

### **MS4 Annual Report Cover Page**

MCC form for period ending March 9, 2 0 2 3

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

SPI	DES	ID						
N	Y	R	2	0	А	4	5	7

2

2

2

2

0 A

0 A

0 A

0 A

0 A

#### **Choose one:**

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

Fill in SPDES ID in upper right hand corner.

I III III OI DES ID	m apper	118111	110110	• • • • • • • • • • • • • • • • • • • •
Name of MS4				

#### OR

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

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

1	ne o	f S <sub>1</sub>	ngle	e En	tıty												

#### **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.

Naı	ne c	of Co	oali	tion													
																$\sqsubseteq$	_
																Ш	

SPI	DES	ID						S	PD	ES	ID				•	·		,	SPI	DES	ID	
N	Y	R	2	0	A			]	N	Y	R	2	0	А					N	Y	R	
SPI	DES	ID						S	PD	ES	ID								SPI	DES	ID	_
N	Y	R	2	0	A			]	N	Y	R	2	0	A					N	Y	R	
SPI	DES	ID						S	PD	ES	ID								SPI	DES	ID	
N	Y	R	2	0	A			]	N	Y	R	2	0	А					N	Y	R	
SPI	DES	ID						S	PD	ES	ID								SPI	DES	ID	
N	Y	R	2	0	A			]	N	Y	R	2	0	А					N	Y	R	
SPI	DES	ID						S	PD	ES	ID						_		SPI	DES	ID	
N	Y	R	2	0	A			]	N	Υ	R	2	0	А					N	Y	R	
SPI	DES	ID						S	PD	ES	ID						_		SPI	DES	ID	
N	Y	R	2	0	A			]	N	Y	R	2	0	А					N	Y	R	

Cover Page 1 of 2



## MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 2 3

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

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



MCC form for period ending March 9, 2 0 2 3

		SPL	)ES	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:										
		·																	



MCC form for period ending March 9, 2 0 2 3

	SPL	)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:

- 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

Firs	st Na	ıme														MI		Las	t Na	ame											
М	a	r	i	a												Z		M	0	0	r	е									
Titl	e																														
M	a	У	0	r																											
Ado	dres	S																													
1	6	5		M	i	1	1		R	0	а	d																			
				-																											
City	у																			S	tate		Zip	)				_			
City W	e	S	t	h	а	m	р	t	0	n		В	е	a	С	h						Y	Zip 1	1	9	7	8	_			
	е	s	t	h	a	m	р	t	0	n		В	е	а	С	h									9	7	8	_			
W	е	s	t	h	a	m	р	t	o e	n @	W	В	е	a	c	h	m	р	t						9 C	7 h	8	•	r	g	
W eMa	e ail a										W							p Cou		0	1 7	Y	1	1					r	g	



MCC form for period ending March 9, 2 0 2 3

	_	SPL	)ES	Ш						
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
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

Firs	st Na	ame														MI		Las	t Na	ame												
В	r	a	d															Н	а	m	m	0	n	d								
Titl	e																															
В	u	i	1	d	i	n	g		а	n	d		Z	0	n	i	n	g		А	d	m	i	n	i	S	t	r	а	t	0	r
Ado	lres	S																														
1	6	5		M	i	1	1		R	0	а	d																				
City	У																			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	а	m	р	t	0	n		В	е	a	С	h									9	7	8	_				
W	е	s	t	h	a	m	p d	t @	O W	n e	S	B	e	a	c m	h p	t	0	n						9	7	8 r	<b>-</b>				
W eMa	e ail h										ß							O Cou		b	N ?	Y	1	1			 					



MCC form for period ending March 9, 2 0 2 3

	 SPI	DES	SID						
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	ame													_	MI		Las	t Na	ame										
М	е	r	е	d	i	t	h									A		В	У	е	r	s								
Titl	e																													
D	&	В		Ε	n	g	i	n	е	е	r	s		a	n	d		А	r	С	h	i	t	е	С	t	s			
Add	lres	S																												
3	3	0		С	r	0	s	s	W	а	У	S		Р	a	r	k		D	r	i	v	е							
~																							7.							
City	/																			<u> </u>	tate		Zip	)				_	 _	
W	0	0	d	b	u	r	У															Y	21 <u>r</u>	1	7	9	7	_		
	0	0	d	b	u	r	У																		7	9	7	_		
W	0	О У	d e	b	u	(a)	У	b	_	е	n	g	•	С	0	m									7	9	7	_		
W eMa	o ail b							b	_	е	n	g	•	С	0	m		Соц	inty	I					7	9	7	<b>-</b>		



