MS4 Annual Report Cover Page

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

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

SPI	DES	ID						
N	Y	R	2	0	A	4	5	7

Choose one:

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

Fill in SPDES ID in upper right hand corner.

	1.1	_
Name of MS4		

V	i	1	1	a	q	е	0	f	W	е	s	t	h	a	m	р	t	0	n	В	е	a	С	h	
																-									

OR

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

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

Na	me c	of Si	ngle	e En	ıtıty												

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.

N	am	ne o	f Co	oali	tion														
																	ш	ш	
	Т																		
一	Ť																		=
																		1	

SPI	DES	ID			•			S	PΙ	ÞΕ	3
N	Y	R	2	0	А]	N	7	Ζ
SPI	DES	ID						S	PΓ)E	ż
N	Y	R	2	0	А]	N	7	Ζ
SPI	DES	ID						S	PΙ)E	į
N	Y	R	2	0	А]	N	7	Ζ
SPI	DES	ID						S	PΓ)E	ì
N	Y	R	2	0	А]	N	7	Z
SPI	DES	ID						S	PΓ)E	į
N	Y	R	2	0	А]	N	7	Ζ
SPI	DES	ID						S	PΓ)E	ij
N	Y	R	2	0	А]	N	7	Z

SPI	ES	ID					
N	Y	R	2	0	A		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	ES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	ES	ID					
N	Y	R	2	0	A		

SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	А		
SPI	DES	ID					
N	Y	R	2	0	A		

Cover Page 1 of 2



MS4 Annual Report Cover Page

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

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

1	1	
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 O A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 O A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 O A	NYR20A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 O A	N Y R 2 O A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 0 A	N Y R 2 0 A



MS4 Municipal Compliance Certification(MCC) Form

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

	SPL	DES	ID						
Name of MS4 Village of Westhampton Beach	N	Y	R	2	0	А	4	5	7

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)
- O A Joint Report

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

II Jo	oint	Kep	ort,	ent	er c	oali	tion	nai	ne:										
																			\equiv

MS4 Municipal Compliance Certification(MCC) Form

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

		_	SPI)ES	Ш						
Name of MS4	Village of Westhampton Beach		N	Y	R	2	0	А	4	5	7

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name	MI Last Name
M a r i a	Z Moore
Title	
M a y o r	
Address	
1 6 5 M i 1 1 R o a d	
City	State Zip
City WesthamptonBea	
Westhampton Bea	a c h N Y 1 1 9 7 8 -
WesthamptonBea	a c h N Y 1 1 9 7 8 -

MS4 Municipal Compliance Certification(MCC) Form

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

		_	SPI)ES	Ш						
Name of MS4	Village of Westhampton Beach		N	Y	R	2	0	А	4	5	7

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

Firs	t Na	ame														MI		Las	t Na	ame										
E	1	i	Z	a	b	е	t	h										L	i	n	d	t	v	i	t					
Titl	е																													
С	1	е	r	k	ı	Т	r	е	a	ß	u	r	е	r																
Ado	lres	s																												
1	6	5		M	i	1	1		R	0	a	d																		
City	7																			S	tate		Zip)						
City W	e	s	t	h	а	m	р	t	0	n		В	е	а	С	h						Y	Zip 1	1	9	7	8	_		
	е	S	t	h	a	m	р	t	0	n		В	е	a	С	h									9	7	8] -		
W	е	s e	t	h	a @	m	p e	t	o t	n h	a	B	е	a	С	h	b	е	a						9 g	7	8	_		
W eMa	e ail 1										а							e Cou		C	1 7	Y	1	1		7	8	_		

MS4 Municipal Compliance Certification(MCC) Form

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

_		_	SPI)ES	Ш						
Name of MS4	Village of Westhampton Beach		N	Y	R	2	0	A	4	5	7

Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

Firs	t Na	ıme													MI		Las	t Na	ame										
Title	е																												
D	&	В		Ε	n	g	i	n	е	е	r	S	а	n	d		А	r	С	h	i	t	е	С	t	S			
Add	lres	S																											
3	3	0		С	r	0	S	s	W	a	У	ន	Р	а	r	k		D	r	i	V	е							
City	7																		S	tate		Zip)						
W	0	0	d	b	u	r	У												1	1	Y	1	1	7	9	7	-		
W eMa		0	d	b	u	r	У													1	Y	1	1	7	9	7	_		
		0	d	b	u	r	У													N .	Y	1	1	7	9	7] -		
	ail	0	d	b	u	r	У										Cou	ınty			Y	1	1	7	9	7	-		

