518) 402-8233 | F: (518) 402-9029  
www.dec.ny.gov

**MS4 Operator Certification Form for eReports**

**SPDES General Permit for  
Stormwater Discharges From  
Municipal Separate Storm Sewer Systems (GP-0-24-001)**

**Instructions**

Please review Part X.J. of GP-0-24-001 before signing this form. A signature by an unauthorized person will delay permit coverage.

This form must be signed by one of the following:

1. For a corporation: by a responsible corporate officer
2. For a partnership: by a general partner
3. For a sole proprietorship: by the proprietor
4. For a municipality, state, federal or other public agency: by a principal executive officer or ranking elected official

**MS4 Operator Name:** \_\_\_\_\_

**eReport Submission Number:** \_\_\_\_\_

**MS4 Operator Certification**

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 violations.

Name (please print or type)	Village Administrator Title	Organization
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Signature	Date
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# NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Water, Bureau of Water Permits  
625 Broadway, Albany, New York 12233-3505  
P: (518) 402-8111 | F: (518) 402-9029  
www.dec.ny.gov

3/1/2024

## Re: Acknowledgement of Notice of Intent for Coverage under SPDES General Permit for Municipal Separate Storm Sewer Systems (GP-0-24-001)

Dear Village of Buchanan,

This is to acknowledge that the New York State Department of Environmental Conservation (DEC) received a complete electronic Notice of Intent (eNOI) for the MS4 Operator:

Village of Buchanan

Pursuant to 6 NYCRR 750-1.21(d) and Part II of the SPDES MS4 GP, GP-0-24-001, Village of Buchanan is authorized to discharge stormwater under the terms and conditions of the SPDES MS4 GP, GP-0-24-001, starting on the effective date of **01/03/2024**. Village of Buchanan must comply with all requirements contained in the MS4 GP, GP-0-24-001.

The following SPDES ID No. should be included in all correspondences with the DEC:

SPDES ID No:                    NYR20A342

Should you have any questions regarding any aspect of the requirements in the MS4 GP, GP-0-24-001, please contact [MS4GP@dec.ny.gov](mailto:MS4GP@dec.ny.gov) or (518) 402-8111.

Sincerely,



Meredith Streeter, P.E.  
Chief, Central Section  
Bureau of Water Permit

## **Appendix B**



**VILLAGE OF BUCHANAN  
STORMWATER MANAGEMENT PROGRAM  
ORGANIZATIONAL CHART & CONTACT INFORMATION  
July 1, 2024**

**NOTE: All Public Inquiries, Comments & Complaints Shall Be Sent to the Village Clerk**

**Administrator's Office**  
Contact: Cynthia Kempster, Village Clerk  
(914) 737-1033  
[ckempster@villageofbuchanan.com](mailto:ckempster@villageofbuchanan.com)  
Responsibilities:

- All Public Inquiries, Comments, & Complaints
- Public Information Outreach
- Public Participation & Involvement

**Village Consulting Engineer**  
Contact: George E. Pommer, P.E.  
(845) 279-2220  
[gpommer@hahn-eng.com](mailto:gpommer@hahn-eng.com)  
Responsibilities:

- Stormwater Program Coordinator
- SWMP Plan
- Annual Outfall Inspection
- Annual MS4 Report
- Staff Training
- SWPPP Review
- High Priority Construction Site Inspection

**Highway Department**  
Contact: Scott Horton  
(914) 737-6858  
[highway@villageofbuchanan.com](mailto:highway@villageofbuchanan.com)  
Responsibilities:

- Illicit Discharge Detection & Elimination
- Pollution Prevention & Good Housekeeping
- Catch Basin Maintenance
- Street Sweeping

**Building Department**  
Contact: Brian Cook  
(914) 293-8395  
[bcook@villageofbuchanan.com](mailto:bcook@villageofbuchanan.com)  
Responsibilities:

- Construction Site Stormwater Runoff Control
- Post-Construction SMP Review
- Code Enforcement

## **Appendix C**

### MS4 Annual Report Cover Page MCC form for period ending March 9, 2023

**This cover page must be completed by the report preparer.  
Joint reports require only one cover page.**

SPDES ID  
NYR20A342

**Choose one:**

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

Fill in SPDES ID in upper right hand corner.

Name of MS4

V i l l a g e o f B u c h a n a n

**OR**

- This report is being submitted on behalf of a Single Entity**

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

Name of Single Entity

**OR**

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

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

Name of Coalition

SPDES ID NYR20A	SPDES ID NYR20A	SPDES ID NYR20A
SPDES ID NYR20A	SPDES ID NYR20A	SPDES ID NYR20A
SPDES ID NYR20A	SPDES ID NYR20A	SPDES ID NYR20A
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SPDES ID NYR20A	SPDES ID NYR20A	SPDES ID NYR20A
SPDES ID NYR20A	SPDES ID NYR20A	SPDES ID NYR20A

### MS4 Annual Report Cover Page

MCC form for period ending March 9,

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

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

MCC form for period ending March 9, 2023

Name of MS4 Village of Buchanan

SPDES ID

NYR20A342

**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: G e o r g e MI: Last Name: P o m m e r

Title: V . P . H a h n E n g i n e e r i n g , P . C .

Address: 1 6 8 9 R o u t e 2 2

City: B r e w s t e r State: N Y Zip: 1 0 5 0 9 -

eMail: g p o m m e r @ h a h n - e n g . c o m

Phone: ( 8 4 5 ) 2 7 9 - 2 2 2 0 County: P u t n a m

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

MCC form for period ending March 9, 2023

Name of MS4 Village of Buchanan

SPDES ID

N Y R 2 0 A 3 4 2

**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).

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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: T h e r e s a      MI:      Last Name: K n i c k e r b o c k e r

Title: M a y o r

Address: 2 3 6 T a t e A v e n u e

City: B u c h a n a n      State: N Y      Zip: 1 0 5 1 1 - 1 2 1 2

eMail: t h e r e s a k @ v i l l a g e o f b u c h a n a n . c o m

Phone: ( 9 1 4 ) 7 3 7 - 1 0 3 3      County: W e s t c h e s t e r

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

MCC form for period ending March 9, 2023

Name of MS4

SPDES ID

N Y R 2 0 A 3 4 2

**Section 2 - Contact Information**

Important Instructions - Please Read

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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)
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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,

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)?

MM1

MM2

MM3

MM4

MM5

MM6

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, 2023

Name of MS4 Village of Buchanan

SPDES ID

NYR20A342

**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 VIJ.

First Name MI Last Name  
M a r c u s S e r r a n o

Title (Clearly print title of individual signing report)  
V i l l a g e A d m i n i s t r a t o r

Signature  
*Marcus Serrano*

Date  
04 / 20 / 2023

Send completed form and any attachments to the DEC Central Office at:

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



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition: Village of Buchanan

SPDES ID: NYR20A342

**Minimum Control Measure 1. Public Education and Outreach**

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

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

How many MS4s contributed to this report?

**1. Targeted Public Education and Outreach Best Management Practices**

Check all topics that were included in Education and Outreach during this reporting period:

- |  |   |
|--|---|
| <input checked="" type="radio"/> Construction Sites                                  | <input checked="" type="radio"/> Pesticide and Fertilizer Application |
| <input checked="" type="radio"/> General Stormwater Management Information           | <input checked="" type="radio"/> Pet Waste Management                 |
| <input type="radio"/> Household Hazardous Waste Disposal                             | <input checked="" type="radio"/> Recycling                            |
| <input type="radio"/> Illicit Discharge Detection and Elimination                    | <input type="radio"/> Riparian Corridor Protection/Restoration        |
| <input type="radio"/> Infrastructure Maintenance                                     | <input type="radio"/> Trash Management                                |
| <input type="radio"/> Smart Growth   | <input checked="" type="radio"/> Vehicle Washing                      |
| <input type="radio"/> Storm Drain Marking  | <input checked="" type="radio"/> Water Conservation                   |
| <input type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development | <input type="radio"/> Wetland Protection                              |
| <input type="radio"/> Other:   | <input type="radio"/> None  |

Other

**2. Specific audiences targeted during this reporting period:**

- |   |   |
|---|---|
| <input checked="" type="radio"/> Public Employees | <input checked="" type="radio"/> Contractors    |
| <input checked="" type="radio"/> Residential      | <input checked="" type="radio"/> Developers     |
| <input checked="" type="radio"/> Businesses       | <input checked="" type="radio"/> General Public |
| <input type="radio"/> Restaurants                 | <input type="radio"/> Industries                |
| <input type="radio"/> Other:                      | <input type="radio"/> Agricultural              |

Other

### 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 

Village of Buchanan
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SPDES ID

N	Y	R	2	0	A	3	4	2
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### 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

<input type="radio"/> Construction Site Operators Trained	# Trained	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
<input type="radio"/> Direct Mailings	# Mailings	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
<input type="radio"/> Kiosks or Other Displays	# Locations	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
<input type="radio"/> List-Serves	# In List	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
<input type="radio"/> Mailing List	# In List	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
<input type="radio"/> Newspaper Ads or Articles	# Days Run	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
<input type="radio"/> Public Events/Presentations	# Attendees	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
<input type="radio"/> School Program	# Attendees	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
<input type="radio"/> TV Spot/Program	# Days Run	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
<input checked="" type="radio"/> Printed Materials:	Total # Distributed	<table border="1"><tr><td> </td><td> </td><td>2</td><td>5</td></tr></table>			2	5
		2	5			

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

L	i	b	r	a	r	y				

**Other:**

V	i	l	l	a	g	e		H	a	l	l		P	o	s	t	i	n	g
---	---	---	---	---	---	---	--	---	---	---	---	--	---	---	---	---	---	---	---

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

URL

w	w	w	.	v	i	l	l	a	g	e	o	f	b	u	c	h	a	n	a	n	.	c	o	m

URL


### MS4 Annual Report Form

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

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

Name of MS4/Coalition: 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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### 3. Web Page cont.: Provide specific web addresses - not home page.

URL 


URL 


URL 


URL 


URL 


URL 


URL 


### MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.

Information is located on the website, Village Hall and Public Library.

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

##### C. How many times was this observation measured or evaluated 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 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 to make information available to the public.

### MS4 Annual Report Form

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

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

Name of MS4/Coalition: Village of Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

### Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?

**1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:**

<input checked="" type="radio"/> Cleanup Events		# Events	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value="1"/>
<input type="radio"/> Comments on SWMP Received		# Comments	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Community Hotlines	Phone #	( 9   1   4 )	7   3   7 - 1   0   3   3
Phone #	( 0     )	0	-
Phone #	( 0     )	0	-
Phone #	( 0     )	0	-
Phone #	( 0     )	0	-
Phone #	( 0     )	0	-
<input type="radio"/> Community Meetings		# Attendees	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Plantings		Sq. Ft.	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Storm Drain Markings		# Drains	<input type="text" value=""/> <input type="text" value="3"/> <input type="text" value="2"/> <input type="text" value="5"/>
<input type="radio"/> Stakeholder Meetings		# Attendees	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Volunteer Monitoring		# Events	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Other: N o n e			

**2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?**  Yes  No

<input type="radio"/> List-Serve		# In List	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Newspaper Advertising		# Days Run	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> TV/Radio Notices		# Days Run	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Other: M o n t h l y N e w s l e t t e r			
<input type="radio"/> Web Page URL: Enter URL(s) on the following two pages.			