MCC form for period ending March 9, 2 0 2 3

Name of	MS	S4	Vill	age	of V	Wes	thaı	npto	on E	Beac	h											SPL N	Y Y	R	2	0	А	4	5	7
Section	1 3	- F	ar	tn:	er i	Inf	for	ma	atio	on																				
Did your											to c	com	ple	te s	om	e or	all	pe	rmi	t re	quir	eme	ents	du	ring	g th	is r	epo	rtin	g
period?		1.		0		. •	1	1																			) Y∈	es	0	No
If Yes, consumation Subm	-									vart	ner	In	for	mai	tion	111	·OV:	ide	d ii	ı ot	her	for	ma	te v	x7i11	no	t h	<b>a</b>		
accep			_						_							_														
coali			•				-								-															
If No, pr	oce	ed 1	to S	Sect	tion	4	- C	erti	fica	atio	n S	Stat	em	ent.																
Partner/Co	aliti	ion N	Jam	ie																										
TOW	n		0	f		S	0	u	t	h	a	m	р	t	0	n														
Partner/Co	alit	ion l	Van	ne (c	on't	.)															· · · ·	SPI	ES	Par	tne	r ID	- If	app	lica	ble
																						N	Y	R	2	0	А	4	5	4
Address											1																			
1 1 6		Н	a	m	р	t	0	n		R	0	а	d																	
City																		1 [	tate		Zip									
S o u	t	h	a	m	p	t	0	n										1	1	Y	1	1	9	6	8	-				
eMail	1																													
Phone		1				]	_				1										ng A					cor	dan	ce		
( 6 3	1	)	2	8	3	_	6	0	0	0							wi	th (	GP-(	)-08	-002	. Pa	rt I\	V.G.	.?	С	Ye	es		No
What tas	ks/1	resp	on	sib	iliti	es	are	sha	arec	l w	ith	this	s pa	ırtn	er (	(e.g	,. N	ſМ	1 S	cho	ool l	Pro	gra	ms	or	Mι	ıltij	ole	Tas	ks)
• > 0.61	S		Т				Р			Р	70		~	300																
• MM1	۵	•	1	•	0	•	P	•		P	r	0	g	r	a	m														
• MM2	S	•	Т	•	0		Р	•		Р	r	0	g	r	a	m														
• MM3	G	I	S		M	a	р	р	i	n	g																			
O MM4																														
O MM5																														
<b>A</b> 1 D 12										_	l .																			
• MM6	Т	r	a	n	S	f	е	r		S	t	а	t	i	0	n														
Addition	al t	ask	s/re	esp	ons	ibi	litie	es																						
O Wate	ersl	hed	Im	pro	ven	nen	t S	trai	eg	) B	est.	Ma	naș	gem	ien	t Pi	raci	tice	es r	equ	irec	l fo	r N	<b>1</b> S4	s ii	ı in	npa	ire	d	
wate									0				_							_							-			



MCC form for period ending March 9, 2 0 2 3

		SPL	)ES	עוו						
Name of MS4	Village of Westhampton Beach	N	Y	R	2	0	A	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
M a r i a	Z	M o o r e
Title (Clearly print title of individual signing report)		
M a y o r		
Signature		Date

The annual report form and any attachments can be sent to the DEC Central Office clicking the Submit Form link below, or by sending it directly to: MS4compliance@dec.ny.gov. All submissions must include the SPDES ID in the title and must be complete before hitting the Submit Form link below:

#### **Submit Form**

If unable to submit electronically, hardcopy submissions can be sent to:

Bureau of Water Compliance Division of Water 4th Floor 625 Broadway Albany, New York 12233-3505



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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

																			SPI	DES	$^{\rm ID}$						
Name of M	S4/Coa	lition	Villa	age o	of We	esthai	npto	n Be	each	1									N	Y	R	2	0	А	4	5	7
							<u> </u>	<u>Wa</u>	ter	· Q	ua	lity	yΊ	re	nd	S											
The inform	nation	in thi	s se	ction	ı is t	eing	rep	orte	ed (	che	ck c	ne)	:														
On beha On beha		coal	ition			tribu	ted	to t	his	rep	ort	? [															
One.	ed to s	torm	ıwat	ter?	If n	10t, :				_						_			_				eas	ure Ye		•	No
If Yes, ch																											
O Report(						-																					
O Web Pa			_	-	-	_											1			1		. 1					
	Please	prov	'ide	spec	CITIC	add	ress	10	pag	ge v	vhe	re 1	epo	ort(	s) (	can	be	acc	ess	sed	- n	ot i	ion	ie p	age	e.	
]	URL																										
	URL																										
[																											
l 1	URL					_																					
[					$\overline{}$																						
Į.	URL					_																		ш		Ш	
					$\exists$																						
[	+		+		_	+	+													<u> </u>				H		Н	