MS4 Municipal Compliance Certification (MCC) Form

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

		_																				SPI	<u>ES</u>	ID						
Name of	M	S4_	Vill	age	of V	Ves	thar	npto	on E	Beac	h											N	Y	R	2	0	A	4	5	7
Section	1 3	- F	ar	tn.	er	Inf	for	ma	atio	on																				
Did your											to c	com	ıple	te s	om	e oı	all	peı	mit	rec	quir	eme	ents	du	ring	g th	is r	epo	rtin	g
period?		1 .		c		. •	1) Ye	es	0	No
If Yes, consumation Subm										art	ner	. In	for	ma	tioı	າ ກາ	ovi	idea	1 in	ot	her	for	ma	ts v	vi11	no	t b	e		
accep	ted	. If	yoı	ur N	ΛS	4 c	oop	era	ted	wi	th	a co	oali	tioı	1, s	ubr	nit	one	sh	eet	wi	th t	he	nan	ne (of 1				
coalit If No, pr							•						-			eet	for	eac	h N	ΛS	4 in	the	e co	oali	tioı	1.				
					1101.	l + '	- C	CIU	110	auc	ni s	otat	CIII	CIII.	•															
Partner/Co	n	onN	Nam	e f		S	0	u	t	h	а	m	р	t	0	n														
Partner/Co		ion l	_		on't								<u> </u>									SPI	ES	Par	tne	r ID) - If	apı	lica	ıble
																						N	Y	R	2	0		4	5	4
Address																					_									
1 1 6		Η	a	m	р	t	0	n		R	0	a	d								_									
City S o u	t	h	а	m	n	t	0	n											ate J Y		Zip 1	1	9	6	8					
eMail	L C	11	a	111	р	C		11] [v 1				7	0	0	_				
CIVIAII																														
Phone																	Ιa	go 11	., D	indi	ng A	ara	ome	ant i	n 00	2001	don	00		
(6 3	1)	2	8	3	_	6	0	0	0											-002) Y		•	No
What tas	ks/i	rest	on	sib	iliti	es	are	sha	arec	l w	ith	thi	s pa	artn	er ((e.g	. N	IM	1 S	cho	01	Pro	gra	ms	or	Μι	ıltiı	ole	Tas	sks)?
		-											_																	
• MM1	S	•	Т	•	0	•	Р	•		Р	r	0	g	r	a	m														
• MM2	S	•	Т	•	0	•	Р	•		Р	r	0	g	r	а	m														
• MM3	G	I	S		М	а	р	р	i	n	g																			
O MM4																														
															l															
O MM5																													L	
O MM6																														
Addition	nal t	ask	s/re	esp	ons	ibi	litie	es																						
O Wate				•					teg	v B	est.	Ma	na	gen	ien	t Pi	raci	tice	s re	equ	irec	l fo	r N	1S4	s it	ı ir	npa	ire	d	
wate	ersh	eds	in	clu	ded	in	GP	-0-	08-	002	2 P	art	IX.																	

MS4 Municipal Compliance Certification(MCC) Form

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

	 PDE	SID							
Name of MS4 Village of Westhampton Beach	N Y	R	2	0	А	4	5	7	

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
Maria	Z	M o o r e
Title (Clearly print title of individual signing report)		
Mayor		
Signature		Date

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

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

URL

DRAFT

MS4 Annual Report Form

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

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

SPDES ID

		DIL	LO	ıD						
Name of MS4/Coalition	Village of Westhampton Beach	N	Y	R	2	0	А	4	5	7

									<u> </u>	<u>Va</u>	ter	• Q	ua	lity	yΊ	re	nd	<u>.S</u>											
The infor	matio	n in	this	sec	etio	n is	bei	ing	rep	orte	ed (che	ck o	one)	:														
On belOn belHo		a co	oalit	ion				but	ed	to t	his	rep	ort	? [
1. Has relat One.	ed to					-				•		-						_			-				eas	sure Ye		0	No
If Yes, cl	noose	one	of t	he 1	follo	owii	ng																						
O Report	(s) att	ache	d to	the	e an	nua	ıl re	por	t																				
O Web P				_				_																					
	Pleas	e pr	ovi	de	spe	cifi	c a	ddr	ess	of	pag	ge v	vhe	re 1	epo	ort(s) (can	be	acc	cess	sed	- n	ot l	on	ne p	age	e.	
	URL																												
	URL					l		l		I		I																	
	\vdash	+	+		\vdash	\vdash	-	\vdash	_	\vdash	_	\vdash		\vdash				_	\vdash		\vdash		\vdash	_	\vdash		_	=	=

URL

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.

	 SPL	DES	ID						
Name of MS4/Coalition Village of Westhampton Beach	N	Y	R	2	0	А	4	5	7

Minimum Control Measure 1. Public Ed	ucation 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 Manageme	ent Practices
Check all topics that were included in Education and Outreach de	uring this reporting period:
• Construction Sites	• Pesticide and Fertilizer Application
● General Stormwater Management Information	Pet Waste Management
 Household Hazardous Waste Disposal 	Recycling
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
● Infrastructure Maintenance	■ Trash Management
○ Smart Growth	• Vehicle Washing
Storm Drain Marking	● Water Conservation
● Green Infrastructure/Better Site Design/Low Impact Development	Wetland Protection
	○ None o o s e m g m t
2. Specific audiences targeted during this reporting period:	
Public Employees Contractors	
ResidentialDevelopers	
○ Businesses • General Public	
○ Restaurants ○ Industries	
● Other: ○ Agricultural	
Landscapers Other	

