



# MS4 Annual Report Cover Page

MCC form for period ending March 9, 2014

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

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

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

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Name of MS4 

City of Newburgh
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SPDES ID  

N	Y	R	2	0	A	2	4	0
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**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for **each** of the following positions as indicated below:

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

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

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

For each contact, select all that apply:

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

First Name	MI	Last Name
M i c h a e l	G	C i a r a v i n o

Title
C i t y M a n a g e r

Address
8 3 B r o a d w a y

City	State	Zip
N e w b u r g h	N Y	1 2 5 5 0 -

eMail
m c i a r a v i n o @ c i t y o f n e w b u r g h - n y . g o v

Phone	County
( 8 4 5 ) 5 6 9 - 7 3 0 1	O r a n g e

# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2014

Name of MS4 City of Newburgh

SPDES ID									
N	Y	R	2	0	A	2	4	0	

## Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for **each** 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).
- Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
- The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
- The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- Report Preparer (Consultants may provide company name in the space provided).

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

For each contact, select all that apply:

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

First Name	MI	Last Name
J a s o n	C	M o r r i s

Title  
C i t y E n g i n e e r

Address  
8 3 B r o a d w a y

City	State	Zip
N e w b u r g h	N Y	1 2 5 5 0 -

eMail  
j m o r r i s @ c i t y o f n e w b u r g h - n y . g o v

Phone	County
( 8 4 5 ) 5 6 9 - 7 4 4 7	O r a n g e

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

MCC form for period ending March 9, 2 0 1 4

Name of MS4 City of Newburgh

SPDES ID  
N Y R 2 0 A 2 4 0

**Section 3 - Partner Information**

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

Q u a s s a i c k C r e e k W a t e r s h e d

Partner/Coalition Name (con't.)

A l l i a n c e

SPDES Partner ID - If applicable

Address

City

State

Zip

-

eMail

g e b h a r d s @ e a r t h l i n k . n e t

Phone

( ) -

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?  Yes  No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

MM1 R i p a r i a n C o r r i d o r P r o t e c t i o n

MM2

MM3

MM4

MM5

MM6 H y d r o l o g i c H a b i t a t A s s e s s m e n t

Additional tasks/responsibilities

Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

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

MCC form for period ending March 9, 2 0 1 4

Name of MS4

SPDES ID

N Y R 2 0 A 2 4 0

**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

M i c h a e l

MI

G

Last Name

C i a r a v i n o

Title (Clearly print title of individual signing report)

C i t y M a n a g e r

Signature

Date

0 6 / 0 1 / 2 0 1 4

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

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









MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

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

URL


URL


URL


URL


URL


URL


URL


**MS4 Annual Report Form**

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

2	0	1	4
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Name of MS4/Coalition

City of Newburgh

SPDES ID

N	Y	R	2	0	A	2	4	0
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

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

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

The City of Newburgh has partnered with E-Design Dynamics to prepare a Green Infrastructure Feasibility Study for the City of Newburgh. The City has held several public involvement meetings to get public input on the development of this plan. The Quassaick Creek Watershed Alliance has also held several public participation and awareness workshops to involve the general public in watershed cleanup programs.

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

The City has observed a significant number of attendees at the public input workshops, along with public involvement and participation at numerous Quassaick Creek Watershed Alliance work parties and their Trees for Tribes Program.

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

			1
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

The City will continue to encourage public education and outreach programs related to stormwater management. The City will look to implement a program to stencil catch basins that drain to the City's lakes, rivers and streams in order to raise stormwater pollution prevention awareness.

### MS4 Annual Report Form

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

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

Name of MS4/Coalition 

City of Newburgh									
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SPDES ID

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

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

On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report? 

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

- Cleanup Events # Events 

				2
--	--	--	--	---
- Comments on SWMP Received # Comments 

--	--	--	--	--
- Community Hotlines Phone # ( 

8	4	5
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5	6	9
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7	4	4	7
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  - Phone # ( 

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  - Phone # ( 

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  - Phone # ( 

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  - Phone # ( 

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  - Phone # ( 

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  - Phone # ( 

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- Community Meetings # Attendees 

	2	0	0
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- Plantings Sq. Ft. 

	1	0	0
--	---	---	---
- Storm Drain Markings # Drains 

--	--	--	--
- Stakeholder Meetings # Attendees 

	1	0	0
--	---	---	---
- Volunteer Monitoring # Events 

			1
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- Other: 

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

- List-Serve # In List 

--	--	--	--
- Newspaper Advertising # Days Run 

--	--	--	--
- TV/Radio Notices # Days Run 

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- Other: 

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

SPDES ID  

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

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

URL

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a	t	e	r																																

URL


URL


URL


URL


URL


URL


## MS4 Annual Report Form

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

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Name of MS4/Coalition

SPDES ID  

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

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

URL


URL


URL


URL


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**MS4 Annual Report Form**

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

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Name of MS4/Coalition 

City of Newburgh
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SPDES ID

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

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

0	2
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 / 

0	6
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 / 

2	0	1	3
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**4.b. For how many days was/will this report be posted?**

3	6	5
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If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

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

Yes  No

If Yes, what was the date of the meeting?