### MS4 Annual Report Form

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

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

Name of MS4/Coalition

**SPDES ID**  

N	Y	R	2	0	A	3	4	2
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**2. URL(s) con't.:**

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

URL  

g	p	o	m	m	e	r	@	h	a	h	n	-	e	n	g	.	c	o	m

URL  


URL  


URL  


URL  


URL  


URL  


**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Village of Buchanan
---------------------

SPDES ID  

N	Y	R	2	0	A	3	4	2
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**2. URL(s) con't.:**

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

URL


URL


URL


URL


URL


URL


URL




### MS4 Annual Report Form

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

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

Name of MS4/Coalition:

Village of Buchanan

SPDES ID

NYR20A342

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.

05 / 31 / 2023

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

365

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?

04 / 25 / 2023

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, 2023

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

Name of MS4/Coalition

SPDES ID

**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.**

Information is located on the website, Village Hall and Public Library.

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

None

**C. How many times was this observation measured or evaluated 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 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 to make information available to the public.  
 An annual Day Event which includes stormwater pamphlets handouts.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Buchanan

SPDES ID

NYR20A342

**Minimum Control Measure 3. Illicit Discharge Detection and Elimination**

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

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

How many MS4s contributed to this report? [ ][ ]

1. Enter the number and approx. percent of outfalls mapped: [ ][ ] 32# [ ] 100%

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? [ ] 29

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

- Auto Recyclers
- Building Maintenance
- Churches
- Commercial Carwashes
- Commercial Laundry/Dry Cleaners
- Construction Vehicle Washouts
- Cross-Connections
- Distribution Centers
- Food Processing Facilities
- Garbage Truck Washouts
- Hospitals
- Improper RV Waste Disposal
- Industrial Process Water
- Other:
- Landscaping (Irrigation)
- Marinas
- Metal Plateing Operations
- Outdoor Fluid Storage
- Parking Lot Maintenance
- Printing
- Residential Carwashing
- Restaurants
- Schools and Universities
- Septic Maintenance
- Swimming Pools
- Vehicle Fueling
- Vehicle Maint./Repair Shops
- None

Sewersheds:

### MS4 Annual Report Form

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

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

Name of MS4/Coalition Village of Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:  None

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

0

5. How many illicit discharges have been confirmed during this reporting period?

0

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

0

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No  
If No, approximately what percent was completed in this reporting period?

100%

8. Is the above information available in GIS?  Yes  No  
Is this information available on the web?  Yes  No  
If Yes, provide URL(s):

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

URL

http://www.villageofbuchanan.com

URL

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition Village of Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**8. URL(s) con't.:**

Please provide specific address of page where map(s) can be accessed - not home page

URL  
[Grid for URL entry]

URL  
[Grid for URL entry]

URL  
[Grid for URL entry]

URL  
[Grid for URL entry]

URL  
[Grid for URL entry]

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  NT

11. What percent of staff in relevant positions and departments has received IDDE training? 100%



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

SPDES ID

**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.**

New facilities will have oil/water separator where possible discharges may occur.  
Scheduled cleanings of catch basins and parking lots are performed.

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

Planning, building and engineering department monitor for compliance.

**C. How many times was this observation measured or evaluated 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 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 monitoring for compliance.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition: Village of Buchanan

SPDES ID

N Y R 2 0 A 3 4 2

**Minimum Control Measures 4 and 5.**  
**Construction Site and Post-Construction Control**

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

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

How many MS4s contributed to this report?

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

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

09/2004  03/2006  NT

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

**3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**    0

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

If Yes, how many public comments were received during this reporting period?    0

**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

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

- |  |   |                               |                               |                               |                                |                                    |
|--|---|-------------------------------|-------------------------------|-------------------------------|--------------------------------|------------------------------------|
| <input type="radio"/> Notices of Violation             | # | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value="0"/> | <input type="radio"/> No Authority |
| <input type="radio"/> Stop Work Orders                 | # | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value="0"/> | <input type="radio"/> No Authority |
| <input type="radio"/> Criminal Actions                 | # | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value="0"/> | <input type="radio"/> No Authority |
| <input type="radio"/> Termination of Contracts         | # | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value="0"/> | <input type="radio"/> No Authority |
| <input type="radio"/> Administrative Fines             | # | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value="0"/> | <input type="radio"/> No Authority |
| <input type="radio"/> Civil Penalties                  | # | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value="0"/> | <input type="radio"/> No Authority |
| <input type="radio"/> Administrative Orders            | # | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value="0"/> | <input type="radio"/> No Authority |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value="0"/> |                                    |
| <input type="radio"/> Other                            | # | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value=""/> | <input type="text" value="0"/> | <input type="radio"/> No Authority |

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition: Village of Buchanan

SPDES ID: NYR20A342

**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

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

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

How many MS4s contributed to this report? [ ][ ]

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? [ ][ ] 0

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? [ ][ ] 0

3. What percent of active construction sites were inspected during this reporting period?  NT 100%

4. What percent of active construction sites were inspected more than once?  NT 100%

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

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

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

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

### MS4 Annual Report Form

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

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

Name of MS4/Coalition: Village of Buchanan

SPDES ID

NYR20A342

**6. con't.:**

Submit additional pages as needed.

**MS4/Coalition Office**

Department

Building Department

Address

236 Tate Avenue

City

Buchanan NY

Zip

10511-1212

Phone

(000) 000-0000

**Library**

Address

City

Zip

0000-0000

Phone

(000) 000-0000

**Other**

Address

1689 Route 22

City

Brewster NY

Zip

10509-

Phone

(000) 000-0000

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

URL

Grid for entering Web Page URL(s)

URL

Grid for entering Web Page URL(s)

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Village of Buchanan
---------------------

SPDES ID

N	Y	R	2	0	A	3	4	2
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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.**

Monitor sites under construction during reporting period.

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

Reports indicate corrective measures to be implemented.

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

			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).**

Continue to monitor sites during construction.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition: Village of Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**Minimum Control Measure 5. Post-Construction Stormwater Management**

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

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

How many MS4s contributed to this report?

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

	# Inventoried	# Inspections	# Times Maintained
<input checked="" type="radio"/> Alternative Practices	<input type="text"/> 1	<input type="text"/>	<input type="text"/>
<input type="radio"/> Filter Systems	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input checked="" type="radio"/> Infiltration Basins	<input type="text"/> 2	<input type="text"/>	<input type="text"/>
<input type="radio"/> Open Channels	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Ponds	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Wetlands	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Other	<input type="text"/>	<input type="text"/>	<input type="text"/>

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?  Yes  No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes  Municipal Comprehensive Plans
- Overlay Districts  Open Space Preservation Program
- Zoning  Local Law or Ordinance
- None  Land Use Regulation/Zoning
- Watershed Plans  Other Comprehensive Plan

Other:

Planning Board Review

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition:

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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? 

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

 %



### MS4 Annual Report Form

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

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

Name of MS4/Coalition: Village of Buchanan

SPDES ID: NYR20A342

#### 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.

None.

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

None.

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

0

(ex.: samples/participants/events)

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

Yes  No

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

Yes  No

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

None.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition:

SPDES ID

**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?

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

SPDES ID

**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres
- Streets Swept (Number of miles X Number of times swept) # Miles
- Catch Basins Inspected and Cleaned Where Necessary #
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #
- Phosphorus Applied In Chemical Fertilizer # Lbs.
- Nitrogen Applied In Chemical Fertilizer # Lbs.
- Pesticide/Herbicide Applied # Acres
- (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

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

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

/  /

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

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

%

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Village of Buchanan
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SPDES ID

N	Y	R	2	0	A	3	4	2
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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 (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.**

Highway Department and Building Department personnel are trained in identifying and reporting stormwater issues to the Village Engineer.

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

Parking areas and roads are swept as needed.

Sediment collected from catch basins and street sweeping is used in leaf composting facility.

**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 SWMP?**

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).**

Buchanan is less than 2 square miles in area with a well developed drainage system. Most issues are from the natural degradation of streams causing sediment, winter sanding and illicit discharges. Water bodies are monitored daily and the recent issues are from Hurricane Irene.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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 Buchana

SPDES ID

N Y R 2 0 A 3 4 2

### 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	1,2,7a-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. 1 0 %

Estimate what percentage was mapped in this reporting period.   0 %

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition: Village of Buchanan

SPDES ID: NYR20A342

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?   0 %

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?   0

7c. What percent of the projects included in 7b have been completed in this reporting period?   0 %

7d. What percent of projects planned in previous years have been completed?   0 %   
  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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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 Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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

**MS4 Annual Report Cover Page**

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

**This cover page must be completed by the report preparer.  
Joint reports require only one cover page.**

SPDES ID

N Y R 2 0 A 3 4 2

**Choose one:**

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

Fill in SPDES ID in upper right hand corner.

Name of MS4

V i l l a g e o f B u c h a n a n

**OR**

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

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

Name of Single Entity

**OR**

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

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

Name of Coalition

SPDES ID

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**MS4 Annual Report Cover Page**

**MCC form for period ending March 9, 2022**

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	2	2
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Name of MS4 Village of Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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 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:


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

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

Name of MS4

SPDES ID

N Y R 2 0 A 3 4 2

**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, 2 0 2 2

Name of MS4 Village of Buchanan

SPDES ID

N Y R 2 0 A 3 4 2

### 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 M a r c u s MI Last Name S e r r a n o

Title V i l l a g e A d m i n i s t r a t o r

Address 2 3 6 T a t e A v e n u e

City B u c h a n a n State N Y Zip 1 0 5 1 1 - 1 2 1 2

eMail m s e r r a n o @ v i l l a g e o f b u c h a n a n . c o m

Phone ( 9 1 4 ) 7 3 7 - 1 0 3 3 County W e s t c h e s t e r

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

MCC form for period ending March 9, 

2	0	2	2
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Name of MS4 

V	i	l	l	a	g	e	o	f	B	u	c	h	a	n	a	n
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SPDES ID  

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**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 

G	e	o	r	g	e
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 MI 

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 Last Name 

P	o	m	m	e	r
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Title 

V	.	P	.		H	a	h	n		E	n	g	i	n	e	e	r	i	n	g	,		P	.	C	.
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Address 

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City 

B	r	e	w	s	t	e	r
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 State 

N	Y
---	---

 Zip 

1	0	5	0	9	-		
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eMail 

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Phone 

(	8	4	5	)		2	7	9	-	2	2	2	0
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 County 

P	u	t	n	a	m
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**MS4 Municipal Compliance Certification (MCC) Form**

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

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)?