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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

Name of MS4/Coalition Village of Westhampton Beach	SPDES ID  N Y R 2 0 A 4 5 7
Minimum Control Measure 1. Public Ed	ducation and Outreach
The information in this section is being reported (check one):	<del></del>
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this report?</li> </ul>	
1. Targeted Public Education and Outreach Best Managen	nent Practices
Check all topics that were included in Education and Outreach	during this reporting period:
1	
• Construction Sites	• Pesticide and Fertilizer Application
• General Stormwater Management Information	Pet Waste Management
<ul> <li>Household Hazardous Waste Disposal</li> </ul>	<ul><li>Recycling</li></ul>
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
Infrastructure Maintenance	<ul><li>Trash Management</li></ul>
<ul><li>Smart Growth</li></ul>	<ul><li>Vehicle Washing</li></ul>
Storm Drain Marking	<ul><li>Water Conservation</li></ul>
O Green Infrastructure/Better Site Design/Low Impact Development	<ul><li>Wetland Protection</li></ul>
Other:	○ None
Septic; Don't Feed Wat	e r f o w l S i g n s
2. Specific audiences targeted during this reporting period	:
Public Employees Contractors	
<ul><li>Residential</li><li>Developers</li></ul>	
○ Businesses	

• Other:

O Restaurants

Agricultural

○ Industries

Во а t e r s

Other

Name of MS4/Coalition



## **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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

N Y R

2

0 A

3.	Wh this															e to	) ac	chie	eve	ed	uca	tio	n a	nd	ou	tre	ach	go	als	du	ırin	ıg
$\circ$ C	onst	ruc	ctio	n S	Site	Op	era	tors	5 T1	ain	ed													7	# Tr	aine	ed					
$\circ$ D	irec	t N	1ai	ling	gs																			#	Ma	ilin	gs					
• K	iosk	cs c	or C	Oth	er I	Disp	olay	S																# ]	Loca	atio	ns					1
$\circ$ L	ist-S	Serv	ves																						# I	n Li	ist					
$\circ$ M	aili	ng	Lis	st																					# I	n Li	ist					
• N	ews	paj	er	Ac	ls c	or A	rtic	les																# ]	Day	s Rı	ın					2
• Pi	ablio	c E	Eve	nts	/Pre	eser	ıtati	ions	S															# 1	Atte	nde	es				5	0
$\circ$ So	choc	ol F	ro	gra	m																			# 1	Atte	nde	es					
$\circ$ T	V S	pot	/Pr	ogı	ram	ı																		# 1	Day	s Rı	ın					
P <sub>1</sub>																						To	otal	# D	istri	but	ed					
									n off		, kio	T İ	_	_																		
	V	-	i	1	1	a	g	е		Η	a	1	1	4					_		_											
		Ť	Ť		Ť			T																								
• O	∟ ther	 ::																														
	P	) 6	9	t	W	a	s	t	е	В	a	g		S	t	a	t	i	0	n	s											
• W	eb :	Pag	ge:			vid edec	•	peci	ific	we	b ac	ldre	esse	S - 1	not	hor	ne j	pag	e. (	Con	tinu	ie o	n n	ext j	pag	ge if	ade	ditio	onal	l sp	ace	is
		t	t	р	s	:	/	/	w	е	s	t	h	a	m	р	t	0	n	b	е	a	С	h		0	r	g	/	s	W	m
-	p a	<u></u>	r	_	m	s	_	4	-	a	n	n	u	a	1	_	r	е	р	0	r	t	/									
F		+																	_													
L											1																					
	RL h t	tΤ	t	р	s	:	/	/	w	е	s	t	h	a	m	р	t	0	n	b	е	а	С	h		0	r	g	/	m	u	n
F	_	+	_	p	a	1	-	C	0	d		s	/			12												ر	,	<u> </u>		



