

MS4 Annual Report Cover Page

MCC form for period ending March 9,

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

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

If Joint Report, enter coalition name:

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

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| Village of Flower Hill |
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SPDES ID

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 8

SPDES ID

Name of MS4 Village of Flower Hill

N Y R 2 0 A 1 7 1

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: [Grid] MI: [Grid] Last Name: [Grid]

Title: D & B Engineers and Architects

Address: 330 Crossways Park Drive

City: WOODBURY State: NY Zip: 11797 - [Grid]

eMail: [Grid]

Phone: (516) 364-9890 County: Nassau

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9,

Name of MS4

SPDES ID

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

Address

City

State

Zip

-

eMail

Phone

() -

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

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

MM1

MM2

MM3

MM4

MM5

MM6

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 8

Name of MS4 Village of Flower Hill

SPDES ID

N Y R 2 0 A 1 7 1

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

M a n h a s s e t B a y P r o t e c t i o n

Partner/Coalition Name (con't.)

C o m m i t t e e

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 5 V a n d e r v e n t e r A v e

City

P o r t W a s h i n g t o n

State

N Y

Zip

1 1 0 5 0 - 3 7 1 0

eMail

m b p c E x e c @ g m a i l . c o m

Phone

(5 1 6) 8 6 9 - 7 9 8 3

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 M u l t i p l e T a s k s
- MM2 M u l t i p l e T a s k s
- MM3 W a t e r q u a l i t y m o n i t o r i n g , o t h e r
- MM4 E d u c a t i o n , R u n o f f m o n i t o r i n g
- MM5 E d u c a t i o n , R u n o f f m o n i t o r i n g
- MM6 E d u c a t i o n

Additional tasks/responsibilities

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

Education and literature on stormwater runoff, pet waste, pathogens, water fowl, Onsite Wastewater Treatment Systems

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2018

Name of MS4 Village of Flower Hill

SPDES ID

NYR20A171

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

H e m p s t e a d H a r b o r P r o t e c t i o n

Partner/Coalition Name (con't.)

C o m m i t t e e

SPDES Partner ID - If applicable

NYR20

Address

29 Spring Street

City

Oyster Bay

State

NY

Zip

-

eMail

e . s w e n s o n @ h e m p s t e a d h a r b o r . o r g

Phone

(5 1 6) 6 7 7 - 5 9 2 1

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 M u l t i p l e T a s k s

● MM2 M u l t i p l e T a s k s

● MM3 W a t e r m o n i t o r i n g , o t h e r t a s k s

● MM4 M o n i t o r f o r r u n o f f , t r a i n i n g

● MM5 M o n i t o r f o r r u n o f f , t r a i n i n g

● MM6 E d u c a t i o n , t r a i n i n g & r e s e a r c h

Additional tasks/responsibilities

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

Education and literature on pathogens, pet waste, waterfowl, and septic system inspection and maintenance

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 8

Name of MS4

SPDES ID

Section 3 - Partner Information

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

If Yes, complete information below.

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

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

Address

City

State

Zip

eMail

Phone

() -

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?

Yes No

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

MM1

MM2

MM3

MM4

MM5

MM6

Additional tasks/responsibilities

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

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 8

Name of MS4 Village of Flower Hill

SPDES ID

N Y R 2 0 A 1 7 1

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
R o b e r t M c N a m a r a

Title (Clearly print title of individual signing report)
M a y o r

Signature

Date / /

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

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

DRAFT

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.

SPDES ID

Name of MS4/Coalition

| |
|------------------------|
| Village of Flower Hill |
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Water Quality Trends

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

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

How many MS4s are contributed to this report?

| | | |
|--|--|--|
| | | |
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1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One.