- MM1
- MM2
- MM3
- MM4
- MM5
- MM6

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, 2022

Name of MS4: Village of Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**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 VIJ.

First Name: M a r c u s      MI:      Last Name: S e r r a n o

Title (Clearly print title of individual signing report):  
V i l l a g e      A d m i n i s t r a t o r

Signature: 

Date: 0 4 / 2 1 / 2 0 2 2

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	2	2
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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

SPDES ID  

N	Y	R	2	0	A	3	4	2
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### Water Quality Trends

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? 

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**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.**

Yes    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






### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2022

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

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	3	4	2
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### 3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

<input type="radio"/> Construction Site Operators Trained	# Trained	<input style="width: 100%;" type="text" value=""/>
<input type="radio"/> Direct Mailings	# Mailings	<input style="width: 100%;" type="text" value=""/>
<input type="radio"/> Kiosks or Other Displays	# Locations	<input style="width: 100%;" type="text" value=""/>
<input type="radio"/> List-Serves	# In List	<input style="width: 100%;" type="text" value=""/>
<input type="radio"/> Mailing List	# In List	<input style="width: 100%;" type="text" value=""/>
<input type="radio"/> Newspaper Ads or Articles	# Days Run	<input style="width: 100%;" type="text" value=""/>
<input type="radio"/> Public Events/Presentations	# Attendees	<input style="width: 100%;" type="text" value=""/>
<input type="radio"/> School Program	# Attendees	<input style="width: 100%;" type="text" value=""/>
<input type="radio"/> TV Spot/Program	# Days Run	<input style="width: 100%;" type="text" value=""/>
<input checked="" type="radio"/> Printed Materials:	Total # Distributed	<input style="width: 100%;" type="text" value=""/>

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

L	i	b	r	a	r	y					

Other:

V	i	l	l	a	g	e		H	a	l	l		P	o	s	t	i	n	g
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

w	w	w	.	v	i	l	l	a	g	e	o	f	b	u	c	h	a	n	a	n	.	c	o	m

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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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3. Web Page con't.: Provide specific web addresses - not home page.

URL


URL


URL


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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

Village of Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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.**

Information is located on the website, Village Hall and Public Library.

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

Continue to make information available to the public.





### MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	3	4	2
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**2. URL(s) con't.:**

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

URL


URL


URL


URL


URL


URL


URL


**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2022

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

Name of MS4/Coalition:  SPDES ID:

**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

Address

City

Zip

Phone

Library  Annual Report  SWMP Plan  Comments

Address

City

Zip

Phone

Other  Annual Report  SWMP Plan  Comments

Address

City

Zip

Phone

Web Page URL:  Annual Report  SWMP Plan  Comments

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

SPDES ID  

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

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

0	5
---	---

 / 

3	1
---	---

 / 

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

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

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

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

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

0	5
---	---

 / 

0	3
---	---

 / 

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

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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

Information is located on the website, Village Hall and Public Library.

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

None

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

			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).**

Continue to make information available to the public.  
An annual Day Event which includes stormwater pamphlets handouts.

### MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

### Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report?

**1. Enter the number and approx. percent of outfalls mapped:**      #   %    %

**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/sewersheds were targeted for inspection during this reporting period?**

- |   |  |
|---|--|
| <input type="radio"/> Auto Recyclers                    | <input type="radio"/> Landscaping (Irrigation)               |
| <input type="radio"/> Building Maintenance              | <input type="radio"/> Marinas                                |
| <input type="radio"/> Churches                          | <input type="radio"/> Metal Plating Operations               |
| <input type="radio"/> Commercial Carwashes              | <input type="radio"/> Outdoor Fluid Storage                  |
| <input type="radio"/> Commercial Laundry/Dry Cleaners   | <input checked="" type="radio"/> Parking Lot Maintenance     |
| <input type="radio"/> Construction Vehicle Washouts     | <input type="radio"/> Printing                               |
| <input type="radio"/> Cross-Connections                 | <input type="radio"/> Residential Carwashing                 |
| <input type="radio"/> Distribution Centers              | <input type="radio"/> Restaurants                            |
| <input type="radio"/> Food Processing Facilities        | <input type="radio"/> Schools and Universities               |
| <input checked="" type="radio"/> Garbage Truck Washouts | <input type="radio"/> Septic Maintenance                     |
| <input type="radio"/> Hospitals                         | <input type="radio"/> Swimming Pools                         |
| <input type="radio"/> Improper RV Waste Disposal        | <input type="radio"/> Vehicle Fueling                        |
| <input type="radio"/> Industrial Process Water          | <input checked="" type="radio"/> Vehicle Maint./Repair Shops |
| <input type="radio"/> Other:                            | <input type="radio"/> None                                   |

Sewersheds:

### MS4 Annual Report Form

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

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	3	4	2
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#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:
- None

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

5. How many illicit discharges have been confirmed during this reporting period?

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No  
If No, approximately what percent was completed in this reporting period?

%

8. Is the above information available in GIS?  Yes  No  
Is this information available on the web?  Yes  No  
If Yes, provide URL(s):

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

URL  

h	t	t	p	:	/	/	w	w	w	.	v	i	l	l	a	g	e	o	f	b	u	c	h	a	n	a	n	.	c	o	m
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URL  


**MS4 Annual Report Form**

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

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 Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**8. URL(s) con't.:**

Please provide specific address of page where map(s) can be accessed - not home page

URL  
[Grid for URL entry]

URL  
[Grid for URL entry]

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[Grid for URL entry]

URL  
[Grid for URL entry]

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  NT

11. What percent of staff in relevant positions and departments has received IDDE training? 1 0 0 %

**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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

New facilities will have oil/water separator where possible discharges may occur.  
Scheduled cleanings of catch basins and parking lots are performed.

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

Planning, building and engineering department monitor for compliance.

**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 monitoring for compliance.

**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

Village of Buchanan

SPDES ID

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

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

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

How many MS4s contributed to this report? 

--	--	--

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

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

09/2004  03/2006  NT

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

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

		0
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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 type="radio"/> Notices of Violation             | # | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0 | <input type="radio"/> No Authority |
| <input type="radio"/> Stop Work Orders                 | # | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0 | <input type="radio"/> No Authority |
| <input type="radio"/> Criminal Actions                 | # | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0 | <input type="radio"/> No Authority |
| <input type="radio"/> Termination of Contracts         | # | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0 | <input type="radio"/> No Authority |
| <input type="radio"/> Administrative Fines             | # | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0 | <input type="radio"/> No Authority |
| <input type="radio"/> Civil Penalties                  | # | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0 | <input type="radio"/> No Authority |
| <input type="radio"/> Administrative Orders            | # | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0 | <input type="radio"/> No Authority |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0 |                                    |
| <input type="radio"/> Other                            | # | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0 | <input type="radio"/> No Authority |



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2022

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

Name of MS4/Coalition

SPDES ID  

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

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

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

How many MS4s contributed to this report?

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

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

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

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

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, 2022

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

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 3 4 2

**6. con't.:**

Submit additional pages as needed.

MS4/Coalition Office

Department

B u i l d i n g   D e p a r t m e n t

Address

2 3 6   T a t e   A v e n u e

City

B u c h a n a n

N Y

Zip

1 0 5 1 1 - 1 2 1 2

Phone

(   )   -  

Library

Address

City

Zip

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Phone

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Other

Address

1 6 8 9   R o u t e   2 2

City

B r e w s t e r

N Y

Zip

1 0 5 0 9 -

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

Village of Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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 (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

**A. Briefly summarize the Measurable Goal identified in the SWMP in this reporting period.**

Monitor sites under construction during reporting period.

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

Reports indicate corrective measures to be implemented.

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

			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 SWMP?**

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 to monitor sites during construction.



**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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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?**  

		1
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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
--	---	---

 %

**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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

None.

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

None.

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

			0
--	--	--	---

*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

None.

**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

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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? 

--	--	--

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

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

**MS4 Annual Report Form**

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

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 Buchanan

SPDES ID

N Y R 2 0 A 3 4 2

**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres     2
- Streets Swept (Number of miles X Number of times swept) # Miles    2 0
- Catch Basins Inspected and Cleaned Where Necessary #   2 9 5
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #     1
- Phosphorus Applied In Chemical Fertilizer # Lbs.     0
- Nitrogen Applied In Chemical Fertilizer # Lbs.     0
- Pesticide/Herbicide Applied # Acres    0 .
- (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**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 2 / 2 3 / 2 0 2 2

**5. How many municipal employees have been trained in this reporting period?**   7**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?**   1 0 0 %



**MS4 Annual Report Form**

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

2	0	2	2
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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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

Highway Department and Building Department personnel are trained in identifying and reporting stormwater issues to the Village Engineer.

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

Parking areas and roads are swept as needed.  
  
Sediment collected from catch basins and street sweeping is used in leaf composting facility.

**C. How many times was this observation measured or evaluated 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 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).**

Buchanan is less than 2 square miles in area with a well developed drainage system. Most issues are from the natural degradation of streams causing sediment, winter sanding and illicit discharges. Water bodies are monitored daily and the recent issues are from Hurricane Irene.

### MS4 Annual Report Form

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

2	0	2	2
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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 

Village of Buchana
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SPDES ID 

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

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

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

How many MS4s contributed to this report? 

--	--	--

**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. 

	1	0
--	---	---

 %

Estimate what percentage was mapped in this reporting period. 

		0
--	--	---

 %

### MS4 Annual Report Form

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

2	0	2	2
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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

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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? 

		0
--	--	---

 %

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? 

		0
--	--	---

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

		0
--	--	---

 %

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

		0
--	--	---

 %  
 No Projects Planned

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

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

**MS4 Annual Report Form**

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

2	0	2	2
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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

Village of Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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

**MS4 Annual Report Cover Page**

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

**This cover page must be completed by the report preparer.  
Joint reports require only one cover page.**

SPDES ID

N Y R 2 0 A 3 4 2

**Choose one:**

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

Fill in SPDES ID in upper right hand corner.

Name of MS4

V i l l a g e o f B u c h a n a n

**OR**

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

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

Name of Single Entity

**OR**

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

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

Name of Coalition

SPDES ID

N Y R 2 0 A

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N Y R 2 0 A

**MS4 Annual Report Cover Page**

MCC form for period ending March 9, 2021

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

SPDES ID  
N Y R 2 0 A

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

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

Name of MS4

SPDES ID										
N	Y	R	2	0	A	3	4	2		

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:


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

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

Name of MS4

SPDES ID  
N Y R 2 0 A 3 4 2

**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, 2 0 2 1

Name of MS4 Village of Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**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 M a r c u s MI Last Name S e r r a n o

Title V i l l a g e A d m i n i s t r a t o r

Address 2 3 6 T a t e A v e n u e

City B u c h a n a n State N Y Zip 1 0 5 1 1 - 1 2 1 2

eMail m s e r r a n o @ v i l l a g e o f b u c h a n a n . c o m

Phone ( 9 1 4 ) 7 3 7 - 1 0 3 3 County W e s t c h e s t e r

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2021

Name of MS4 Village of Buchanan

SPDES ID

NYR20A342

## 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: G e o r g e      MI:      Last Name: P o m m e r

Title: V . P . H a h n E n g i n e e r i n g , P . C .