MCM 1 Page 1 of 4

MS4 Annual Report Form

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

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

SPDES ID

Nar	ne o	fΜ	S4/	Coa	litic	on V	⁷ illa	ge o	of W	Vest	ham	pto	n B	each	ı									N	Y	R	2	0	А	4	5	7
3.	W			rat ort	_			•								e to	a a	chie	eve	edı	uca	tio	n a	nd	out	tre	ach	go	als	du	rin	g
\circ	Con	stru	ıcti	on S	Site	Op	era	tors	s T1	rain	ed													#	# Tr	ain	ed					
\circ I	Dire	ct]	Ma	ilinį	gs																			#	Ma	ilin	gs					
• I	Kios	sks	or	Oth	er I	Disp	olay	'S																# I	Loca	atio	ns					1
\circ I	List-	-Sei	rve	S																					# I:	n Li	st					
\circ 1	Mai	ling	, Li	ist																					# I:	n Li	ist					
• 1	New	spa	ipe	r Ao	ds c	or A	rtic	eles																# I	Day	s Rı	ın					2
\circ I	Pub	lic	Ev	ents	/Pr	eser	ntati	ions	5															# /	Atte	nde	es					
• 5	Scho	ool	Pro	ogra	m																			# /	Atte	nde	es				3	0
07	ΓV	Spc	ot/P	rog	ran	ı																		# I	Day	s Rı	ın					
• I	Prin	ted	M	ater	ials	:																To	otal	# D i	istri	but	ed					
	Г			s (e.					n off			_ [_														I.					
	Ļ	V	1	1	1	a	g	е		H	а	1	1			_	_				_											
	Ļ	4	_	_		4		_								4	_		_		_											
	Ļ					4		4								4																
_	2.1																															
	Othe T				T.7	_		_	_	Б	_		<u> </u>	_	_	_	<u>.</u>															
		D	0	g	W	a	S	t	е	В	а	g	S	t	a	t	i	0	n	S												
• 7	Web	Pa	age		Pro			peci	ific	we	b ac	ldre	esse	S - 1	not	hon	ne j	page	e. (Con	tinu	ie o	n no	ext _]	pag	e if	ado	litio	onal	spa	ace	is
	URL	,			IICC	l	ı. 	Ι.								١.				_					,				_	-		
	W	W	W	•	W	е	S	t	h	a		р	t	0	n	b	е	a	С	h	٠	0	r	g	/	b	u	i		d	i	n
	g	_	a	n	d	-	Z	0	n	ļi —		9	/	s		0	r	m	-	W	a	t	е	r	-	m	a	n	a	g	е	m
	е	n	t	_	i	n	f	0	r	m	a	t	i	0	n	/																
	URL W	w	w		w	е	s	t	h	а	m	р	t	0	n	b	е	а	С	h		0	r	g	/	W	р	_	С	0	n	t

5

s W

a r

0

a d

S

1

p d

р

2

0 1 4

1

t i

V|i



MS4 Annual Report Form

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

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

					_															-			SPI	DES	ID						
ame	of M	[S4/	Coa	litic	n	/illa	ige (of W	Vest	ham	pto	n B	eacl	ı									N	Y	R	2	0	A	4	5	7
. W		Pag	ge c	con'	't.:		Pro	ovio	de s	spec	cifi	c w	eb	ado	lres	sses	s - n	ot i	hor	ne j	pag	e.									
W	w	w		W	е	s	t	h	а	m	р	t	0	n	b	е	а	С	h		0	r	g	/	b	u	i	1	d	i	n
g	-	a	n	d	-	Z	0	n	i	n	g	/	b	u	i	1	d	i	n	g	-	a	n	d	-	Z	0	n	i	n	g
-	a	р	р	1	i	С	а	t	i	0	n	_	f	0	r	m	ន	/													
UR	L				1																										
W	W	W	•	W	е	s	t	h	а	m	р	t	0	n	b	е	a	С	h	•	0	r	g	/	С	0	m	m	u	n	i
t	У	_	1	i	n	k	s	/	t	r	е	е	_	С	i	t	У	-	u	ន	a	/									
UR	L													1		1															
W	W	W	٠	W	е	s	t	h	а	m	р	t	0	n	b	е	a	С	h	٠	0	r	g	/	W	р	-	С	0	n	t
е	n	t	/	u	р	1	0	а	d	s	/	2	0	1	5	/	0	5	/	Т	r	е	е	_	W	a	1	k	_	В	0
0	k	1	е	t	•	р	d	f																							
UR	L																														
W	W	W	٠	W	е	s	t	h	a	m	р	t	0	n	b	е	а	С	h	٠	0	r	g	/	С	0	m	m	u	n	i
t	У	-	1	i	n	k	S	/																							
UR						_	_	h				_			h			_	h			70	~	/	<u> </u>		-m			20	i
W	W	W	•	W	е	S	t	h	a	m	р	t	0	n	b	е	a	С	h	•	0	r	a		С	0	m	m	u	n	
t	У	-	1	i	n	k	S /	/	W	a	t	е	r	-	С	0	n	S	е	r	V	a	t	i	0	n	-	i	n	f	0
r	m	a	t		0	n	/																								<u> </u>
UR W	W	w		W	е	s	t	h	а	m	р	t	0	n	b	е	a	С	h		0	r	g	/	С	1	е	r	k	s	_
0	f	f	i	С	e	/	d	е		a	r	t		е		t	_	0	f	_	р	u	b	1	i	C	_	w	0	r	k
s	/		_																		2	<u> </u>	~		_			_ ···			
	_																														
UR	L																														
																															1

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.