Yes No

If Yes, choose one of the following

- Report(s) attached to the annual report
- Web Page(s) where report(s) is/are provided below

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

URL

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Flower Hill |
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SPDES ID

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Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report?

| | | |
|--|--|--|
| | | |
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1. Targeted Public Education and Outreach Best Management Practices

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

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

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Other

2. Specific audiences targeted during this reporting period:

- Public Employees
- Residential
- Businesses
- Restaurants
- Other:
- Contractors
- Developers
- General Public
- Industries
- Agricultural

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Other

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Flower Hill |
|------------------------|

SPDES ID

| | | | | | | | | |
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3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

- | | | | | | | | |
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| <input checked="" type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">4</td><td style="width: 20px; height: 20px;">3</td></tr></table> | | | 2 | 4 | 3 |
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| <input checked="" type="radio"/> Direct Mailings | # Mailings | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;">2</td></tr></table> | | | | | 2 |
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| <input checked="" type="radio"/> Mailing List | # In List | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">5</td><td style="width: 20px; height: 20px;">4</td><td style="width: 20px; height: 20px;">7</td></tr></table> | | 2 | 5 | 4 | 7 |
| | 2 | 5 | 4 | 7 | | | |
| <input checked="" type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;">3</td><td style="width: 20px; height: 20px;">8</td></tr></table> | | | | 3 | 8 |
| | | | 3 | 8 | | | |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td></tr></table> | 2 | 0 | 0 | 0 | 0 |
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| <input type="radio"/> School Program | # Attendees | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | |
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| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | |
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Locations (e.g. libraries, town offices, kiosks)

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Flower Hill |
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SPDES ID

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3. Web Page con't.: Provide specific web addresses - not home page.

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Flower Hill

SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

The Village Public Education and Outreach program will be tailored to describe topics related to the impacts of storm water discharges on local water bodies, pollutants of concern and their sources (e.g., pathogens to Hempstead Harbor and Manhasset Bay), and the steps that can be taken to reduce pollutants in storm water runoff and non-storm water discharges.

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

The Village has chosen to evaluate the annual number of direct storm water and/or pollution prevention mailings to residents and businesses as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Education and Outreach program requirements. The Village conducted two direct mailings related to storm water pollution prevention through the Village newsletter in this reporting period.

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

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(ex.: samples/participants/events)

D. Has your MS4 made progress toward this Measurable Goal during this reporting period?
 Yes No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village plans to continue evaluating the annual number of direct storm water and/or pollution prevention mailings to residents and businesses 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 conduct direct mailings periodically throughout the year.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

Minimum Control Measure 2. Public Involvement/Participation

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

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

How many MS4s contributed to this report?

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

- Cleanup Events # Events 1
- Comments on SWMP Received # Comments 0
- Community Hotlines

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- Community Meetings # Attendees 2 3
- Plantings Sq. Ft. 3 0 0
- Storm Drain Markings # Drains
- Stakeholder Meetings # Attendees 1 2 0
- Volunteer Monitoring # Events 1 3
- Other:

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

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

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

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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 | Village of Flower Hill | SPDES ID |
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3. Where can the public access copies of this annual report, Stormwater Management Program (SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

MS4/Coalition Office Annual Report SWMP Plan Comments

Department

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Library Annual Report SWMP Plan Comments

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Other Annual Report SWMP Plan Comments

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Web Page URL: Annual Report SWMP Plan Comments

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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SPDES ID

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

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

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

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| 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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If No, is one planned?

Yes No

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

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

Yes No

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Flower Hill

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 (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

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

The Village's Public Involvement and Participation program will incorporate stewardship activities that help to reduce pollutants of concern (e.g., pathogens to Hempstead Harbor and Manhasset Bay) and encourage the general public, residents and businesses to become involved in storm water 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 community cleanup events as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Involvement and Participation program requirements. There was one cleanup event hosted by the Manhasset Bay Protection Committee in this reporting period. The Village continues to support programs that promote cleanup events available to Village residents.

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

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*(ex.: samples/participants/events)***D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes No

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

Yes No

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

The Village plans to continue evaluating the number of community cleanup events 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 cycle. The Village will sponsor/participate in cleanup events periodically throughout the next reporting period.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018

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 Flower Hill

SPDES ID
NYR20A171

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

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

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

How many MS4s contributed to this report?

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

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

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

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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

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9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? Yes No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? Yes No NT

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

| | | |
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 %

MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Flower Hill |
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SPDES ID

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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

The Village Illicit Discharge Detection and Elimination program will focus on identifying, locating, eliminating, reducing and preventing illicit discharges to the Village municipal separate storm sewer system to the maximum extent practicable.