Address: 1 6 8 9 R o u t e 2 2

City: B r e w s t e r      State: N Y      Zip: 1 0 5 0 9 -

eMail: g p o m m e r @ h a h n - e n g . c o m

Phone: ( 8 4 5 ) 2 7 9 - 2 2 2 0      County: P u t n a m

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

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

Name of MS4 Village of Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**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  
N Y R 2 0

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)?

- MM1
- MM2
- MM3
- MM4
- MM5
- MM6

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 2 1

Name of MS4 Village of Buchanan

SPDES ID

N Y R 2 0 A 3 4 2

#### 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  
M a r c u s S e r r a n o

Title (Clearly print title of individual signing report)  
V i l l a g e A d m i n i s t r a t o r

Signature

Date  
0 5 / 1 6 / 2 0 2 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	2	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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

Information is located on the website, Village Hall and Public Library.

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

**C. How many times was this observation measured or evaluated 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 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 to make information available to the public.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2021

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

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 3 4 2

### Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?

#### 1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

<input checked="" type="radio"/> Cleanup Events	# Events	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value="1"/>
<input type="radio"/> Comments on SWMP Received	# Comments	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Community Hotlines	Phone #	( <input type="text" value="9"/> <input type="text" value="1"/> <input type="text" value="4"/> ) <input type="text" value="7"/> <input type="text" value="3"/> <input type="text" value="7"/> - <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="3"/>
Phone #	( <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> )	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> - <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
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Phone #	( <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> )	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> - <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Community Meetings	# Attendees	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Plantings	Sq. Ft.	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Storm Drain Markings	# Drains	<input type="text" value=""/> <input type="text" value="3"/> <input type="text" value="2"/> <input type="text" value="5"/>
<input type="radio"/> Stakeholder Meetings	# Attendees	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Volunteer Monitoring	# Events	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Other: <input type="text" value="N"/> <input type="text" value="o"/> <input type="text" value="n"/> <input type="text" value="e"/>		

#### 2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? Yes No

<input type="radio"/> List-Serve	# In List	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Newspaper Advertising	# Days Run	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> TV/Radio Notices	# Days Run	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Other: <input type="text" value="M"/> <input type="text" value="o"/> <input type="text" value="n"/> <input type="text" value="t"/> <input type="text" value="h"/> <input type="text" value="l"/> <input type="text" value="y"/> <input type="text" value="N"/> <input type="text" value="e"/> <input type="text" value="w"/> <input type="text" value="s"/> <input type="text" value="l"/> <input type="text" value="e"/> <input type="text" value="t"/> <input type="text" value="t"/> <input type="text" value="e"/> <input type="text" value="r"/>		

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	3	4	2
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**2. URL(s) con't.:**

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

URL

g	p	o	m	m	e	r	@	h	a	h	n	-	e	n	g	.	c	o	m

URL


URL


URL


URL


URL


URL




### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9, 2021**

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 Buchanan	SPDES ID
Village of Buchanan	N Y R 2 0 A 3 4 2

**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

V i l l a g e o f B u c h a n a n
-----------------------------------

Address

2 3 6 T a t e A v e n u e
---------------------------

City

B u c h a n a n	N Y	Z i p
1 0 5 1 1 - 1 2 1 2		

Phone

( 9 1 4 ) 7 3 7 - 1 0 3 3
---------------------------

- Library
  Annual Report
 SWMP Plan
 Comments

Address

1 8 5 K i n g s F e r r y R o a d
-----------------------------------

City

M o n t r o s e	N Y	Z i p
1 0 5 4 8 - 1 2 3 6		

Phone

( 9 1 4 ) 7 3 9 - 5 6 5 4
---------------------------

- Other
  Annual Report
 SWMP Plan
 Comments

Address

1 6 8 9 R o u t e 2 2
-----------------------

City

B r e w s t e r	N Y	Z i p
1 0 5 0 9 -		

Phone

( 8 4 5 ) 2 7 9 - 2 2 2 0
---------------------------

- Web Page URL:
  Annual Report
 SWMP Plan
 Comments

h t t p : / / w w w . v i l l a g e o f b u c h a n a n . c o
m / c o m m u n i t y - G e n . h t m l

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

- eMail
  Comments

a d m i n i s t r a t o r @ v i l l a g e o f b u c h a n a n
. c o m

### MS4 Annual Report Form

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

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 Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

4.a. If this report was made available on the internet, what date was it posted?

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

0 5 / 2 7 / 2 0 2 1

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

3 6 5

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

5.a. Was an Annual Report public meeting held in this reporting period?

Yes  No

If Yes, what was the date of the meeting?

0 6 / 0 2 / 2 0 2 0

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, 

2	0	2	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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

Information is located on the website, Village Hall and Public Library.

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

None

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

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

(ex.: samples/participants/events)

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

Yes    No

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

Yes    No

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

Continue to make information available to the public.  
 An annual Day Event which includes stormwater pamphlets handouts.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

SPDES ID

**Minimum Control Measure 3. Illicit Discharge Detection and Elimination**

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

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

How many MS4s contributed to this report?

**1. Enter the number and approx. percent of outfalls mapped:**         #     %

**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/sewersheds were targeted for inspection during this reporting period?**

- |   |  |
|---|--|
| <input type="radio"/> Auto Recyclers                    | <input type="radio"/> Landscaping (Irrigation)               |
| <input type="radio"/> Building Maintenance              | <input type="radio"/> Marinas                                |
| <input type="radio"/> Churches                          | <input type="radio"/> Metal Plateing Operations              |
| <input type="radio"/> Commercial Carwashes              | <input type="radio"/> Outdoor Fluid Storage                  |
| <input type="radio"/> Commercial Laundry/Dry Cleaners   | <input checked="" type="radio"/> Parking Lot Maintenance     |
| <input type="radio"/> Construction Vehicle Washouts     | <input type="radio"/> Printing                               |
| <input type="radio"/> Cross-Connections                 | <input type="radio"/> Residential Carwashing                 |
| <input type="radio"/> Distribution Centers              | <input type="radio"/> Restaurants                            |
| <input type="radio"/> Food Processing Facilities        | <input type="radio"/> Schools and Universities               |
| <input checked="" type="radio"/> Garbage Truck Washouts | <input type="radio"/> Septic Maintenance                     |
| <input type="radio"/> Hospitals                         | <input type="radio"/> Swimming Pools                         |
| <input type="radio"/> Improper RV Waste Disposal        | <input type="radio"/> Vehicle Fueling                        |
| <input type="radio"/> Industrial Process Water          | <input checked="" type="radio"/> Vehicle Maint./Repair Shops |
| <input type="radio"/> Other:                            | <input type="radio"/> None                                   |

Sewersheds:



### MS4 Annual Report Form

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

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 Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Cross Connections
- Failing Septic Systems
- Floor Drains Connected To Storm Sewers
- Illegal Dumping
- Other:
- Industrial Connections
- Inflow/Infiltration
- Pump Station Failure
- Sanitary Sewer Overflows
- Straight Pipe Sewer Discharges
- None

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

		0
--	--	---

5. How many illicit discharges have been confirmed during this reporting period?

		0
--	--	---

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

		0
--	--	---

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No  
If No, approximately what percent was completed in this reporting period?

1	0	0	%
---	---	---	---

8. Is the above information available in GIS?  Yes  No  
Is this information available on the web?  Yes  No  
If Yes, provide URL(s):

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

URL

h	t	t	p	:	/	/	w	w	w	.	v	i	l	l	a	g	e	o	f	b	u	c	h	a	n	a	n	.	c	o	m			

URL




**MS4 Annual Report Form**

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

2	0	2	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

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

New facilities will have oil/water separator where possible discharges may occur.  
Scheduled cleanings of catch basins and parking lots are performed.

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

Planning, building and engineering department monitor for compliance.

**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).**

Continue monitoring for compliance.

**MS4 Annual Report Form**

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

2	0	2	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

SPDES ID  

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

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

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

How many MS4s contributed to this report? 

--	--	--

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  
 09/2004  03/2006  NT

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

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

		0
--	--	---

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

If Yes, how many public comments were received during this reporting period? 

		0
--	--	---

**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

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

- Notices of Violation # 

--	--	--	--	--

 No Authority
- Stop Work Orders # 

--	--	--	--	--

 No Authority
- Criminal Actions # 

--	--	--	--	--

 No Authority
- Termination of Contracts # 

--	--	--	--	--

 No Authority
- Administrative Fines # 

--	--	--	--	--

 No Authority
- Civil Penalties # 

--	--	--	--	--

 No Authority
- Administrative Orders # 

--	--	--	--	--

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--

 No Authority
- Other # 

--	--	--	--	--

 No Authority

**MS4 Annual Report Form**

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

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 Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

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

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

How many MS4s contributed to this report? [ ][ ][ ]

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? [ ][ ] 0

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? [ ][ ] 0

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, 2021

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

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 3 4 2

**6. con't.:**

Submit additional pages as needed.

**MS4/Coalition Office**

Department

B u i l d i n g   D e p a r t m e n t

Address

2 3 6   T a t e   A v e n u e

City

B u c h a n a n

N Y

Zip

1 0 5 1 1 - 1 2 1 2

Phone

(   )   -  

**Library**

Address

City

Zip

-

Phone

(   )   -  

**Other**

Address

1 6 8 9   R o u t e   2 2

City

B r e w s t e r

N Y

Zip

1 0 5 0 9 -

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

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

Monitor sites under construction during reporting period.

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

Reports indicate corrective measures to be implemented.

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

			0
--	--	--	---

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

Continue to monitor sites during construction.



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 3 4 2

**Minimum Control Measure 5. Post-Construction Stormwater Management**

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

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

How many MS4s contributed to this report?

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

	# Inventoried	# Inspections	# Times Maintained
<input checked="" type="radio"/> Alternative Practices	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value="1"/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Filter Systems	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input checked="" type="radio"/> Infiltration Basins	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value="2"/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Open Channels	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Ponds	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Wetlands	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
<input type="radio"/> Other	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?  Yes  No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes  Municipal Comprehensive Plans
- Overlay Districts  Open Space Preservation Program
- Zoning  Local Law or Ordinance
- None  Land Use Regulation/Zoning
- Watershed Plans  Other Comprehensive Plan

Other:  
P l a n n i n g   B o a r d   R e v i e w

**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

Village of Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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?**

		1
--	--	---

**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
--	---	---

 %

**MS4 Annual Report Form**

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

2	0	2	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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

None.