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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 Bo	eacl	1									Ν	Y	R	2	0	A	4	5	7
. W		Paş	ge o	con'	't.:		Pro	ovio	de s	spec	cifi	c w	eb	ado	lres	sses	s - r	ot !	hor	ne j	pag	e.									
h	t	t	р	s	:	/	/	W	е	s	t	h	a	m	р	t	0	n	b	е	а	С	h	•	0	r	g	/	f	r	е
đ	u	е	n	t	1	У	-	a	s	k	е	d	-	q	u	е	s	t	i	0	n	s	-	f	а	q	/				
URI																										I		<u> </u>			
h	t	t	р	S	:	/	/	W	е	s		h		m	р	t	0	n	b	е	a	С	h	•	0	r	g	/	d	е	р
a	r	t	m	е	n	t	s	/	р	u	b	1	i	С	-	W	0	r	k	s	/							_			L
URI h	t	t	р	s	:	/	/	s	t	0	r	a	g	е		g	0	0	g	1	е	a	р	i	s		С	0	m	/	р
r	0	u	d	С	i	t	У	/	W	е	s	t	h	a	m	р	t	0	n	b	е	a	С	h	n	У	/	u		1	0
a	d	s	/	2	0	2	2	/	1	1	/	F	a	1	1	-	L	е	a	f	_	P	r	0	g	r	a	m	_	2	0
URI	[,																														
2	2		р	d	f																										
URI	L													1																	
h	t	t	р	s	:	/	/	W	е	s	t	h	a	m	р	t	0	n	b	е	a	С	h	٠	0	r	g	/	С	0	n
s	е	r	V	a	t	i	0	n	-	a	d	V	i	S	0	r	У	-	С	0	u	n	С	i	1	/					L
																															L
URI	L																														
-																															
LURI	· ·																														



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.

	SPL	)ES	עו						
Name of MS4/Coalition Village of Westhampton Beach	N	Y	R	2	0	A	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.

	Harr many	times xx	roa this	absorvation	maggined on	ovaluated in	a thic	nonauting naviad?
v.	now many	umes w	as uns	observation	measured or	evaluateu II	1 11115	reporting period?



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



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.

SPDES ID

Name of MS4/Coalition Village of Westhampton Beach					N	Y	R	2	0	А	4	5	7
Minimum Control Measure 2. P	ublic In	VO	lve	me	nt/I	Par	tici	ipa	ıtic	<u>n</u>			
The information in this section is being reported (check of	one):							_					
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> </ul>	a.ut?												
How many MS4s contributed to this repo	ort!												
1. What opportunities were provided for public p development, evaluation and improvement of (SWMP) Plan during this reporting period? (	the Storn	nw	atei	·Ma	ınaş					ran	1		
• Cleanup Events						# E	ven	ts					2
Comments on SWMP Received					# (	Comi	men	ts					0
Community Hotlines	Phone #	(	6	3 1	. )	2	8	8	-	1	6	5	4
Phone # (	Phone #	(	6	3 1	. )	2	8	8	-[	3	4	8	3
Phone # ( ) -	Phone #	(	6	3 1	. )	2	8	8	-	1	2	1	1
Phone # ( ) -	Phone #	(	6	3 1	. )	2	8	3	-	6	0	0	0
Phone # (	Phone #	(			)				-				
Phone # ( ) -	Phone #	(			)				-				
<ul><li>Community Meetings</li></ul>					#	Atte	ndee	es				5	0
○ Plantings						S	sq. F	t.					
O Storm Drain Markings						# <u>C</u>	rair	ıs					
O Stakeholder Meetings					#	Atte	ndee	es					
O Volunteer Monitoring						# E	ven	ts					
Other: C A C ; B e a u t i f . C	m t e	;		Le	a	f		Р	i	С	k	u	р
2. Was public notice of availability of this annual Program (SWMP) Plan provided?	l report a	and	Sto	orm	wat	er N	Aar	ıag	•	ent Ye			No
○ List-Serve						# I	n Li	st					
O Newspaper Advertising					#	Day	s Ru	ın					
○ TV/Radio Notices					#	Day	s Ru	ın					
• Other: Posted in Vill	a g e		Н	a   1	1								
• Web Page URL: Enter URL(s) on the following two	o pages.												

MCM 2 Page 1 of 6

Name of MS4/Coalition Village of Westhampton Beach



## **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 2 \begin{vmatrix} 3 & 0 \end{vmatrix}$ 

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

4

5 7

RL		vide																		
																				F
																				<u>_</u>
RL		•	•	•	•	•	•	•	•	•	•							•	•	
+																				_
	_		_																	_
RL																				
	+																			_
																				_
RL																				
$\rightarrow$	_																			
RL																				
																				$\overline{}$
																				_
RL																				
																				_
RL				1																
1 1																				L
																				_