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 detected as an indicator for measuring the overall effectiveness of the Village's compliance with the Illicit Discharge Detection and Elimination program requirements. There were twenty-four illicit discharges detected in this reporting period. All illicit discharges are investigated by the Village. All were confirmed and eliminated.

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The Village will continue to follow the procedures for IDDE 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 authority provided by the Village Illicit Discharge Local Law on a case-by-case basis.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Flower Hill

SPDES ID

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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?

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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?

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

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

- Notices of Violation #

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 ○ No Authority
- Stop Work Orders #

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 ○ No Authority
- Criminal Actions #

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 ○ No Authority
- Termination of Contracts #

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 ○ No Authority
- Administrative Fines #

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 ○ No Authority
- Civil Penalties #

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 ○ No Authority
- Administrative Orders #

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 ○ No Authority
- Enforcement Actions or Sanctions #

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 ○ No Authority
- Other #

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 ○ No Authority

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Flower Hill

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?

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

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

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

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

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 %
 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, 2018

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 1 7 1

6. con't.:

Submit additional pages as needed.

MS4/Coalition Office

Department

V i l l a g e H a l l

Address

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City

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Zip

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

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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| Village of Flower Hill |
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SPDES ID

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7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

The Village's Construction Site Storm Water Runoff Control program will provide equivalent protection to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activity. This includes reviewing SWPPPs submitted to the Village for projects disturbing an acre or greater of land. The Village also requires erosion and sediment controls for every project requiring a building permit regardless of the amount of land disturbance.

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

The threshold for a SDPES General Permit for Stormwater Discharges from Construction Activity is rarely met within the Village. The Village will review SWPPPs as they are submitted and plans to evaluate the percent of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Village's compliance with the Construction Site Storm Water Runoff Control program requirements.

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

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

MS4 Annual Report Form

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

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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

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| Village of Flower Hill |
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SPDES ID

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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?

| | | |
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| | | 0 |
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5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impact Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

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MS4 Annual Report Form

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

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

Name of MS4/Coalition

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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 (SWMP), including requirements in Part III.C.1. Submit additional pages as needed.

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

The Village's Post-Construction Storm Water Management program will address storm water 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 has chosen to evaluate the number of BMPs in the Village's inventory as an indicator for measuring the overall effectiveness of the Village's compliance with the Post-Construction Storm Water Management program requirements. The Village has 256 BMPs inventoried. The Village will add to the inventory if applicable private BMPs are constructed.

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

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

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

Yes No

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

Yes No

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

The Village will add new BMPs to the inventory as necessary and will evaluate the number of BMPs inventoried as an indicator for measuring the overall effectiveness of the Village's compliance with the Post-Construction Storm Water Management program requirements in the next reporting cycle.

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

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Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

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

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

MS4 Annual Report Form

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

| | | | |
|---|---|---|---|
| 2 | 0 | 1 | 8 |
|---|---|---|---|

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 Flower Hill |
|------------------------|

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 7 | 1 |
|---|---|---|---|---|---|---|---|---|

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

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

| | | | | |
|--|--|--|--|---|
| | | | | 1 |
|--|--|--|--|---|
- Streets Swept (Number of miles X Number of times swept) # Miles

| | | | | |
|--|--|--|---|---|
| | | | 2 | 1 |
|--|--|--|---|---|
- Catch Basins Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|---|---|---|
| | | 2 | 5 | 0 |
|--|--|---|---|---|
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

| | | | | |
|--|--|---|---|---|
| | | 2 | 5 | 6 |
|--|--|---|---|---|
- Phosphorus Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Nitrogen Applied In Chemical Fertilizer # Lbs.

| | | | | |
|--|--|--|--|---|
| | | | | 0 |
|--|--|--|--|---|
- Pesticide/Herbicide Applied # Acres

| | | | | | |
|--|--|--|---|---|---|
| | | | 0 | . | 0 |
|--|--|--|---|---|---|

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

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

| | | | | |
|--|--|--|--|---|
| | | | | 2 |
|--|--|--|--|---|

4. What was the date of the last training?

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | / | 1 | 0 | / | 2 | 0 | 1 | 7 |
|---|---|---|---|---|---|---|---|---|---|

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

| | | |
|--|--|---|
| | | 3 |
|--|--|---|

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

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

MS4 Annual Report Form

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

| | | | |
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| 2 | 0 | 1 | 8 |
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

Village of Flower Hill

SPDES ID

| | | | | | | | | |
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| N | Y | R | 2 | 0 | A | 1 | 7 | 1 |
|---|---|---|---|---|---|---|---|---|

7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

The Village Storm Water Pollution Prevention and Good Housekeeping for Municipal Operations program will address operations that collect, store or release sediments, wastes or other potential pollutants (e.g., pathogens to Hempstead Harbor and Manhasset 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 Storm Water Pollution Prevention and Good Housekeeping for Municipal Operations program requirements. Catch basins are inspected monthly and cleaned as required. There were 250 catch basins cleaned in this reporting period.