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 / 

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If No, is one planned?

Yes  No

**5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?**

Yes  No

If No, is one planned for each?

Yes  No

**6. Were comments received during this reporting period?**

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

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

2	0	1	4
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Name of MS4/Coalition

City of Newburgh

SPDES ID

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**7. Evaluating Progress Toward Measurable Goals MCM 2**

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

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

The City established and implemented its Stormwater Management Program in 2003 after receipt of the Acknowledgement Letter for the NOI. Copies of state and local laws pertaining to stormwater management regulations were made available to the public and applicants seeking board approvals. The City Manager has been designated as the official contact point for information pertaining to the SWMPP.

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

Attendance at public outreach events has steadily increased since 2005.

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

			1
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

The City will continue to coordinate and provide opportunities for public involvement and participation. Emails of interested participants have been collected through past events and workshops. Upcoming events will continue to be announced through press releases, council meetings, the City's website, flyers, and email list-serves.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 4

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

Name of MS4/Coalition City of Newburgh

SPDES ID  
N Y R 2 0 A 2 4 0

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

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

On behalf of an individual MS4

On behalf of a coalition

How many MS4s contributed to this report? 1

1. Enter the number and approx. percent of outfalls mapped: 3 6 # 1 0 0 %

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? 1 1

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

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

F a i l i n g / F a i l e d S D S

Sewersheds:

C i t y o f N e w b u r g h

### MS4 Annual Report Form

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Name of MS4/Coalition

City of Newburgh

SPDES ID

N Y R 2 0 A 2 4 0

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

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

Empty grid for other discharge types

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

1

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

1

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

0

7. Has the storm sewershed mapping been completed in this reporting period?

- Yes
- No

If No, approximately what percent was completed in this reporting period?

0 %

8. Is the above information available in GIS?

- Yes
- No

Is this information available on the web?

- Yes
- No

If Yes, provide URL(s):

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

URL

www.cityofnewburgh-ny.gov/gis/gallery

URL

Empty grid for additional URLs



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Name of MS4/Coalition 

City of Newburgh
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SPDES ID

N	Y	R	2	0	A	2	4	0
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

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

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

The City has begun an illicit discharge detection & elimination plan, and to enact a local stormwater ordinance that will foster all goals and measures identified in the SWMPP. Dye testing of several suspected illicit connections has commenced, and the results will be documented in the following MS4 reporting cycle.

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

Since 2005, routine inspections, cleaning and illicit discharge detection has increased. Streets are now swept on a regular basis in the City. Any issues identified with the collection system are reported and repaired by either the City's DPW crews or by an emergency contractor.

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

			1
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*(ex.: samples/participants/events)*

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

Yes    No

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

Yes    No

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

The City anticipates expanding its catch basin cleaning program, collection system mapping verification and illicit discharge detection and elimination program. The City's Engineering Department is also working to implement an Asset Management Program that is compatible with the existing GIS software. This software will enable the City to better plan and maintain its stormwater facilities and identify potential problem areas before a problem occurs.

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Name of MS4/Coalition

City of Newburgh

SPDES ID

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

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

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

How many MS4s contributed to this report? 

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

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

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

09/2004  03/2006  NT

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

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

		3
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**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?**  Yes  No  NT

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

--	--	--

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

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

- Notices of Violation # 

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

 No Authority
- Stop Work Orders # 

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

 No Authority
- Criminal Actions # 

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

 No Authority
- Termination of Contracts # 

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

 No Authority
- Administrative Fines # 

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

 No Authority
- Civil Penalties # 

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

 No Authority
- Administrative Orders # 

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

 No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--	--
- Other # 

					1
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 No Authority



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Name of MS4/Coalition 

City of Newburgh									
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SPDES ID

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

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

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

How many MS4s contributed to this report? 

		1
--	--	---

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

		1
--	--	---
  
  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		2
--	--	---
  
  3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
---	---	---

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

1	0	0
---	---	---

 %
  
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

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

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2014

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

Name of MS4/Coalition

SPDES ID

**6. con't.:**

Submit additional pages as needed.

MS4/Coalition Office

Department

Address

City

Zip

Phone

(  )  -

Library

Address

City

Zip

-

Phone

(  )  -

Other

Address

City

Zip

-

Phone

(  )  -

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

URL

URL

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Newburgh

SPDES ID

N	Y	R	2	0	A	2	4	0
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**7. Evaluating Progress Toward Measurable Goals MCM 4**

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

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

To implement the site plan review process and inspection program to ensure construction site stormwater runoff control compliance with state and local laws. The Planning Board, City Engineer and City Planner will review, modify and approve site plans, and encourage appropriate best management practices related to stormwater management and erosion and sediment control. The City Engineer and Building Inspector will follow up with appropriate inspections of such practices.