Name of MS4/Coalition Village of Westhampton Beach



## **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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

U P	RI leas	ı(s) se p	cor rov	ı't.: ⁄ide	: e sp	eci	ific	ad	dre	ess(	es)	wh	ier	e ne	otic	es	can	ı be	e ac	ces	sec	<b>l</b> - 1	not	ho	me	pa	ıge.			
UR		1			1					`																1	0			
_	-	<u> </u>																											_	
JR	L							1																				1		
		+																												
JR	L																													
		+																											_	
		-				<u> </u>	1	1		<u> </u>		<u> </u>					l										L	l		
JR	L	1					1	1										I				I						1		_
																	<u> </u>									<u> </u>				
JR	L																													
_	+	+																											$\vdash$	_
							1							l																_
JK	L																													
					<u> </u>																								<u> </u>	
_																													$\vdash$	
JR	L																													
		+							<u> </u>		<u> </u>		<u> </u>		<u> </u>															
	_	_								_																			<u> </u>	

Name of MS4/Coalition Village of Westhampton Beach



## **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.

SPDES ID

N | Y | R | 2 | 0 | A

3.	Whe Prog				-						-							-						M	ana	age	me	nt		
	Ente whet																													d
• N	AS4/C	Coal	itio	n C			-													Rep			•			Plar				nments
	C	parti 1	nen e	r	k	ı	s		0	f	f	i	С	е																
	Ad	dres	S																											
	1 Cit	6	5		M	i	1	1		R	0	а	d									7:								
	W	Ť	s	t	h	а	m	р	t	0	n	В	е	а	С	h		1	N .	Y		Zip 1	1	7	9	8	_			
	Pho	one						_						1				L												
	(	6	3	1	)	2	8	8	_	1	6	5	4																	
$\circ$ I	ibrar <u>Ađ</u>	y dres	S														) <b>A</b>	nnu	al l	Rep	ort	(	) S	WN	<b>1</b> P :	Plar	1	0	Con	nments
	Cit	<u>y</u>	I															Г				Zip					1			
																											-			
	Pho	one			1				1					1																
	(				)				-																					
$\circ$	Other Ad	dres	S														) <b>A</b>	nnu	al l	Rep	ort	(	$\circ$ S	WN	<b>/IP</b> :	Plar	1	0	Con	nments
	Cit	У															· I			_	•	Zip					1			
																											-			
	Pho	one			1 、				1					1																
	(				)				_																					
• 7	Veb P	age	UR	L:													A	nnu	al l	Rep	ort		S	WN	<b>1</b> P :	Plar	1	0	Con	nments
	Ple	ease	∟ e pr	OVi	ide	spe	cif	ic a	ıddı	ess	of	pa	ge '	whe	ere	rep	ort	car	ı be	e ac	ces	sec	1 - 1	lot	hoı	me	pag	ge.		
○ e	Mail		•			•										•													Con	nments



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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

	<u>S</u>	PD	ES ID					
Name of MS4/Coalition Village of Westhampton Beach	]	N	YR	2	0 2	4	5	7
<b>4.a.</b> If this report was made available on the internet, what date we Leave blank if this report was not posted on the internet.	was it	po	sted?		/[			
4.b. For how many days was/will this report be posted?								
If submitting a report for single MS4, answer 5.a If submitting	a joint	t re	port,	ans	wer	5.b		
<b>5.a. Was an Annual Report public meeting held in this reporting</b> If Yes, what was the date of the meeting?	perio	<b>d?</b>	/		/[	Yes		No
If No, is one planned?					0	Yes	•	No
5.b. Was an Annual Report public meeting held for all MS4s con-	tribut	ting	g to tl	nis 1	repo	rt d	urin	ıg
this reporting period?					0	Yes	0	No
If No, is one planned for each?					0	Yes	0	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



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.

_		SPL	)ES	ΙD						
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 Waterfront Advisory Committee (WAC) as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Involvement and Participation program requirements. There are 12 members of the Waterfront Advisory Committee which assist the Board of Trustees and vendor selected to complete the Local Waterfront Revitalization Plan (LWRP).

	Harr many	times xx	roa this	absorvation	maggined on	ovaluated in	a thic	nonauting naviad?
v.	now many	umes w	as uns	observation	measured or	evaluateu II	1 11115	reporting period?