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 SWMP?
 Yes No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

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 BMPs outlined in the NYSDEC Municipal Pollution Prevention and Good Housekeeping Assistance Document as necessary.

Progress Report for Part IX.C

Pathogen Impaired Watershed Improvement Strategy Areas

PERMIT #

Waterbody Name

MS4 Name

Reporting Period Ending (mm/dd/yyyy) / /

Reaffirmation for No Discharge

- The Municipal Separate Storm Sewer System as defined in 40 CFR 122.26(b)(8) and (16) including roads with drainage systems, municipal streets, catch basins, curbs, gutters, ditches, man-made channels, or storm drains that the owns or operates does not have any outfalls that discharge directly or indirectly through another MS4, into the

Watershed Status

Please describe what your stormwater management program is doing to address the source of pathogens to the impaired waterbody

The Village has included pathogen-specific source control BMPs in their SWMP and submitted mapping and land use data to DEC for the Hempstead Harbor sewershed. The Village is also an active member of the Hempstead Harbor Protection Committee, which works to protect and improve the water quality of Hempstead Harbor. Through the efforts of the communities surrounding the Harbor, a large portion of the upper Harbor was determined by DEC to meet the standards for year-round shellfish harvesting.

If you suspect the sources of pathogens that contribute a load to this watershed through the MS4 are something other than the sources listed in the TMDL, please state what you believe to be the suspected sources and how they were determined.

The Village has no reason to conclude that there are other sources of pathogens than the ones listed in the TMDL at this time.

Public Education & Outreach of Pathogens as the Pollutant of Concern

1. Description of the education program.

The Village's Public Education and Outreach program incorporates topics related to the sources, impacts and reduction of pathogens. Educational materials are distributed on the Village's website and newsletter; in print as brochures and articles; and at public events and presentations throughout the year. The Village also reaches out to contractors for compliance with the Village erosion control plan requirements. The Village approves landscape and drainage plans.

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

Target audiences are the general public (e.g., public employees, residents, businesses). The message is that pathogens in storm water can impact their health, recreation and the local economy. A number of easily adopted source control practices are also suggested.

3. How are behavior changes being measured?

The Village evaluates the occurrence and/or participation in the educational programs as a measure of SWMP effectiveness. For example, the pet waste bag stations in Flower Hill Park are consistently used. The Village has also noticed an increased use of the trash receptacles at the playgrounds and basketball courts.

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4. What are the education plans and goals for the next 6 months?

The Village plans to continue implementing the established public education and outreach program requirements in the next 6 months.

Illicit Discharge Detection and Elimination

5. What has been done to actively look in these watersheds for Illicit discharges? Describe procedures and staff that are involved in this reconnaissance.

The Village has continued to implement its ORI program of inspecting Village outfalls once per year, which is the responsibility of Highway staff. Staff in other Village departments that conduct regular field activities have been instructed to keep an eye out for evidence of illicit discharges during their daily operations.

Answer Either 6a. or 6b.

6a. No Illicit Discharges were discovered during this reporting period
Explain how the determination for No Illicit Discharges was made

[Empty text box for answer to 6a]

6b. Illicit Discharges were discovered during this reporting period
What has the municipality determined from the illicit discharges that have been found?

There were two violations of the storm water local law during the reporting period. One was an illicit discharge of pool discharge and the other was an illicit discharge of sediment from construction erosion. Both illicit discharges have been eliminated.