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

None.

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

			0
--	--	--	---

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

None.

### MS4 Annual Report Form

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

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 Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

### 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?      

**1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

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

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2021

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 Buchanan

SPDES ID: NYR 20A342

#### 2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres     2
- Streets Swept (Number of miles X Number of times swept) # Miles   2 0
- Catch Basins Inspected and Cleaned Where Necessary #   2 9 5
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #     1
- Phosphorus Applied In Chemical Fertilizer # Lbs.     0
- Nitrogen Applied In Chemical Fertilizer # Lbs.     0
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres    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 2 / 2 3 / 2 0 2 1

5. How many municipal employees have been trained in this reporting period?   8

6. What percent of municipal employees in relevant positions and departments receive stormwater management training? 1 0 0 %

**MS4 Annual Report Form**

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

2	0	2	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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

Highway Department and Building Department personnel are trained in identifying and reporting stormwater issues to the Village Engineer.

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

Parking areas and roads are swept as needed.  
Sediment collected from catch basins and street sweeping is used in leaf composting facility.

**C. How many times was this observation measured or evaluated 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 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).**

Buchanan is less than 2 square miles in area with a well developed drainage system. Most issues are from the natural degradation of streams causing sediment, winter sanding and illicit discharges. Water bodies are monitored daily and the recent issues are from Hurricane Irene.

### MS4 Annual Report Form

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

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 Buchana

SPDES ID  
N Y R 2 0 A 3 4 2

### 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.   1 0 %

Estimate what percentage was mapped in this reporting period.     0 %

**MS4 Annual Report Form**

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

2	0	2	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

Village of Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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? 

		0
--	--	---

 %

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? 

		0
--	--	---

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

		0
--	--	---

 %

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

		0
--	--	---

 %  
 No Projects Planned

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

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



**MS4 Annual Report Form**

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

2	0	2	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

Village of Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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

**MS4 Annual Report Cover Page**

MCC form for period ending March 9, 

2	0	2	0
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**This cover page must be completed by the report preparer.  
Joint reports require only one cover page.**

SPDES ID  

N	Y	R	2	0	A	3	4	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.

Name of MS4

V i l l a g e   o f   B u c h a n a n

**OR**

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

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

Name of Single Entity

**OR**

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

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

Name of Coalition

SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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SPDES ID  

N	Y	R	2	0	A
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**MS4 Municipal Compliance Certification(MCC) Form**

MCC form for period ending March 9, 

2	0	2	0
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Name of MS4 

Village of Buchanan
---------------------

SPDES ID

N	Y	R	2	0	A	3	4	2
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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 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:


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

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

Name of MS4

SPDES ID  
N Y R 2 0 A 3 4 2

**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, 2020

Name of MS4

SPDES ID  
N Y R 2 0 A 3 4 2

#### 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  
N Y R 2 0

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)?

- MM1
- MM2
- MM3
- MM4
- MM5
- MM6

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, 2020

Name of MS4 Village of Buchanan

SPDES ID

N Y R 2 0 A 3 4 2

**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 VIJ.

First Name Marcus MI  Last Name Serrano

Title (Clearly print title of individual signing report)  
Village Administrator

Signature  


Date 05 / 26 / 2020

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, 2020

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

Name of MS4/Coalition:

SPDES ID  

N	Y	R	2	0	A	3	4	2
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**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- Construction Site Operators Trained # Trained
- Direct Mailings # Mailings
- Kiosks or Other Displays # Locations
- List-Serves # In List
- Mailing List # In List
- Newspaper Ads or Articles # Days Run
- Public Events/Presentations # Attendees
- School Program # Attendees
- TV Spot/Program # Days Run
- Printed Materials: Total # Distributed

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

L	i	b	r	a	r	y													
D	a	y		E	v	e	n	t											

**Other:**

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

URL

URL



**MS4 Annual Report Form**

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

2	0	2	0
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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

Village of Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
---	---	---	---	---	---	---	---	---

**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.**

Information is located on the website, Village Hall and Public Library.

**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.****C. How many times was this observation measured or evaluated 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 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 to make information available to the public.

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9, 2020**

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

Name of MS4/Coalition

SPDES ID									
N	Y	R	2	0	A	3	4	2	

**Minimum Control Measure 2. Public Involvement/Participation**

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

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

How many MS4s contributed to this report?

**1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:**

- Cleanup Events # Events       1
- Comments on SWMP Received # Comments
- Community Hotlines
  - Phone # (    )    -
  - Phone # (    )    -
  - Phone # (    )    -
  - Phone # (    )    -
  - Phone # (    )    -
  - Phone # (    )    -
- Community Meetings # Attendees
- Plantings Sq. Ft.
- Storm Drain Markings # Drains   3  2  5
- Stakeholder Meetings # Attendees
- Volunteer Monitoring # Events
- Other:

**2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?**  Yes  No

- List-Serve # In List
- Newspaper Advertising # Days Run
- TV/Radio Notices # Days Run
- Other:
- Web Page URL: Enter URL(s) on the following two pages.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 3 4 2

2. URL(s) con't.:

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

URL

g p o m m e r @ h a h n - e n g . c o m

URL

URL

URL

URL

URL

URL



**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9, 2020**

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

Name of MS4/Coalition:  SPDES ID:

**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:

Address:

City:  State:  Zip:

Phone:

- Library
  Annual Report
  SWMP Plan
  Comments

Address:

City:  State:  Zip:

Phone:

- Other
  Annual Report
  SWMP Plan
  Comments

Address:

City:  State:  Zip:

Phone:

- Web Page URL:
  Annual Report
  SWMP Plan
  Comments

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, 

2	0	2	0
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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 

Village of Buchanan
---------------------

SPDES ID

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

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

0	5	/	2	7	/	2	0	2	0
---	---	---	---	---	---	---	---	---	---

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

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

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

**5.a. Was an Annual Report public meeting held in this reporting period?**

Yes  No

If Yes, what was the date of the meeting?

		/			/				
--	--	---	--	--	---	--	--	--	--

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, 2020**

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

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

Information is located on the website, Village Hall and Public Library.

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

None

**C. How many times was this observation measured or evaluated 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 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 to make information available to the public.  
 An annual Day Event with include stormwater pamphlets.



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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 Buchanan

SPDES ID: N Y R 2 0 A 3 4 2

#### 3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges
- Other:  None

Empty grid for additional information

4. How many illicit discharges/potential illegal connections have been detected during this reporting period?

0

5. How many illicit discharges have been confirmed during this reporting period?

0

6. How many illicit discharges/illegal connections have been eliminated during this reporting period?

0

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No  
If No, approximately what percent was completed in this reporting period?

100%

8. Is the above information available in GIS?  Yes  No  
Is this information available on the web?  Yes  No

If Yes, provide URL(s):

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

URL

http://www.villageofbuchanan.com

URL

Empty grid for additional URLs



**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

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

**C. How many times was this observation measured or evaluated 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 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).**

**MS4 Annual Report Form**

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

2	0	2	0
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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

SPDES ID  

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

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

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

How many MS4s contributed to this report? 

--	--	--

**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?**  Yes  No

**1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?**  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  
 09/2004  03/2006  NT

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

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

		0
--	--	---

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

If Yes, how many public comments were received during this reporting period? 

		0
--	--	---

**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

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

- Notices of Violation # 

--	--	--	--	--

 No Authority
- Stop Work Orders # 

--	--	--	--	--

 No Authority
- Criminal Actions # 

--	--	--	--	--

 No Authority
- Termination of Contracts # 

--	--	--	--	--

 No Authority
- Administrative Fines # 

--	--	--	--	--

 No Authority
- Civil Penalties # 

--	--	--	--	--

 No Authority
- Administrative Orders # 

--	--	--	--	--

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--

 No Authority
- Other # 

--	--	--	--	--

 No Authority



**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 

Village of Buchanan
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SPDES ID  

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

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

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

How many MS4s contributed to this report? 

--	--	--

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

		0
--	--	---

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

		0
--	--	---

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, 

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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

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

Monitor sites under construction during reporting period.

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

Reports indicate corrective measures to be implemented.

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

			0
--	--	--	---

(ex.: samples/participants/events)

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

Yes    No

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

Yes    No

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

Continue to monitor sites during construction.

### MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	3	4	2
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### Minimum Control Measure 5. Post-Construction Stormwater Management

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

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

How many MS4s contributed to this report?

**1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?**

	# Inventoried	# Inspections	# Times Maintained
<input checked="" type="radio"/> Alternative Practices	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> 1	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
<input type="radio"/> Filter Systems	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
<input checked="" type="radio"/> Infiltration Basins	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> 2	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
<input type="radio"/> Open Channels	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
<input type="radio"/> Ponds	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
<input type="radio"/> Wetlands	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
<input type="radio"/> Other	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>

**2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?**  Yes  No

**3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?**

- Building Codes       Municipal Comprehensive Plans
- Overlay Districts     Open Space Preservation Program
- Zoning                     Local Law or Ordinance
- None                       Land Use Regulation/Zoning
- Watershed Plans       Other Comprehensive Plan

Other:  

P	l	a	n	n	i	n	g	B	o	a	r	d	R	e	v	i	e	w										
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

### 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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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?  

		1
--	--	---

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
--	---	---

 %

**MS4 Annual Report Form**

**This report is being submitted for the reporting period ending March 9, 2020**

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 Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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.**

None.

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

None.

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

			0
--	--	--	---

*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

None.

**MS4 Annual Report Form**

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

2	0	2	0
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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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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? 

--	--	--

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

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

### MS4 Annual Report Form

**This report is being submitted for the reporting period ending March 9, 2020**

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 Buchanan

SPDES ID  
NYR20A342

**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres     0
- Streets Swept (Number of miles X Number of times swept) # Miles     5
- Catch Basins Inspected and Cleaned Where Necessary #   325
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #     1
- Phosphorus Applied In Chemical Fertilizer # Lbs.     0
- Nitrogen Applied In Chemical Fertilizer # Lbs.     0
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres     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?** 03 / 03 / 2020

**5. How many municipal employees have been trained in this reporting period?**   7

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?** 100 %



**MS4 Annual Report Form**

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

SPDES ID

N Y R 2 0 A 3 4 2

**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.**

Highway Department and Building Department personnel are trained in identifying and reporting stormwater issues to the Village Engineer.

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

Parking areas and roads are swept as needed.

Sediment collected from catch basins and street sweeping is used in leaf composting facility.

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

Four empty boxes for numerical input.

(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).**

Buchanan is less than 2 square miles in area with a well developed drainage system. Most issues are from the natural degradation of streams causing sediment, winter sanding and illicit discharges. Water bodies are monitored daily and the recent issues are from Hurricane Irene.