	S	'DE	S ID						
Name of MS4/Coalition Village of Westhampton Beach		1 A	R	2	0	А	4	5	7

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.

The Village Public Education and Outreach program will be tailored to describe topics related to the impacts of stormwater discharges on local water bodies, pollutants of concern and their sources, and the steps that can be taken to reduce pollutants in stormwater runoff and non-stormwater discharges. The Village program will make special note of the discharge of pathogens to to Quantuck Canal/Moneybogue Bay and Quantuck Bay.

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

Due to the seasonal nature of many of the residents in the Village, typical Phase II measures are not always effective or efficient. As a result, the Village has chosen to evaluate the number of kiosks/displays of stormwater information in the Village as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Education and Outreach program requirements. There is one kiosk/display of stormwater information in Village Hall.

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



D. Has your MS4 made progress toward this Measurable Goal during this reporting period?

• Yes O No

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

● Yes ○ No

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

The Village plans to continue evaluating the number of kiosks/displays of stormwater information in the Village as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Education and Outreach program requirements in the next reporting cycle. The Village will continue to update the kiosks/displays at Village Hall with stormwater/pollution prevention information as necessary in the next reporting cycle.

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.

SPDES ID

Name of MS4/Coalition Village of Westhampton Beach				N	Y	R	2	0	А	4	5	7
Minimum Control Measure 2.	Public Invo	olve	men	t/P	art	ici	<u>pa</u>	ıtic	<u>)n</u>			
The information in this section is being reported (check	k one):											
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this remainder. 	enort?											
110w many 1/154s continuated to this i	eport:											
1. What opportunities were provided for publi development, evaluation and improvement of (SWMP) Plan during this reporting period?	of the Stormy	vate	r Ma	nag			-		ran	n		
• Cleanup Events					# Ev	ent	s					2
● Comments on SWMP Received				# C	Comm	ent	s [0
Community Hotlines	Phone # (6	3 1)	2	8	8	-	1	6	5	4
Phone # ()	Phone # (6	3 1)	2	8	8	-[1	2	1	1
Phone # (Phone # ()				-				
Phone # ()	Phone # ()				-				
Phone # ()	Phone # ()		_		-				
Phone # ()	Phone # ()				-				
• Community Meetings				# .	Atten	dee	s				2	0
Plantings					So	ą. Ft	t.			2	7	0
O Storm Drain Markings					# D1	ain	s					
O Stakeholder Meetings				# .	Atten	dee	s					
O Volunteer Monitoring				1	#Ev	ent	s					
Other: C A C , B e a u t i f . C	C o m m .	,	L	е	а	f	Р	i	С	k	u	р
2. Was public notice of availability of this annu Program (SWMP) Plan provided?	ıal report an	d St	ormv	vato	er M	[an	ag		ent Ye		0	No
O List-Serve					# In	Lis	st [
O Newspaper Advertising				# :	Days	Rui	n [
○ TV/Radio Notices		,		# :	Days	Rui	n					
• Other: P o s t e d i n V i 1	l a g e	Н	a 1	1								

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

 $Name\ of\ MS4/Coalition \ \underline{ \ Village\ of\ Westhampton\ Beach}$



MS4 Annual Report Form

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

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

SPDES ID

YR

2

0 A

4

5 7

	e pr	33	- ~I														
RL			\top														
			+														
ID I				1		-											
RL																	
																	_
			_														L
RL																	
			+														Т
			+														
RL														 			
			+														_
RL			_		1												
																	Ī
RL			T														
			+														_
RL																	
	\vdash		+														H
			_														

Name of MS4/Coalition Village of Westhampton Beach



MS4 Annual Report Form

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

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

SPDES ID

YR

2

0 A

5

Ple	L(s)	pro	vid	e sp	eci	fic	ad	dre	ess(es)	wh	ere	e ne	otic	es	can	be	ac	ces	sec	l - 1	not	ho	me	pa	ge.	•		
JRL					1																								
	+																												
																													_
JRL																													
		+																										\vdash	_
																												L	
ЛRL																													
		+																											<u> </u>
																												<u></u>	
JRL			<u> </u>	Т																									
	_																											<u>_</u>	
JRL																							_				_		-
	+	+																											
	_																											H	
																												L	
JRL		_																										_	Ι
	_																											L	
JRL			-	-	-																			-					
IKL																													
+	+			<u> </u>				<u> </u>				<u> </u>		<u> </u>		<u> </u>							<u> </u>				<u> </u>	\vdash	
\perp	+		_	\vdash																								\vdash	
				1				1		1	1	1		l		l	l			1		1	1	1	1	1	1	1	

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.

		SPL)ES	ID						
Name of MS4/Coalition	Village of Westhampton Beach	N	Y	R	2	0	A	4	5	7

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.