Complete Either 7a. (Map) or 7b. (Written Response)

7a. Attach a map showing where IDDE outfall inspections have occurred this reporting period, which outfalls have illicit discharges, and if the discharge has been removed, where the illicit connection is in the system and how it is entering the system (i.e. Direct connection to the MS4, overland connection, structural failure of the MS4 piping network)

7b. Give the number of inspections performed during this reporting period. # Inspections
(Provide municipal identification #s for all outfalls inspected)

State which outfalls have illicit discharges and whether or not the illicit discharge has been removed. Also describe where the illicit discharge is in the system and how it is entering the system (i.e. Direct connection to the MS4, overland connection, structural failure of the MS4 piping network)

[Empty text box for answer to 7b]

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Post Construction Stormwater Management

8. Number of Post Construction Stormwater Management Practices (SMPs) that discharge to an MS4 that drains to the listed waterbody # SMPs

| | | | |
|--|--|---|---|
| | | 2 | 6 |
|--|--|---|---|

- As part of the RFI sent by the Department in August 2016, the information in #8 has already been submitted
a. Describe the municipality's policy on post construction stormwater management

The Village Post-Construction Storm Water Management program addresses storm water runoff from regulated (i.e., disturbances of an acre or more) development projects. The Village recommends and encourages the use of BMPs for development projects through the SWPPP review and site plan approval process. The Village also considers the use of green infrastructure measures in capital improvement projects.

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

The Village is awaiting the revision of the TMDL for Hempstead Harbor and notification of the Village's individual responsibilities for pollutant load reductions through the MS4.

Municipal Operations Pollution Prevention/Good Housekeeping

- Non-Traditional MS4 (skip Question 10)

10a. Is pet waste an issue in the MS4 areas? If pet waste is not an issue please describe, in the box below, the reasoning behind this viewpoint.

The Village has identified the proper collection and disposal of dog waste as a concern in the Village.

10b. If pet waste is a problem, where has it been found to be a problem? Are there any areas where pets are known to frequent (such as parks, road ends, boat launches, marinas, trails). Are there any indications that pet waste is being disposed of improperly (ie. dumped into a catch basin)?

Most of the Village's Hempstead Harbor sewershed are areas where pet populations are expected to be in higher concentrations (i.e., residential areas). Incidences of pet waste being disposed of improperly have anecdotally decreased over the last decade.

10c. What strategies are in place to manage the proper disposal of pet waste? What strategies are planned to improve pet waste disposal practices in areas identified in need of improvement?

The Village requires dogs waste in any public place or street to be cleaned up and disposed of immediately through the Village Code. To encourage the proper disposal of dog waste, the Village allows dogs in Flower Hill Park where pet waste bag stations and receptacles are maintained.

PERMIT #

10d. What measurable indicators are being used to help determine the effectiveness of these strategies?

The Village evaluates the occurrence and/or compliance with the dog waste laws as a measure of SWMP effectiveness. For example, the Village monitors the citations for not properly disposing of dog waste. There were no violations of the Village's dog waste laws in this reporting period.

11a. Is the goose population an issue in the MS4 areas? If the goose population is not an issue please describe, in the box below, the reasoning behind this viewpoint.

While some geese have been occasionally observed within the Village, the goose population is not a major concern in the Village.

11b. If the geese are a problem, where has it been found to be a problem? Provide a description of the location or a map showing the areas of high population density of geese.

Resident Canada geese are known to favor open water and large grassy areas. These types of areas do not exist within the Village's Hempstead Harbor sewershed, which is primarily medium-density residential neighborhoods.

11c. What strategies are in place to manage the population of geese on municipal properties?

The Village allows dog walking in Flower Hill Park, which discourages resident Canada geese from landing and feeding in the area.

11d. What measurable indicators are being used to help determine the effectiveness of these strategies?

The Village visually monitors Village properties for goose populations, which have not been a concern in this reporting period.

MS4 Semi Annual Report Form Certification

Semi Annual Report form for period ending

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 (MMDDYYYY)

Name of MS4

SPDES ID

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| N | Y | R | 2 | 0 | A | 1 | 7 | 1 |
|---|---|---|---|---|---|---|---|---|

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

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing of violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-15-003 Part VI.J.