### MS4 Annual Report Form

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

SPDES ID  
N Y R 2 0 A 3 4 2

### 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 

Village of Buchanan
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SPDES ID

N	Y	R	2	0	A	3	4	2
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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? 

		0
--	--	---

 %

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? 

		0
--	--	---

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

		0
--	--	---

 %

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

		0
--	--	---

 %

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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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 Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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

**MS4 Annual Report Cover Page**

MCC form for period ending March 9, 

2	0	1	9
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**This cover page must be completed by the report preparer.  
Joint reports require only one cover page.**

SPDES ID  

N	Y	R	2	0	A	3	4	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.

Name of MS4

V i l l a g e o f B u c h a n a n

**OR**

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

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

Name of Single Entity

**OR**

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

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

Name of Coalition

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**MS4 Annual Report Cover Page**

MCC form for period ending March 9, 

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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, 

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Name of MS4

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 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:


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

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

Name of MS4

SPDES ID  
N Y R 2 0 A 3 4 2

**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, 2 0 1 9

Name of MS4

SPDES ID  
N Y R 2 0 A 3 4 2

#### 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

N Y R 2 0

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)?

MM1

MM2

MM3

MM4

MM5

MM6

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, 2019

Name of MS4: Village of Buchanan

SPDES ID

NYR 20A342

**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: Kevin MI: F Last Name: Hay

Title (Clearly print title of individual signing report): Village Administrator

Signature: *Kevin Hay*

Date: 05 / 29 / 2019

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 9

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	3	4	2	

Name of MS4/Coalition

**Water Quality Trends**

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.**

Yes  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


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### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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

Name of MS4/Coalition

SPDES ID  

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### Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

#### 1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- |  |   |
|--|---|
| <input checked="" type="radio"/> Construction Sites                                  | <input checked="" type="radio"/> Pesticide and Fertilizer Application |
| <input checked="" type="radio"/> General Stormwater Management Information           | <input checked="" type="radio"/> Pet Waste Management                 |
| <input type="radio"/> Household Hazardous Waste Disposal                             | <input checked="" type="radio"/> Recycling                            |
| <input type="radio"/> Illicit Discharge Detection and Elimination                    | <input type="radio"/> Riparian Corridor Protection/Restoration        |
| <input type="radio"/> Infrastructure Maintenance                                     | <input type="radio"/> Trash Management                                |
| <input type="radio"/> Smart Growth   | <input checked="" type="radio"/> Vehicle Washing                      |
| <input type="radio"/> Storm Drain Marking  | <input checked="" type="radio"/> Water Conservation                   |
| <input type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development | <input type="radio"/> Wetland Protection                              |
| <input type="radio"/> Other:   | <input type="radio"/> None  |

Other

#### 2. Specific audiences targeted during this reporting period:

- |   |   |
|---|---|
| <input checked="" type="radio"/> Public Employees | <input checked="" type="radio"/> Contractors    |
| <input checked="" type="radio"/> Residential      | <input checked="" type="radio"/> Developers     |
| <input checked="" type="radio"/> Businesses       | <input checked="" type="radio"/> General Public |
| <input type="radio"/> Restaurants                 | <input type="radio"/> Industries                |
| <input type="radio"/> Other:                      | <input type="radio"/> Agricultural              |

Other

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2019

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

Name of MS4/Coalition

SPDES ID									
N	Y	R	2	0	A	3	4	2	

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

- Construction Site Operators Trained
- Direct Mailings
- Kiosks or Other Displays
- List-Serves
- Mailing List
- Newspaper Ads or Articles
- Public Events/Presentations
- School Program
- TV Spot/Program

# Trained					
# Mailings					
# Locations					
# In List					
# In List					
# Days Run					
# Attendees			2	5	
# Attendees					
# Days Run					
Total # Distributed			2	5	

Printed Materials:

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

L	i	b	r	a	r	y											
D	a	y		E	v	e	n	t									

Other:

V	i	l	l	a	g	e		H	a	l	l		P	o	s	t	i	n	g
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

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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

SPDES ID 

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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

SPDES ID  

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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.**

Information is located on the website, Village Hall and Public Library.

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

**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).**

Continue to make information available to the public.





## 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

Village of Buchanan

SPDES ID

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### 2. URL(s) con't.:

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

URL

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### MS4 Annual Report Form

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

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 Buchanan SPDES ID  
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**3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?**

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

- MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department  
V i l l a g e o f B u c h a n a n

Address  
2 3 6 T a t e A v e n u e

City Zip  
B u c h a n a n N Y 1 0 5 1 1 - 1 2 1 2

Phone  
( 9 1 4 ) 7 3 7 - 1 0 3 3

- Library  Annual Report  SWMP Plan  Comments

Address  
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City Zip  
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Phone  
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- Other  Annual Report  SWMP Plan  Comments

Address  
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City Zip  
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Phone  
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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

a d m i n i s t r a t o r @ v i l l a g e o f b u c h a n a n . c o m

### MS4 Annual Report Form

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

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 Buchanan

SPDES ID  
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4.a. If this report was made available on the internet, what date was it posted?

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

0 5 / 3 0 / 2 0 1 9

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

3 6 5

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

5.a. Was an Annual Report public meeting held in this reporting period?

Yes  No

If Yes, what was the date of the meeting?

/ /

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

SPDES ID  

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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.**

Information is located on the website, Village Hall and Public Library.

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

None

**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).**

Continue to make information available to the public.  
 An annual Day Event with include stormwater pamphlets.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

SPDES ID

**Minimum Control Measure 3. Illicit Discharge Detection and Elimination**

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

On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report?

**1. Enter the number and approx. percent of outfalls mapped:**      3 2 #    %

**2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)?**    1 6

**3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?**

- Auto Recyclers
- Building Maintenance
- Churches
- Commercial Carwashes
- Commercial Laundry/Dry Cleaners
- Construction Vehicle Washouts
- Cross-Connections
- Distribution Centers
- Food Processing Facilities
- Garbage Truck Washouts
- Hospitals
- Improper RV Waste Disposal
- Industrial Process Water
- Other:
- Landscaping (Irrigation)
- Marinas
- Metal Plateing Operations
- Outdoor Fluid Storage
- Parking Lot Maintenance
- Printing
- Residential Carwashing
- Restaurants
- Schools and Universities
- Septic Maintenance
- Swimming Pools
- Vehicle Fueling
- Vehicle Maint./Repair Shops
- None

Sewersheds:



**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 

Village of Buchanan
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SPDES ID  

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**8. URL(s) con't.:**

**Please provide specific address of page where map(s) can be accessed - not home page**

URL


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  NT

11. What percent of staff in relevant positions and departments has received IDDE training? 

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

 %



### MS4 Annual Report Form

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

2	0	1	9
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Name of MS4/Coalition 

Village of Buchanan
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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.

New facilities will have oil/water separator where possible discharges may occur.  
Scheduled cleanings of catch basins and parking lots are performed.

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

Planning, building and engineering department monitor for compliance.

##### 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).

Continue monitoring for compliance.

**MS4 Annual Report Form**

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

2	0	1	9
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Name of MS4/Coalition 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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?**

		0
--	--	---

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

If Yes, how many public comments were received during this reporting period? 

		0
--	--	---

**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?**  Yes  No

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

- Notices of Violation # 

--	--	--	--	--

 No Authority
- Stop Work Orders # 

--	--	--	--	--

 No Authority
- Criminal Actions # 

--	--	--	--	--

 No Authority
- Termination of Contracts # 

--	--	--	--	--

 No Authority
- Administrative Fines # 

--	--	--	--	--

 No Authority
- Civil Penalties # 

--	--	--	--	--

 No Authority
- Administrative Orders # 

--	--	--	--	--

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--

 No Authority
- Other # 

--	--	--	--	--

 No Authority

**MS4 Annual Report Form**

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

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Name of MS4/Coalition Village of Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

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

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

How many MS4s contributed to this report? [ ][ ][ ]

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? [ ][ ] 0

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? [ ][ ] 0

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, 2019

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Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 3 4 2

**6. con't.:**

Submit additional pages as needed.

MS4/Coalition Office

Department  
B u i l d i n g   D e p a r t m e n t

Address  
2 3 6   T a t e   A v e n u e

City  
B u c h a n a n   N Y   Zip  
1 0 5 1 1 - 1 2 1 2

Phone  
(   )   -  

Library

Address

City   Zip

Phone  
(   )   -  

Other

Address  
1 6 8 9   R o u t e   2 2

City  
B r e w s t e r   N Y   Zip  
1 0 5 0 9 -

Phone  
( 8 4 5 ) 2 7 9 - 2 2 2 0

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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Name of MS4/Coalition 

Village of Buchanan
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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.**

Monitor sites under construction during reporting period.

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

Reports indicate corrective measures to be implemented.

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

			0
--	--	--	---

*(ex. : samples/participants/events)*

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

Yes  No

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

Yes  No

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

Continue to monitor sites during construction.

**MS4 Annual Report Form**

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

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 Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**Minimum Control Measure 5. Post-Construction Stormwater Management**

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

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

How many MS4s contributed to this report? [ ][ ][ ]

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

	# Inventoried	# Inspections	# Times Maintained
<input checked="" type="radio"/> Alternative Practices	[ ][ ] 2	[ ][ ][ ][ ]	[ ][ ][ ][ ]
<input type="radio"/> Filter Systems	[ ][ ][ ][ ]	[ ][ ][ ][ ]	[ ][ ][ ][ ]
<input checked="" type="radio"/> Infiltration Basins	[ ][ ] 3	[ ][ ][ ][ ]	[ ][ ][ ][ ]
<input type="radio"/> Open Channels	[ ][ ][ ][ ]	[ ][ ][ ][ ]	[ ][ ][ ][ ]
<input type="radio"/> Ponds	[ ][ ][ ][ ]	[ ][ ][ ][ ]	[ ][ ][ ][ ]
<input type="radio"/> Wetlands	[ ][ ][ ][ ]	[ ][ ][ ][ ]	[ ][ ][ ][ ]
<input type="radio"/> Other	[ ][ ][ ][ ]	[ ][ ][ ][ ]	[ ][ ][ ][ ]

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?  Yes  No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes  Municipal Comprehensive Plans
- Overlay Districts  Open Space Preservation Program
- Zoning  Local Law or Ordinance
- None  Land Use Regulation/Zoning
- Watershed Plans  Other Comprehensive Plan

Other:  
P l a n n i n g   B o a r d   R e v i e w

### MS4 Annual Report Form

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

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Name of MS4/Coalition 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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?

		1
--	--	---

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
--	---	---

 %



**MS4 Annual Report Form**

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

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Name of MS4/Coalition 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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.**

None.

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

None.

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

			0
--	--	--	---

*(ex.: samples/participants/events)*

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

Yes  No

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

Yes  No

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

None.