(ex.: samples/participants/events)

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

• Yes O No

E. Is your MS4 on schedule to meet the deadline set forth 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 participants in the WAC 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 WAC 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,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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):
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to the</li> </ul>	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
<ul> <li>Commercial Carwashes</li> </ul>	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
<ul> <li>Construction Vehicle Washouts</li> </ul>	○ Printing
O 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
Other: C e m e n t P l a n t ;	○ None   F i 1 1 ; C o n s t r u c t i o n
O Sewersheds:	



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} 2 \begin{vmatrix} 3 \end{vmatrix}$ 

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	Westh	ampto	n Be	ach									N	Y	R	2	0 .	A	4	5	7
3.b.What types of	illicit dis	scharg	ges h	ave	bee	n fo	oun	ıd d	uri	ng t	this	rep	or	ting	g pe	erio	d?					
O Broken Lines From	n Sanitary	Sewe	r		0]	Indu	ıstri	al C	Conr	ecti	ons											
<ul><li>Cross Connections</li></ul>					0]	Inflo	ow/I	nfil	trati	on												
O Failing Septic Syst	tems				0]	Pum	np S	tatio	on F	ailu	re											
○ Floor Drains Conn	ected To	Storm	Sewe	rs	0 5	Sani	itary	/ Se	wer	Ove	erflo	ws										
○ Illegal Dumping					0 5	Stra	ight	Pip	e S	ewei	Di	scha	ırge	S								
Other:  4. How many illic	eit discha	arges/	poter	     tial		Non ega		nne	ectio	ons	hav	re b	een	de	etec	eted	l dı	ırin	gt	his		
reporting perio						0													<u> </u>			1
<i>7</i> 11	•4 1• 1	,				c				•	41.			4.			. 1	0	Г			1
5. How many illic	en aisch	arges	nave	bee	пс	OHH	lriii	ieu	uur	ıng	UIII	s re	poi	rum	g p	eri	lou	•	L			1
6. How many illic period?	eit discha	arges/i	illega	ıl co	nno	ecti	ons	ha	ve k	eer	ı eli	miı	ato	ed o	dur	ing	g th	is r	epo	orti	ing	0
7. Has the storm of the storm o				_			-					_				od?			Yes	s		No
8. Is the above in																			Yes	S	0	No
Is this informatif Yes, provide		ilable	on th	ie w	eb'	?												0	Yes	S		No
Please provide sp	. ,	ddress	of pa	age v	whe	re r	nap	o(s)	can	be	acce	esse	ed -	not	ho	me	pa	ge.				
																			$\downarrow$			
																			_			
URL				T														$\overline{}$			$\overline{}$	
				<u> </u>						<u> </u>								$\dashv$	$\frac{\perp}{\uparrow}$	+		
				<u> </u>			+		+		-							$\dashv$	$\dashv$	$\dashv$	$\dashv$	_
											$\perp$											



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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

																7			SPI	DES	ID						
ne of MS4	/Coalit	ion_V	/illag	ge of	f We	estha	mpto	n Bo	each										N	Y	R	2	0	A	4	5	7
URL(s	_			· C* -	1.	J	<b>.</b>						(-			<b>L</b> .					-41	1					
Please URL	provi	ue s <sub>l</sub>	peci	HIC	auc	ures	8 01	pa	ge v	VII (	ere	ma	ıp(s	s) c	an	be	acc	ess	ea	- n	ot 1	non	ne j	pag	,e		
UKL																											
		+			+		+														H	$\vdash$		_			_
																						L		L			
URL												-				-				-							
OKL																											
					$\dashv$		+															₩		_			_
					$\downarrow$			<u> </u>													<u> </u>	<u> </u>		<u> </u>			
URL																											
					_																	$\vdash$					
					4		+	1													<u></u>	$\vdash$		L			
URL																											
																						T					_
		+			_		+															$\vdash$		_			
																						L		<u> </u>			
URL																											
					$\pm$		+															$\vdash$					_
																						<u> </u>					
Has an																				ID	DI	E pi	roc	edı	ıre	s b	
approv	ed for	r all	noi	n-tr	adi	itior	ial N	MS <sup>2</sup>	ls c	ont	rib	uti	ng	to	thi	s re	po	rt?					•	Ye	ès	0	Ì
. If Yes,											ing	g to	th	is r	epo	ort	cer	tifi	ied								
equiva	ient to	) tn	e N	13	IVI (	oaei	ועו	JE .	Lav	N:										,	● Y	<i>l</i> es		) <b>N</b>	0	0	
****		, .							• , •							, ,				,							
. What 1	percer	it of	sta	II ii	n re	elev	ant	pos	itio	ns	anc	d de	epa	rtr	ner	its	nas	re	cei	ved	l 11	JUI	1 tr				٦
																								1	. 0	0	



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.

		_	SPI	DES	ID						
Name of MS4/Coalition	Village of Westhampton Beach		N	Y	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 was one illicit discharges detected and confirmed this reporting cycle; the Village is continuing the effort to eliminate the illicit discharge.

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

				1	
samp	les/	parı	tici	pant	s/events

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

• Yes O No

(ex.:

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.