• MS	54/C Dep				ffic	e										•	Aı	nnu	al I	Rep	ort		S	WN	1P 1	Plar	1	• (Con	nmei	nts
	С	1	е	r	k	1	S		0	f	f	i	С	е																	
	Add	lres	S																												
	1	6	5		M	i	1	1		R	0	a	d																		
	City	7																		_		Zip									
	W	е	S	t	h	а	m	р	t	0	n	В	е	а	С	h		1	1 .	Y		1	1	7	9	8	-				
	Pho	ne			1 . 1									1																	
	(6	3	1)	2	8	8	-	1	6	5	4																		
○ Lib	rary Add	, Ires:	S													0	Aı	nnu	al I	Rep	ort		S	WN	1P 1	Plar	1	\circ	Con	nmei	ıts
		1105	5																												
	City	7		-										-								Zip									
																											-				
	Pho	ne																_													
	()				-																						
○ Otl	ner Add	lres	S													0	Aı	nnu	al I	Rep	ort		\mathbf{S}^{T}	WN	1P 1	Plar	1	0	Con	nmei	1ts
	City	7																				Zip									
	Pho																										-				
	1110	ne																L									-				
	(ne)				-]													-				
• We	(UR	L:)				-								Aı	nnu	al I	Repo	ort) S	WM	(P)	Plar	- 1	0	Con	nmei	nts
• We	(UR	L:)				-							•	Aı	nnu	al I	Rep	ort		S	WM	1P 1	Plar	- 1	0(Com	nmei	nts
• We	(UR	L:)				-							•	Aı	nnu	al I	Repo	ort) S'	WM	1P 1	Plar	1	0(Con	nmei	nts
• We	(UR	L:)				-							•	Aı	nnu	al I	Rep	ort) S	WN	1P 1	Plar	1	0 (Com	nmei	nts
• We	(age)				-																				Con	nmer	nts
• We	(age) de	spe	cifi	ic a	- ddr	ress	of	paş	ge v	whee	ere	repo													Com	nmei	nts
● We	(age			de	spe	cifi	ic a	- ddr	ress	of	paş	ge v	whe	ere													ge.		nmei	

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.

		SPL	DES ID					
Name of MS4/Coalition Village of Westhampton Beach		N	YR	2	0	A 4	1 5	7
4.a. If this report was made available on the internet, what da	ate was it	po	sted?					
Leave blank if this report was not posted on the internet.			/		/			
4.b. For how many days was/will this report be posted?								
If submitting a report for single MS4, answer 5.a If submitt	ting a join	ıt re	eport,	ans	wer	5.b	•	
5.a. Was an Annual Report public meeting held in this report	ting perio	d?)		0	Yes		No
If Yes, what was the date of the meeting?			/		/			
If No, is one planned?					0	Yes		No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	tin	g to tl	his	rep	ort (duri	ng
this reporting period?					0	Yes	С	No
If No, is one planned for each?					0	Yes	С	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.					0	Yes		No

MS4 Annual Report Form

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

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

	_	SPL	DES	ID						
Name of MS4/Coalition Village of Westhampton Beach		N	Y	R	2	0	A	4	5	7

7. Evaluating Progress Toward Measurable Goals MCM 2

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

The Village Public Involvement and Participation program will incorporate stewardship activities that help to reduce pollutants of concern (i.e., the discharge of pathogens to Quantuck Canal/ Moneybogye Bay and Quantuck Bay) and encourage the general public, residents and businesses to become involved in stormwater management and environmental stewardship events.

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

The Village has chosen to evaluate the number of participants in the CAC as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Involvement and Participation program requirements. There are seven members of the CAC, which meet monthly to discuss topics such as downtown revitalization.

C. I	How many	times wa	as this	observation	measured or	evaluated i	n this	reporting	period?
------	----------	----------	---------	-------------	-------------	-------------	--------	-----------	---------

				1	
samp	les/	part	tici	pant	s/events

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

Yes	\bigcirc No
-----	---------------

(ex.:

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

Yes	\bigcirc No
-----	---------------

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

The Village plans to continue evaluating the number of participants in the CAC as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Involvement and Participation program requirements in the next reporting period. The Village will continue to support the CAC and other environmental stewardship organizations next year as applicable.

Name of MS4/Coalition



MS4 Annual Report Form

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

Village of Westhampton Beach

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

SPDES ID

YR

2

Minimum Control Measure 3. I	llicit Discharge Detection and Elimination
The information in this section is being reported (check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	nis report?
1. Enter the number and approx. percent of	of outfalls mapped: 4 5 # 1 0 0 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	reened for dry weather discharges during this inventory)?
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this
O Auto Recyclers	• Landscaping (Irrigation)
O Building Maintenance	○ Marinas
○ Churches	O Metal Plateing Operations
 Commercial Carwashes 	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
 Construction Vehicle Washouts 	○ Printing
○ Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
○ Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	○ Vehicle Fueling
O Industrial Process Water	O Vehicle Maint./Repair Shops
	○ None F i l l l , C o n s t r u c t i o n
O Sewersheds:	

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.