**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 

Village of Buchanan
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SPDES ID  

N	Y	R	2	0	A	3	4	2
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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 checked="" type="radio"/> Yes	<input type="radio"/> No
Bridge Maintenance.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Other.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No

### MS4 Annual Report Form

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

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 Buchanan

SPDES ID  
N Y R 2 0 A 3 4 2

**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres         1
- Streets Swept (Number of miles X Number of times swept) # Miles       3 8
- Catch Basins Inspected and Cleaned Where Necessary #     2 1 2
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #         1
- Phosphorus Applied In Chemical Fertilizer # Lbs.         0
- Nitrogen Applied In Chemical Fertilizer # Lbs.         0
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres       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 2 / 2 0 / 2 0 1 9

**5. How many municipal employees have been trained in this reporting period?**     6

**6. What percent of municipal employees in relevant positions and departments receive stormwater management training?** 1 0 0 %

**MS4 Annual Report Form**

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

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Name of MS4/Coalition

Village of Buchanan

SPDES ID

N	Y	R	2	0	A	3	4	2
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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.**

Highway Department and Building Department personnel are trained in identifying and reporting stormwater issues to the Village Engineer.

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

Parking areas and roads are swept as needed.

Sediment collected from catch basins and street sweeping is used in leaf composting facility.

**C. How many times was this observation measured or evaluated 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 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).**

Buchanan is less than 2 square miles in area with a well developed drainage system. Most issues are from the natural degradation of streams causing sediment, winter sanding and illicit discharges. Water bodies are monitored daily and the recent issues are from Hurricane Irene.

### MS4 Annual Report Form

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

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 Buchana

SPDES ID  
N Y R 2 0 A 3 4 2

### 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	1,2,7a-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.   1 0 %

Estimate what percentage was mapped in this reporting period.     0 %

### 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

SPDES ID  

N	Y	R	2	0	A	3	4	2
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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? 

		0
--	--	---

 %

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? 

		0
--	--	---

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

		0
--	--	---

 %

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

		0
--	--	---

 %  
 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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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 Buchanan
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SPDES ID

N	Y	R	2	0	A	3	4	2
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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

## **Appendix D**



## **Appendix E**

**Buchanan Construction Site Inventory**

Rev. 06/20/2024

Location	Project Name	Owner/Operator Contact Name	SWPPP Contact Name	SWPPP Contact Business Phone	SWPPP Contact Email	Receiving Waterbody Name/Class	Receiving Waterbody WI/PWL ID	Disturbed Area
450 Broadway	Indep. Spent Fuel Storage Installat	Entergy Nuclear Operations, Inc.				Hudson River	864-2	4.8
350 Broadway	LAFARGE NORTH AMERICA	LAFARGE NORTH AMERICA GYPSUM	MARR DOUGLAS	914-232-2500		Hudson River	864-2	14.9
350 Broadway	LAFARGE NORTH AMERICA	LAFARGE NORTH AMERICA GYPSUM	JONES JEFFREY	914-232-2500		Hudson River	864-2	4.1
Greentown Road	BUCHANAN TREES LLC	BUCHANAN TREES LLC	KUNNY, ANTHONY	914-273-2323		Hudson River		1.6
Greentown Road	Site Development for Timco	Timco	Annicchiarico, James	914-736-3664		Dickey Brook/Hudson River		4.2
450 BROADWAY	Indian Point Energy Center Fence Project	ENTERGY NUCLEAR OPERATIONS INC	SETARO PETER	845-454-3411		Hudson River		8.4
Buchanan 345kV Substation 375 Broadway	Replacement of Y94 Overhead Station Bypass with Solid Dielectric Cables Project	Consolidated Edison Company of New York, Inc.	Veith, Brian	914-467-5300, x19		Unspecified Federal wetlands		1.8
450 Broadway	Entergy ISFSI Pad #2	Entergy Nuclear IP-2 & IP-3 LLC	Staudohar, Keith	914-736-3664	keith@croninengineering.net	Hudson River	864-2	2.2
450 Broadway	Holtec - IPEC ISFSI Pad #2	Holtec International Corporation	Staudohar, Keith	914-736-3664	keith@croninengineering.net	Hudson River	864-2	2.2
Albany Post Road & Craft Lane	AMS Buchanan	Buchanan Dev AMS LLC	Villareale, Diego	914-273-5225	DVillareale@jmcpllc.com	On-site Pond		4.2

<sup>1</sup>S=Satisfactory; M=Marginal; U=Unsatisfactory

<sup>2</sup>A=Active; T=Transferred; TS=Temporary Shutdown; C=Complete

**Buchanan Construction Site Inve**  
**Rev. 06/20/2024**

Location	>5 Acres Disturbed?	Priority (High/Low)	SPDES ID	SWPPP Approval Date	NOI Submission Date	Pre-Con Mtg Date	Inspection Dates	Inspection Rating <sup>1</sup>	Status <sup>2</sup>	Final Stabilization Date	NOT Date	Post-Constructi on SMP	Post-Construction SMP Type	Alternate SMP
450 Broadway	No	Low	NYR10H166		6/7/2004				C	6/1/2007	7/31/2007	Yes		
350 Broadway	Yes	High	NYR10I781		4/25/2005				C	12/1/2011	2/18/2013	Yes		
350 Broadway	No	Low	NYR10J453		8/15/2005				C	12/1/2011	2/18/2013	Yes		
Greentown Road	No	Low	NYR10N147		7/3/2007				C	4/1/2014	4/3/2014	Yes		
Greentown Road	No	Low	NYR10N897		11/29/2007				C	11/1/2010	3/17/2011	No		
450 BROADWAY	No	Low	NYR10R868		10/28/2009				C	12/1/2011	1/10/2012	Yes		
Buchanan 345kV Substation 375 Broadway	No	Low	NYR10Z963		9/30/2015				C	11/1/2016	12/14/2016	Yes	Dry Swale (O-1)	
450 Broadway	No	Low	NYR11I009	4/13/2021	4/16/2021				T			Yes	Infiltration Basin (I-2)	
450 Broadway	No	Low	NYR11I589	8/9/2021	8/11/2021				A			Yes	Infiltration Basin (I-2)	
Albany Post Road & Craft Lane	No	Low	NYR11M399	3/15/2024	3/19/2024				A			Yes	Stormwater Planter (RR-7), Green Roof (RR-10), Media Filter	Jellyfish

<sup>1</sup>S=Satisfactory; M=Marginal; U=Un:


<sup>2</sup>A=Active; T=Transferred; TS=Temp

## **Appendix F**



**NEW YORK STATE  
DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF WATER**



 Department of Environmental Conservation		<b>New York State Department of Environmental Conservation</b> <b>Construction Site Inspection Report for SPDES MS4 General Permit GP-0-24-001</b>	
Project Name:		Date:	
Project Location:		Weather:	
Permit # (if any): <b>NYR</b>	Contacted: <input type="checkbox"/> Yes <input type="checkbox"/> No	Entry Time:	Exit Time:
Name of SPDES Permittee:	Inspection Type: <input type="checkbox"/> NOT <input type="checkbox"/> Complaint <input type="checkbox"/> Compliance <input type="checkbox"/> Referral	MS4 Operator Name:  MS4 Permit ID: NYR20A	
Phone Number(s):			
On-site Representative(s) and Company(s):			

**SPDES Authority**

Yes No N/A	Citation
1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Does the project have permit coverage?	GP-0-20-001: I.A & II. B
2. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Is a copy of the NOI and Acknowledgment Letter available on site and accessible for viewing?	GP-0-20-001: II.D.2
3. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Is a copy of the MS4 SWPPP Acceptance Form available on site and accessible for viewing?	GP-0-20-001: II.D.2
4. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Is an up-to-date copy of the signed SWPPP retained at the construction site?	GP-0-20-001: II.D.2. & III.A.4
5. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Is a copy of the SPDES General Permit retained at the construction site?	GP-0-20-001: II.D.2
6. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Does the NOI accurately report the number of acres to be disturbed?	GP-0-20-001: II.B.4

**SWPPP Content**

Yes No N/A	Citation
7. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Does the SWPPP describe and identify the erosion and sediment control measures to be employed?	GP-0-20-001: III.B.1.e
8. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Does the SWPPP provide an inspection schedule and maintenance requirements for the E&SC measures?	GP-0-20-001: III.B.1.i
9. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Does the SWPPP describe and identify the stormwater management practices to be employed?	GP-0-20-001: III.B.2
10. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Does the SWPPP identify the contractor(s) and subcontractor(s) responsible for each measure?	GP-0-20-001: III.A.6
11. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Does the SWPPP identify at least one trained individual from each contractor(s) and subcontractor(s) companies?	GP-0-20-001: III.A.6
12. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Does the SWPPP include all the necessary Contractor Certification Statements and signatures?	GP-0-20-001: III.A.6
13. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Is the SWPPP signed by the permittee?	GP-0-20-001: VII.H.2
14. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Is the SWPPP prepared by a qualified professional (if post-construction stormwater management required)?	GP-0-20-001: III.A.3
15. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Do the SMPs conform to the Enhanced Phosphorus Removal Standards (projects in TMDL watersheds)?	GP-0-20-001: III.B.3

**Recordkeeping**

Yes No N/A	Citation
16. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are self-inspections performed as required by the permit (weekly, or twice weekly for >5 acres disturbed)?	GP-0-20-001:IV.C.2.a. & b
17. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are the self-inspections performed and signed by a qualified inspector and retained on site?	GP-0-20-001:II.C.2.,IV.C.6 & VII.H.3
18. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Do the qualified inspector's reports include the minimum reporting requirements?	GP-0-20-001: IV.C.4
19. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Do inspection reports identify corrective measures that have not been implemented or are recurring?	GP-0-20-001: IV.C.5



**NEW YORK STATE  
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**Visual Observations**

<b>Yes No N/A</b>	<b>Citation</b>
20. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are all erosion and sediment control measures installed properly?	GP-0-20-001: VII.L
21. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are all erosion and sediment control measures being maintained properly?	GP-0-20-001: IV.A.1
22. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Was written authorization issued for any disturbance greater than 5 acres?	GP-0-20-001: II.D.3
23. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Have stabilization measures been implemented in inactive areas per Permit (>5acres) or ESC Standard?	GP-0-20-001: II.D.3.b & III.B.1.f
24. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Are post-construction stormwater management practices constructed/installed correctly?	GP-0-20-001: III.B.2
25. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Has final site stabilization been achieved and temporary E&SC measures removed prior to NOT submittal?	GP-0-20-001: V.A.2
26. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Was there a discharge from the site on the day of inspection?	
27. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Is there evidence that a discharge caused or contributed to a violation of water quality standards?	ECL 17-0501, 6 NYCRR 703.2 & GP-0-20-001: I.D

**Water Quality Observations**

Describe the discharge(s): location, source(s), impact on receiving water(s), etc.