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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

N V P 2 0 A 4 5 7

Name of MS4/Coalition Village of Westhampton Beach	N Y R 2	0 A 4	5 7
Minimum Control Measures 4 Construction Site and Post-Constru	<u> </u>		
The information in this section is being reported (check one):			
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to this report?</li> </ul>			
1a. Has each MS4 contributing to this report adopted a law, or			
mechanism that provides equivalent protection to the NYS Stormwater Discharges from Construction Activities?	SPDES General P	• Yes	○ No
1b. Has each Town, City and/or Village contributing to this re equivalent to a NYSDEC Sample Local Law for Stormwat Sediment Control through either an attorney cerfification Analysis Workbook?	er Management an	d Erosior EC Gap	
If Yes, Towns, Cities and Villages provide date of equivalent	1	Law. 03/2006	O NT
2. Does your MS4/Coalition have a SWPPP review procedure	e in place?	• Yes	○ No
3. How many Construction Stormwater Pollution Prevention reviewed in this reporting period?	Plans (SWPPPs) h	ave been	2
4. Does your MS4/Coalition have a mechanism for receipt an comments related to construction SWPPPs?	d consideration of		O NT
If Yes, how many public comments were received during this	reporting period?		0

5. Does your MS4/Coalition provide education and training for contractors about 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:

<ul><li>Notices of Violation</li></ul>	#		1	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	#			O No Authority



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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	А	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 during this reporting period?	acre or 1	more 2
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	liction 8
3.	What percent of active construction sites were inspected during this reporting j	period?	O NT
		1 0	0 %
4.	What percent of active construction sites were inspected more than once?		$\circ$ NT
		8	8 %
5.	Do all inspectors working on behalf of the MS4s contributing to this report use		S
	Construction Stormwater Inspection Manual? • Yes	○ No	O NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Prever (SWPPPs) of construction projects that are subject to MS4 review and approva	1?	
		○ No	$\circ$ NT
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avenuable review?	ailable f ○ Yes	or O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	d.	



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

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		NY	R 2	2 0	A 4	4 5 7						
6. con't.:												
Submit additional pages as needed.												
<ul> <li>MS4/Coalition Office</li> <li>Department</li> </ul>												
V i l l a g e H a l l												
Address												
1 6 5 M i 1 1 R o a d												
City	Zip											
W   e   s   t   h   a   m   p   t   o   n   B   e   a   c   h	N Y 1	1 9	7 8	3 -								
Phone												
( 6 3 1 ) 2 8 8 <b>-</b> 1 6 5 4												
○ Library												
Address												
City	Zip											
				_ [								
Phone												
(												
○ Other												
Address												
City	Zip											
Phone												
O Web Page URL(s): Please provide specific address where	SWPPPs can be a	accesse	d - no	t hor	ne pa	age.						
URL												
						+						
URL												
						$\perp \perp$						



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.

	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 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 SWPPs 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 this reporting period.

<b>C</b> . ]	How many	times was	this ob	servation	measured o	r evaluated	in this	reporting	period?
--------------	----------	-----------	---------	-----------	------------	-------------	---------	-----------	---------

				1	
samp	les/	parı	tici	pant	s/events

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

0 1			
	$V_{ec}$	$\bigcirc$	Nο

(ex.:

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

Yes	$\bigcirc$ No
1 03	$\sim$ 110

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.



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.

II suomitti	ng mis form as par	i or a je	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		01 0		SPDES		o ounik.	
Name of MS4/Coalition	Village of Westhan	npton B	each						0 A 4	5 7
Minimum	Control Meas	ure 5	. Pos	t-Constr	<u>uctio</u>	n Storn	<u>ıwateı</u>	r Man	ageme	<u>ent</u>
The information in the	nis section is being	reporte	ed (che	eck one):						
<ul><li>On behalf of an inc</li><li>On behalf of a coa</li></ul>										
	nany MS4s contri	buted 1	to this	report?						
1. How many and MS4/Coalition i	what type of post- nventoried, inspe					_	•	ces has	your	
	]	# Invento	ried	# Inspection	ons	# Tim Maintai				
Alternative Practice	ces		2		4		4			
• Filter Systems			0		0		0			
<ul><li>Infiltration Basins</li></ul>			1		1		1			
Open Channels			0		0		0			
Ponds			0		0		0			
<ul><li>Wetlands</li></ul>			0		0		0			
Other		1 5	2							
2. Do you use an BMPs, inspects	electronic tool (eions and maintai	_		abase, spr	eadsh	heet) to t	rack po		structio	on • No
3. What types of Development/F	non-structural p Better Site Desig						nt Low	Impa	et	
O Building Codes	O Municipal Con	mprehe	nsive ]	Plans						
Overlay Districts	Open Space Pr	reserva	tion Pı	rogram						
○ Zoning	O Local Law or	Ordina	nce							
○ None	Land Use Reg	gulation	/Zonin	ıg						
O Watershed Plans	Other Compre	hensive	Plan							

MCM 5 Page 1 of 3

е

a g

 $I \mid m \mid p \mid r \mid o \mid v \mid$ 

D r a

i n

Other:

 $M \mid a \mid i \mid n$ 

S



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.