SPDES ID

Name of MS4/Coalition	Village o	f Westl	hamp	ton I	Beach	1									N	Y	R	2	0	А	4	5	7
3.b.What types of	illicit di	schar	ges]	hav	e be	en f	fou!	nd	du	rin	g tl	nis	rep	or	ting	g pe	erio	od?					
O Broken Lines From	n Sanitary	y Sewe	er		0	Ind	ustr	ial	Co	nne	ctio	ns											
O Cross Connections					0	Infl	ow/	'Infi	ltra	ıtio	n												
• Failing Septic Syst	ems				0	Pur	np S	Stat	ion	Fai	ilur	e											
O Floor Drains Conn	ected To	Storm	Sew	vers	0	Sar	itar	y S	ewe	er ()ve	rflo	WS										
O Illegal Dumping					0	Stra	aigh	t Pi	pe	Sev	ver	Dis	cha	rge	S								
Other: 4. How many illic	eit disch	arges/	note	enti		No		onn	eci	hior	ns h	l av	e h	een	de	tec	ted		ırin	og f	his		
reporting perio		ai gcs/	pou		41 111	uga	11 (<i>,</i> 1111		101	13 1	ıa v	CD	ccii	uc	····	ıcu	· ut	11 111	'g (0
5. How many illic	sit diaah	o nacce	hov	o ho	on a	ont	Fi ww	aad	di		207.1	hic	. 110	noi	atin	a r	· o w	i a d'	9	[\neg	0
o. 110 w many mix	ar discii	ar ges	1144 (0111		iicu	· u·		- 5 '		, 10	Po.		8 P	, (11	·ou	•	L			_
6. How many illic period?	eit disch	arges/	'illeg	gal c	onn	ect	ion	s ha	ave	be	een	eli	mir	ato	ed (dur	ing	ţ th	is r	epe	ort	ing	0
7. Has the storm of If No, approximately				_			-					-					od?)	•	Ye	S	0	No
8. Is the above in																				Ye	S	0	No
Is this informatif Yes, provide		ilable	on	the	web	?													0	Ye	S	•	No
Please provide sp	. ,	ddress	s of p	page	who	ere	ma	p(s)) ca	ın b	e a	cce	sse	d -	not	ho	me	pa	ge.				
URL						1																	
																			\perp	\dashv	=	=	
				<u> </u>															\dashv	=		=	

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.

alition	Villa		CTT)ES						
	l	age o	ot W	esth	nam	pto	n Be	each										N	Y	R	2	0	A	4	5
															-								•		
on't.:																									
ovide	spec	cific	ad	ldre	ess	of	paş	ge v	vhe	re	ma	p(s) c	an	be :	acc	ess	ed	- n	ot l	hon	ne	pag	ge	
						1	ı																		
++																									H
++																									
$\perp \downarrow \downarrow$																									
\pm																									T
++																									
$\perp \perp$																									
																									ovide specific address of page where map(s) can be accessed - not home page

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.

	S	'DE	S ID						
Name of MS4/Coalition Village of Westhampton Beach		1 A	R	2	0	А	4	5	7

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.

The Village Illicit Discharge Detection and Elimination program will focus on identifying, locating, eliminating, reducing and preventing illicit discharges to the maximum extent practicable, including the discharge of pathogens to Quantuck Canal/Moneybogue Bay and Quantuck Bay.

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

The Village has chosen to evaluate the number of illicit discharges confirmed as an indicator for measuring the overall effectiveness of the Village's compliance with the Illicit Discharge Detection and Elimination program requirements. There were no illicit discharges detected, confirmed and eliminated during this reporting cycle.

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

					1	
(ex.:	samp	les/	part	tici	pant	s/events

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

• Yes O No

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

● Yes ○ No

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

The Village will continue to follow the procedures for Illicit Discharge Detection and Elimination described in the CWP/USEPA Illicit Discharge Detection and Elimination: A Guidance Manual for Program Development and Technical Assessment. Illicit discharges will be investigated and eliminated according to the Village illicit discharge local law on a case-by-case basis.

Name of MS4/Coalition

DRAFT

MS4 Annual Report Form

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

Village of Westhampton Beach

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

YR

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 mechanism that provides equivalent protection to the NYS SPDES General I Stormwater Discharges from Construction Activities?		· ·
Stormwater Discharges from Construction Activities.	• 1cs	O NO
1b. Has each Town, City and/or Village contributing to this report documented to equivalent to a NYSDEC Sample Local Law for Stormwater Management as Sediment Control through either an attorney certification or using the NYSI	nd Erosio	
Analysis Workbook?		\circ NT
If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local 09/2004	Law. 03/2006	O NT
2. Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	○ No
3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs)	have been	
reviewed in this reporting period?		2
4. Does your MS4/Coalition have a mechanism for receipt and consideration of comments related to construction SWPPPs? • Ye	_	O NT
If Yes, how many public comments were received during this reporting period?		4
5. Does your MS4/Coalition provide education and training for contractors about SWPPP process?		al O No

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

Notices of Violation	#			2	O No Authority
O Stop Work Orders	#				O No Authority
O Criminal Actions	#				O No Authority
O Termination of Contracts	#				O No Authority
O Administrative Fines	#				O No Authority
O Civil Penalties	#				O No Authority
O Administrative Orders	#				O No Authority
O Enforcement Actions or Sanctions	#				
• Other	#			3	O No Authority

MS4 Annual Report Form

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

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

	SPL	DES	ID						
Name of MS4/Coalition Village of Westhampton Beach	N	Y	R	2	0	A	4	5	7

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1.	How many construction projects have been authorized for disturbances of one a during this reporting period?	icre or	more 2
2.	How many construction projects disturbing at least one acre were active in your during this reporting period?	r jurisd	iction 5
3.	What percent of active construction sites were inspected during this reporting p	period?	
4.	What percent of active construction sites were inspected more than once?	1 0	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use Construction Stormwater Inspection Manual? • Yes	the NY	S
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preven (SWPPPs) of construction projects that are subject to MS4 review and approva	1?	
	● Yes If your MS4 is Non-Traditional, are SWPPPs of construction projects made ava		O NT
		○ Yes	O No
	If Vestuse the following page to identify location(s) where SWPPPs can be accessed	1	

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.