Describe the quality of the receiving water(s) both upstream and downstream of the discharge:

Describe any other water quality standards or permit violations:



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DIVISION OF WATER



Additional Comments:

Photographs attached

Overall Inspection Rating: <input type="checkbox"/> Satisfactory <input type="checkbox"/> Marginal <input type="checkbox"/> Unsatisfactory	
Name/Agency of Lead Inspector:	Signature of Lead Inspector:
Names/Agencies of Other Inspectors:	

## **Appendix G**



## Monitoring Locations Inspection and Sampling Field Sheet

### Section 1: Background Data

Subwatershed:		Monitoring Location ID:	
Today's date:		Time (Military):	
Investigators:		Form completed by:	
Temperature (°F):	Rainfall (in.):	Last 24 hours:	Last 48 hours:
Latitude:	Longitude:	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial <input type="checkbox"/> Ultra-Urban Residential <input type="checkbox"/> Suburban Residential <input type="checkbox"/> Commercial		<input type="checkbox"/> Open Space <input type="checkbox"/> Institutional Other: _____ Known Industries: _____	
Notes (e.g., origin, if known):			

### Section 2: Monitoring Location Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____	Diameter/Dimensions: _____	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully  With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> Rip-Rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No		<i>If No, Skip to Section 5</i>	
Flow Description (if present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

### Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING MONITORING LOCATIONS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stopwatch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

## Monitoring Locations Inspection and Sampling Field Sheet

### Section 4: Physical Indicators for Flowing Monitoring Locations Only

Are Any Physical Indicators Present in the flow?  Yes  No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 – Easily detected	<input type="checkbox"/> 3 – Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 – Faint colors in sample bottle	<input type="checkbox"/> 2 – Clearly visible in sample bottle	<input type="checkbox"/> 3 – Clearly visible in flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 – Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 – Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 – Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

### Section 5: Physical Indicators for Both Flowing and Non-Flowing Monitoring Locations

Are physical indicators that are not related to flow present?  Yes  No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Monitoring Location Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

### Section 6: Overall Monitoring Location Characterization

Unlikely  Potential (presence of two or more indicators)  Suspect (one or more indicators with a severity of 3)  Obvious

### Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

### Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

## **Appendix H**



- NOTES:
1. Topographic survey prepared by Lockwood, Kessler & Bartlett, Inc., Consulting Engineers, Syosset, NY.
  2. Vertical datum is mean sea level.
  3. Topography is prepared by photogrammetric methods from photography taken December 27, 1973.

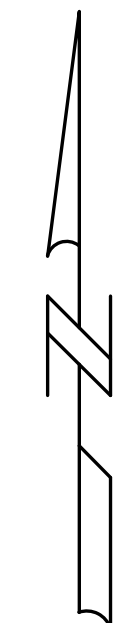
<p>STORM DRAINAGE MAP (SHEET 1)</p> <p><b>VILLAGE OF BUCHANAN EXISTING STORM DRAINAGE MAP</b></p> <p>VILLAGE OF BUCHANAN, WESTCHESTER COUNTY, NEW YORK</p>		<p>DATE: 12/28/11</p> <p>SCALE: 1" = 200'</p> <p>PROJECT NO: 1042-278-2020</p> <p>SHEET NO: 1 of 2</p>												
<p>REVISIONS:</p> <table border="1"> <thead> <tr> <th>NO.</th> <th>DATE</th> <th>DESCRIPTION</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	NO.	DATE	DESCRIPTION										<p><b>JAMES J. HAHN</b> ENGINEERING, P.C.</p> <p>Putnam Business Park 1889 Route 22 Brewster, New York 10899 Tel: (949) 278-2020</p>	
NO.	DATE	DESCRIPTION												



MATCH LINE - SHEET 1

VILLAGE OF BUCHANAN  
TOWN OF CORTLANDT

TOWN OF CORTLANDT



- NOTES:
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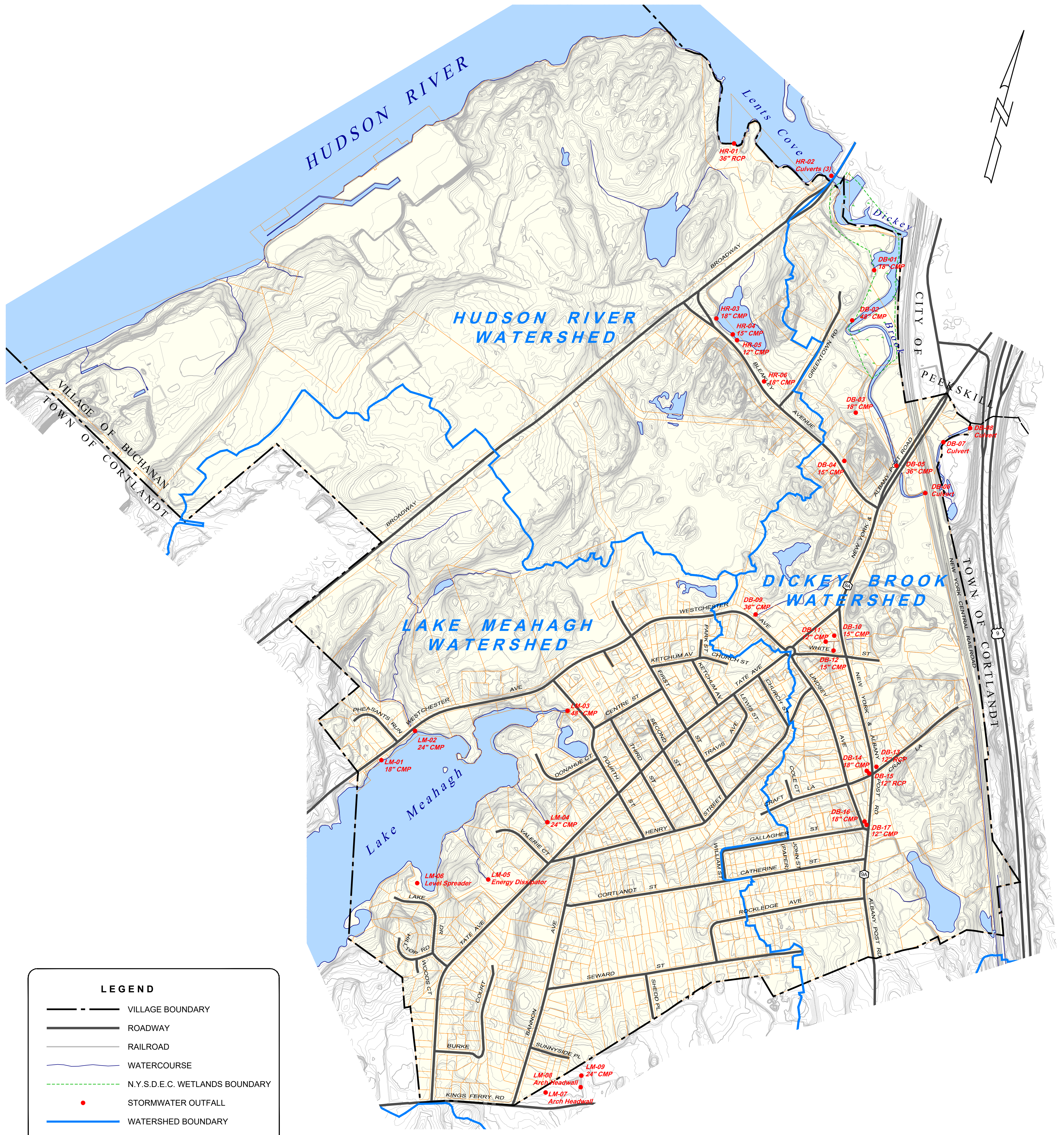
REV.		DATE	DESCRIPTION

STORM DRAINAGE MAP (SHEET 2)

**VILLAGE OF BUCHANAN  
EXISTING STORM  
DRAINAGE MAP**

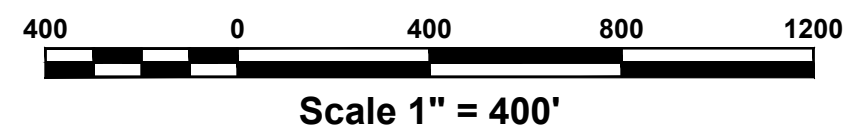
VILLAGE OF BUCHANAN, WESTCHESTER COUNTY, NEW YORK

	<b>JAMES J. HAHN</b> ENGINEERING, P.C.	Putnam Business Park 1889 Route 22 Brewster, New York 10899 Tel: (914) 278-2220
	SCALE 1" = 200'	DATE 12/28/11
SHEET NO. 2 OF 2	PROJECT NO. 	



**LEGEND**

- VILLAGE BOUNDARY
- ROADWAY
- RAILROAD
- WATERCOURSE
- - - - N.Y.S.D.E.C. WETLANDS BOUNDARY
- STORMWATER OUTFALL
- WATERSHED BOUNDARY



**NOTES**

1. Lake Meahagh (Water Index Number H-49a-P160) is included on the Final New York 2010 Section 303(d) List of Impaired/TMDL Waters, Part 1. The pollutant of impairment or stress is phosphorus sourced from "Onsite WTS, urban", classified 2002.
2. The Hudson River (Water Index Number H (portion 2b)) is included on the Final New York 2010 Section 303(d) List of Impaired/TMDL Waters, Part 2b. The pollutants of impairment or stress are PCBs and other toxics which may include mercury, dioxins/furans, PAHs, pesticides and other heavy metals sourced from "Contaminated Sed.", classified 1998.
3. Revisions are made to this map based on N.Y.S.D.E.C. audit, dated November 16, 2011.

TITLE <b>STORMWATER OUTFALL LOCATION MAP</b>														
PROJECT <b>VILLAGE OF BUCHANAN STORMWATER OUTFALLS</b>														
VILLAGE OF BUCHANAN, WESTCHESTER COUNTY, NEW YORK														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">REV.</th> <th style="text-align: left;">DATE</th> <th style="text-align: left;">DESCRIPTION</th> </tr> </thead> <tbody> <tr> <td>2</td> <td>11/02/2011</td> <td>NYSDEC COMMENTS</td> </tr> <tr> <td>1</td> <td>3/20/2006</td> <td>TOWN BOUNDARY</td> </tr> </tbody> </table>	REV.	DATE	DESCRIPTION	2	11/02/2011	NYSDEC COMMENTS	1	3/20/2006	TOWN BOUNDARY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">SCALE 1" = 400'</td> <td style="text-align: right;">DATE 07/05/2005</td> </tr> <tr> <td style="text-align: right;">DRAWING NO. -</td> <td style="text-align: right;">SHEET NO. 1 of 1</td> </tr> </table>	SCALE 1" = 400'	DATE 07/05/2005	DRAWING NO. -	SHEET NO. 1 of 1
REV.	DATE	DESCRIPTION												
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