	S	PDE	SID					
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/v	watershed	l wid	le pl	ann	ing e			No
4b. Does the MS4 have a banking and credit system for stormwater	managen	ient	prac	etico	es?			
					$\circ$ Y	es		No
4c. Do the SWMP Plans for each MS4 contributing to this report inc and approval of banking and credit of alternative siting of a stor						tice	?	No
4d. How many stormwater management practices have been implen	nented as	par	t of t	his	syste	m in	thi	is
reporting period?							0	
5. What percent of municipal officials/MS4 staff responsible for pr training on Low Impace Development (LID), Better Site Design	_	•				end	ed	



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.

	_	SPL	)ES	ID						
Name of MS4/Coalition Village of Westhampton Beach		N	Y	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 w	as this o	hservation	measured or	r evaluated	in this	reporting period?
$\sim$	IIOW IIIaiiy	tillies W	as tills o	boti vation	measured of	. Cranaatea	III tills	reporting perious

				1	
samp	les/	'parı	tici,	pant	s/events

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

Yes	o No

(ex.:

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.



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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	А	4	5	7

## Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
<ul><li>On behalf of an individual MS4</li><li>On behalf of a coalition</li></ul>	
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

			periorinea within	the past 5
<b>Operation/Activity/Facility</b>	Addressed in	n SWMP?	<u>years?</u>	
Street Maintenance	• Yes	○ No	○ Yes	No
Bridge Maintenance	O Yes	• No	○ Yes	<ul><li>No</li></ul>
Winter Road Maintenance	• Yes	○ No	○ Yes	<ul><li>No</li></ul>
Salt Storage	• Yes	○ No	○ Yes	No
Solid Waste Management	• Yes	○ No	○ Yes	No
New Municipal Construction and Land Disturba	nce • Yes	○ No	○ Yes	No
Right of Way Maintenance	O Yes	• No	○ Yes	No
Marine Operations	• Yes	○ No	○ Yes	<ul><li>No</li></ul>
Hydrologic Habitat Modification	○ Yes	● No	○ Yes	<ul><li>No</li></ul>
Parks and Open Space	• Yes	○ No	○ Yes	No
Municipal Building	_	○ No	○ Yes	<ul><li>No</li></ul>
Stormwater System Maintenance		○ No	○ Yes	<ul><li>No</li></ul>
Vehicle and Fleet Maintenance	• Yes	○ No	○ Yes	No
Other	• Yes	○ No	○ Yes	<ul><li>No</li></ul>



This report is being submitted for the reporting period ending March 9,  $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 3 \end{vmatrix}$ 

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

	SPDES II	)				
Name of MS4/Coalition Village of Westhampton Beach	N Y F	2 2	0 7	4	5	7
2. Provide the following information about municipal operations go	ood house	keep	ing p	rog	ran	<b>1</b> S:
<ul><li>Parking Lots Swept (Number of acres X Number of times swept)</li></ul>	# Ac	eres			9	6
• Streets Swept (Number of miles X Number of times swept)	# M	iles		3	2	2
<ul> <li>Catch Basins Inspected and Cleaned Where Necessary</li> </ul>		#		1	0	2
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>		#		1	0	6
Phosphorus Applied In Chemical Fertilizer	# I	bs.				0
Nitrogen Applied In Chemical Fertilizer	# I	bs.		1	5	0
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number times applied to the nearest tenth.)</li> </ul>	# Acre	es			0].	0
3. How many stormwater management trainings have been provide during this reporting period?	ed to muni	cipa	ıl em	ploy	ees	1
4. What was the date of the last training?	0 4 / 1	_ 3	/ [2	2 0	2	2
5. How many municipal employees have been trained in this report	ing period	1?				1
6. What percent of municipal employees in relevant positions and d stormwater management training?	lepartmen	ts r	eceiv		0	%



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.

	SPDES 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 \_\_\_\_\_ catch basins during this reporting cycle.

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

				1	
samp	les/	parı	tici	pant	s/events

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

9 I	-	-		
	Yes		$\bigcirc$	Nο

(ex.:

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

Yes	$\circ$	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.