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

The City has reviewed 100% of the SWPPP's and has issued comments with corresponding reviews of revisions. All comments and revisions are in accordance with the latest editions of the New York State Stormwater Management Design Manual and the New York State Standards for Erosion & Sediment Control. The City will work to increase the number of training opportunities available to its staff.

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

			1
--	--	--	---

*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

The City will continue to conform to the NYSDEC's standards for stormwater management and erosion & sediment control measures. The City is working with E-Design Dynamics to prepare a Green Infrastructure Feasibility Study. This Feasibility Study is scheduled to be completed in September of 2014, and the City will work to implement the findings of this study by incorporating appropriate green stormwater practices into the City's infrastructure.



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

City of Newburgh
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SPDES ID

N	Y	R	2	0	A	2	4	0
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes    No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

Yes    No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

Yes    No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		1
--	--	---

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

1	0	0
---	---	---

 %

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

City of Newburgh

SPDES ID

N	Y	R	2	0	A	2	4	0
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

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

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

Ensuring the post construction stormwater management coordination through the Code Compliance Department with assistance and random inspections by the City Engineer.

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

Routine inspections for post construction stormwater management are coordinated through private project site managers, the City Engineer and Building Inspectors.

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

			5
--	--	--	---

*(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 City expects to implement additional Best Management Practices through SWPPP review and comment of Planning Board projects. The City is also working to redevelop a Brownfield site that will incorporate a number of shared stormwater management facilities.

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  

N	Y	R	2	0	A	2	4	0
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

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

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

How many MS4s contributed to this report? 

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

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

### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

City of Newburgh
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SPDES ID  

N	Y	R	2	0	A	2	4	0
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**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

--	--	--	--	--
- Streets Swept (Number of miles X Number of times swept) # Miles 

	3	9	0	0
--	---	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		3	2	0
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

--	--	--	--	--
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

--	--	--	--	--
- Pesticide/Herbicide Applied # Acres 

					.	
--	--	--	--	--	---	--

  
 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

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

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

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

--	--

 / 

--	--

 / 

--	--	--	--

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

		0
--	--	---

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

		0
--	--	---

 %



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

City of Newburgh

SPDES ID

N	Y	R	2	0	A	2	4	0
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

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

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

Street sweeping, animal carcass removal, catch basin cleaning, sediment removal from road surfaces, petroleum bulk storage compliance updates.

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

The City continuously monitors ice control activities in order to reduce the amount of materials deposited while providing safe passage for vehicular traffic. City staff receives periodic training regarding safe storage of products and chemicals. Routine maintenance of the stormwater collection system, street, municipal buildings, parks, and open space are performed to protect and improve water quality within the City and associated receiving waters.

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

			1
--	--	--	---

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

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

Yes    No

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

Yes    No

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

The Department of Public Works will continue to adhere to the accepted good housekeeping measures and rules. The City will work to provide stormwater management training & education to municipal employees to further promote this implementation strategy.

### MS4 Annual Report Form

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID  

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

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

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

How many MS4s contributed to this report? 

		1
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**MS4s must answer the questions or check NA as indicated in the table below.**

MS4 Description	Answer	Check NA	(POC)
<b>NYC EOH Watershed</b>			
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
<b>Onondaga Lake Watershed</b>			
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
<b>Greenwood Lake Watershed</b>			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
<b>Oyster Bay</b>			
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
<b>Peconic Estuary</b>			
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
<b>Oscawana Lake Watershed</b>			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
<b>LI 27 Embayments</b>			
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

**1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?**  Yes  No  N/A

**2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?**  Yes  No  N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far. 

--	--	--

 %

Estimate what percentage was mapped in this reporting period. 

--	--	--

 %

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Newburgh

SPDES ID

N	Y	R	2	0	A	2	4	0
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3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program?  Yes  No  N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period? 

		0
--	--	---

 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more?  Yes  No  N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards?  Yes  No  N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading?  Yes  No  N/A

7b. How many projects have been sited in this reporting period? 

		0
--	--	---

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

		0
--	--	---

 %

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

		0
--	--	---

 %

No Projects Planned

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

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

**MS4 Annual Report Form**

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

2	0	1	4
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

City of Newburgh

SPDES ID

N	Y	R	2	0	A	2	4	0
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**9. Has your MS4/Coalition developed and implemented a program of native planting?**

Yes  No  N/A

**10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?**

Yes  No  N/A

**11. Does your MS4/Coalition have a pet waste bag program?**

Yes  No  N/A

**12. Does your MS4/Coalition have a program to manage goose populations?**

Yes  No  N/A