6. con't.: Submit additional pages as needed. MS4/Coalition Office Department V i 1 1 a g e H a 1 1 Address 1 6 5 M i 1 1 R o a d City W e s t h a m p t o n B e a c h N Y 1 1 9 7 8 - Phone (6 3 1) 2 8 8 - 1 6 5 4 O Library Address City Tip Phone (1 0)	1 5 7
6. con't.: Submit additional pages as needed. MS4/Coalition Office Department V i 1 1 a g e H a 1 1 Address 1 6 5 M i 1 1 R o a d City W e s t h a m p t o n B e a c h N Y 1 1 9 7 8 - Phone (6 3 1) 2 8 8 - 1 6 5 4 City Address City Address City Address Other Address	
Submit additional pages as needed. ● MS4/Coalition Office Department V i l l a g e H a l l Address 1 6 5 M i l l R o a d City W e s t h a m p t o n B e a c h N Y 1 1 9 7 8 - Phone City Address City Phone (
Department V i 1 1 a g e H a 1 1	
V 1 1 a g e H a 1 1	
Address 1 6 5 M 1 1 1 R 0 a d City W e s t h a m p t o n B e a c h N Y 1 1 9 7 8 - Phone (6 3 1) 2 8 8 - 1 6 5 4 City City Address City City City City City City City Coty Change a c h N Y 2 1 1 9 7 8 - Phone City Coty Coty	
1 6 5	
City	
W e s t h a m p t o n B e a c h N Y 1 1 9 7 8 -	
(6 3 1) 2 8 8 - 1 6 5 4 O Library Address City Phone () Other Address	
O Library Address City Phone ())	
Address City Phone (Other Address	
City Zip Phone (
Phone (
Phone (
(
Address	
Address	
Address	
City	
Phone	
O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page URL(s).	ıge.
URL	
URL	

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.

	 SPL	DES	ID						
Name of MS4/Coalition Village of Westhampton Beach	N	Y	R	2	0	А	4	5	7

7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

The Village's Construction Site Stormwater Runoff Control program will provide equivalent protection to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activity. This includes reviewing SWPPPs submitted to the Village for projects disturbing an acre or greater of land. The review process will take note of any potential discharges of pathogens to Quantuck Canal/Moneybogue Bay and Quantuck Bay.

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

The Village has chosen to evaluate the number of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Village's compliance with the Construction Site Stormwater Runoff Control program requirements. The Village reviewed and commented on the two SWPPPs submitted to the Village in this reporting period.

C.	How many	z times	was this	observation	measured of	r evaluated in	this r	enorting i	neriod?
\sim	TIO II III COIL		TT CCD CILID	ONDEL TREETOIL	III CHOMI CH O	e continued and			,

				1	
samp	les/	part	tici	pant	s/events

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

Ves	\bigcirc No

(ex.:

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

Vо
١

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

The Village plans to continue evaluating the number of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Village's compliance with the Construction Site Stormwater Runoff Control program requirements in the next reporting cycle. The Village will review SWPPPs as they are submitted to the Village for comment and approval.

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.

	 SPD	ES	ID						
Name of MS4/Coalition Village of Westhampton Beach	N	Y	R	2	0	A	4	5	7

Minimum	Control Mea	asure 5. Post	-Construction	on Storn	<u>ıwater</u>	Manage	<u>ment</u>
The information in the	is section is being	ng reported (che	ck one):				
On behalf of an indOn behalf of a coaHow m	lition	tributed to this	report?				
1. How many and MS4/Coalition is						es has your	
		# Inventoried	# Inspections	# Tim Maintai			
Alternative Practice	es	2	0		0		
• Filter Systems		0	0		0		
• Infiltration Basins		1	2		1		
Open Channels		0	0		0		
Ponds		0	0		0		
Wetlands		0	0		0		
Other		1 5 2	1 5 2	1 5	2		
2. Do you use an observation BMPs, inspection		, •	abase, spreads	sheet) to ti	rack po	st-construc ○ Ye	
3. What types of a Development/E		-		-	nt Low	Impact	
O Building Codes	O Municipal C	Comprehensive P	lans				
Overlay Districts	Open Space	Preservation Pre	ogram				
○ Zoning	O Local Law o	or Ordinance					
○ None	• Land Use R	egulation/Zoning	g				
O Watershed Plans	Other Comp	orehensive Plan					
Other:	st.D	r a i n a	g e I m	pro	v e r	m e n t	s