First Name

| | | | | | | | | | | | | | | | | | | | |
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 Last Name

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Title (Clearly print title of individual signing report)

| | | | | | | | | | | | | | | | | | | | |
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Signature

Date

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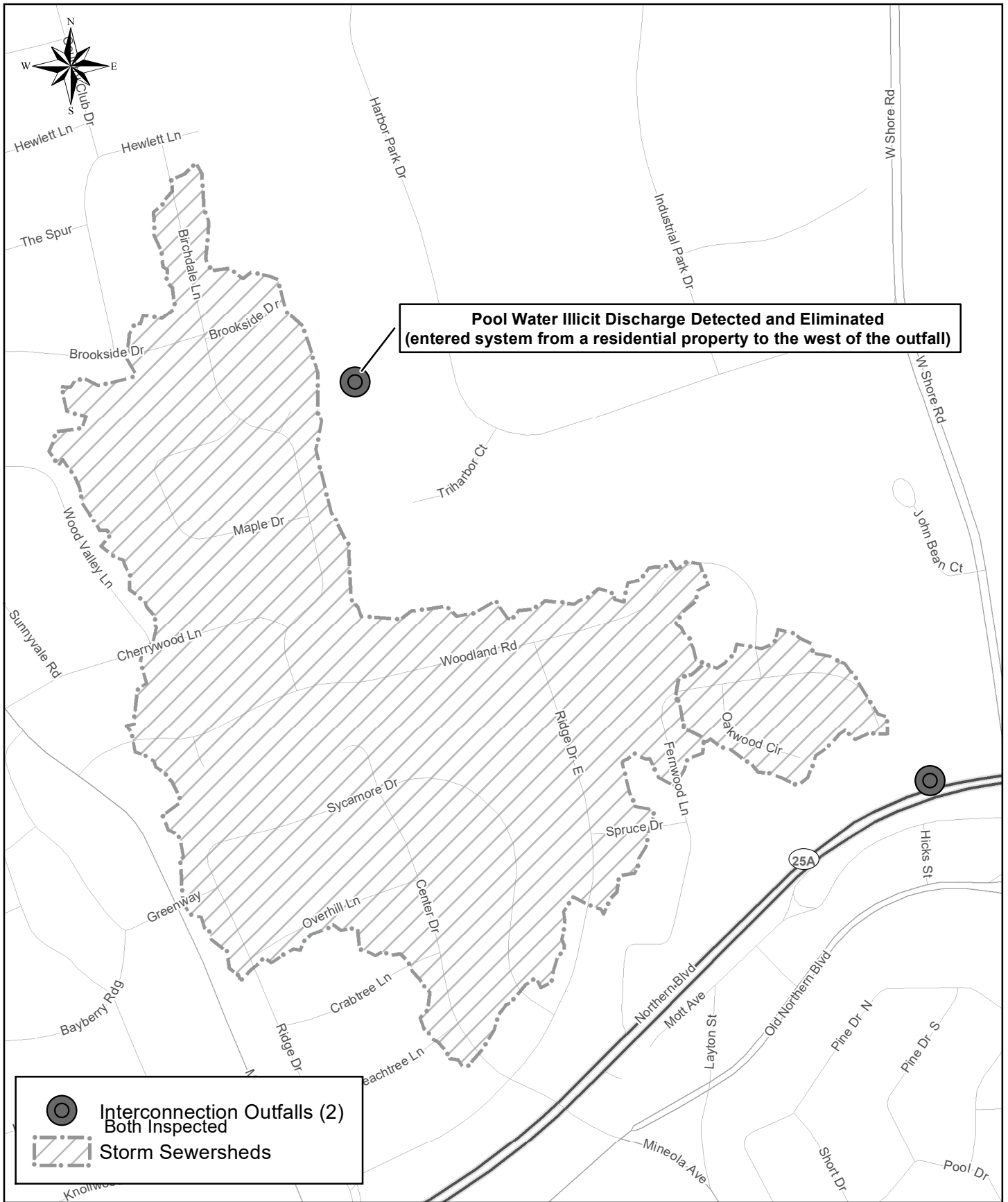
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Send completed form and any attachments to the DEC Central Office at:

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



VILLAGE OF FLOWER HILL
NYR20A171

STORM WATER MANAGEMENT PROGRAM
2018 SEMI-ANNUAL PROGRESS REPORT
HEMPSTEAD HARBOR: QUESTION 7a
OUTFALLS INSPECTED