MCM 5 Page 1 of 3

MS4 Annual Report Form

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

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

	SPDES ID
Name of MS4/Coalition Village of Westhampton Beach	N Y R 2 0 A 4 5 7
4a. Are the MS4s contributing to this report involved in a regional/water	ershed wide planning effort?
	○ Yes • No
4b. Does the MS4 have a banking and credit system for stormwater ma	nagement practices? ○ Yes • No
	O Yes • No
4c. Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormw	•
	○ Yes • No
4d. How many stormwater management practices have been implement reporting period?	ted as part of this system in this
5. What percent of municipal officials/MS4 staff responsible for progr	•
5. What percent of municipal officials/MS4 staff responsible for progressing on Low Impact Development (LID), Better Site Design (BS Infrastructure principles in this reporting period?	•

MS4 Annual Report Form

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

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

	S	'DE	S ID						
Name of MS4/Coalition Village of Westhampton Beach		1 A	R	2	0	А	4	5	7

6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

The Village's Post-Construction Stormwater Management program will address stormwater runoff from regulated (i.e., land disturbances of an acre or greater) new development and redevelopment projects to the Village's municipal separate storm sewer system.

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

The Village will add BMPs to the inventory as necessary and plans to evaluate the number of BMPs inventoried as an indicator for measuring the overall effectiveness of the Village's compliance with the Post-Construction Stormwater Management program requirements. There are 155 Village-owned post-construction stormwater management practices in the inventory.

C. How many times was this observation measured or evaluated in this reporting p	eriod?
--	--------

(ex.: samples/participants/events)

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

● Yes ○ No

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

● Yes ○ No

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

The Village plans to continue to evaluate the number of post-construction stormwater management practices inventoried as an indicator for measuring the overall effectiveness of the Village's compliance with the Post-Construction Stormwater Management program requirements in the next reporting cycle. The Village will add applicable BMPs to the inventory as necessary in the next reporting period.

MS4 Annual Report Form

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

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

		SPD	DES	ID						
Name of MS4/Coalition	Village of Westhampton Beach	N	Y	R	2	0	А	4	5	7

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
On behalf of an individual MS4On behalf of a coalition	
How many MS4s contributed to 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.

Self-Assessment
Operation/Activity/Facility
performed within the past 3

		periorn	ca within	tific past 5
Operation/Activity/Facility	Addressed i	n SWMP?	<u>vears?</u>) -
Street Maintenance	• Yes	○ No	. • Yes	\bigcirc No
Bridge Maintenance	O Yes	• No	. O Yes	No
Winter Road Maintenance	• Yes	○ No	. • Yes	○ No
Salt Storage	• Yes	○ No	. • Yes	○ No
Solid Waste Management	• Yes	○ No	. • Yes	\bigcirc No
New Municipal Construction and Land Disturba	nce • Yes	○ No	. • Yes	\bigcirc No
Right of Way Maintenance	O Yes	• No	. O Yes	No
Marine Operations		○ No	. • Yes	○ No
Hydrologic Habitat Modification		• No	. O Yes	No
Parks and Open Space	_	○ No	. • Yes	\bigcirc No
Municipal Building	_	○ No	. • Yes	○ No
Stormwater System Maintenance		○ No	. • Yes	○ No
Vehicle and Fleet Maintenance	• Yes	○ No	. • Yes	\bigcirc No
Other	• Yes	○ No	. • Yes	○ No

MS4 Annual Report Form

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

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

	SPDES ID
Name of MS4/Coalition Village of Westhampton Beach	N Y R 2 0 A 4 5 7
2. Provide the following information about municipal operate	tions good housekeeping programs:
• Parking Lots Swept (Number of acres X Number of times swep	# Acres 6 0
• Streets Swept (Number of miles X Number of times swept)	# Miles 2 0 0
• Catch Basins Inspected and Cleaned Where Necessary	# 1 2 2
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	# 1 5 3
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 N times applied to the nearest tenth.) 	Wumber of # Acres 0.0
3. How many stormwater management trainings have been p	provided to municipal employees
during this reporting period?	
4. What was the date of the last training?	0 4 / 3 0 / 2 0 1 9
5. How many municipal employees have been trained in this	reporting period?
6. What percent of municipal employees in relevant position stormwater management training?	s and departments receive
· · · · · · · · · · · · · · · · · · ·	

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.

	_	SPL)ES	ID						
Name of MS4/Coalition Village of Westhampton Beach		N	Y	R	2	0	А	4	5	7

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.

The Village Pollution Prevention and Good Housekeeping for Municipal Operations program will address operations that collect, store or release sediments, wastes or other potential pollutants with special consideration for the discharge of pathogens to Quantuck Canal/Moneybogue Bay and Quantuck Bay.

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

The Village has chosen to evaluate the number of catch basins inspected annually as an indicator for measuring the overall effectiveness of the Village's compliance with the Pollution Prevention and Good Housekeeping for Municipal Operations program requirements. The Village inspected and cleaned 122 catch basins during this reporting cycle.

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

				1	
samp	les/	'part	tici	pant	s/events

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

7 I	
Yes	\bigcirc No

(ex.:

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

• Yes C	No
---------	----

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

The Village plans to continue the ongoing catch basin inspection and cleaning schedule during the next reporting cycle. The Village will continue to follow the best management practices outlined in the NYSDEC Municipal Pollution Prevention and Good Housekeeping Assistance Document as necessary.