

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2023

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

SPDES ID N Y R 2 0 A 2 5 2

Choose one:

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

Fill in SPDES ID in upper right hand corner.

Name of MS4

N Y S E n v C o n s D i v o f O p e r a t i o n s

OR

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

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

Name of Single Entity

[Empty grid for Name of Single Entity]

OR

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

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

Name of Coalition

[Empty grid for Name of Coalition]

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MS4 Annual Report Cover Page

MCC form for period ending March 9,

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

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

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Name of MS4

NYS Dept of Environmental Conservation, Division of Operations
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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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eMail

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MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 NYS Dept of Environmental Conservation, Division of Operations

SPDES ID
N Y R 2 0 A 2 5 2

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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 Philip MI G Last Name V a n S a n t v o o r d , P E

Title P r o f e s s i o n a l E n g i n e e r 2 - C i v i l

Address 6 2 5 B r o a d w a y , 3 r d F l o o r

City Albany State NY Zip 1 2 2 3 3 - 5 2 5 2

eMail P h i l i p . V a n s a n t v o o r d @ d e c . n y . g o v

Phone (5 1 8) 4 0 2 - 9 0 8 4 County Albany

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9,

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Name of MS4

NYS Dept of Environmental Conservation, Division of Operations																																							
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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

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Partner/Coalition Name (con't.)

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SPDES Partner ID - If applicable

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Address

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City

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State

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Zip

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Phone

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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

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- MM2

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- MM3

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- MM4

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- MM5

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- MM6

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Additional tasks/responsibilities

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

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MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 NYS Dept. of Environmental Conservation, Div. of Operations

SPDES ID
N Y R 2 0 A 2 5 2


Section 4 - Certification Statement

The information contained in the 2022 MS4 report is for general information purposes only. The Report Preparer and Duly Authorized Representative assume no responsibility for errors or omissions in the contents. The majority of information contained in the MS4 Report was obtained from nine Regional Operations Supervisors and has not been independently verified for accuracy and completeness. In no event shall the Report Preparer or Duly Authorized Representative be liable for any damages whatsoever, whether in an action of contract, negligence or other tort, arising out of or in connection with the use of this information.

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
T h o m a s E L i n c o l n , P E

Title (Clearly print title of individual signing report)
C h i e f , B u r e a u o f D e s i g n a n d C o n s t

Signature


Date
0 5 / 3 1 2 0 2 3

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.

SPDES ID

Name of MS4/Coalition

NYS Dept of Environmental Conservation, Div of Operations

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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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Name of MS4/Coalition

NYS Dept of Environmental Conservation, Div of Operations

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:

- | | | | | | | |
|---|---------------------|--|--|--|--|--|
| <input type="radio"/> Construction Site Operators Trained | # Trained | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> Direct Mailings | # Mailings | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> Kiosks or Other Displays | # Locations | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> List-Serves | # In List | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> Mailing List | # In List | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> Newspaper Ads or Articles | # Days Run | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> Public Events/Presentations | # Attendees | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> School Program | # Attendees | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input type="radio"/> TV Spot/Program | # Days Run | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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| <input checked="" type="radio"/> Printed Materials: | Total # Distributed | <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table> | | | | |
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Locations (e.g. libraries, town offices, kiosks)

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Other:

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

URL

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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

NYS Dept of Environmental Conservation, Div of Operations									
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SPDES ID

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4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

Provide employee stormwater pollution prevention training to DEC Operations staff.
(REF.GP-0-10-002, PART VII.A.1 Public Education and Outreach on Stormwater Impacts -
SWMPP Development/Implementation pg. 28

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

None

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

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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue to provide employees with stormwater pollution prevention training, Erosion and Sediment Control 4 hour refresher training, and other training opportunities.

MS4 Annual Report Form

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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:

3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

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

- MS4/Coalition Office Annual Report SWMP Plan Comments

Department:

Address:

City: Zip:

Phone:

- Library Annual Report SWMP Plan Comments

Address:

City: Zip:

Phone:

- Other Annual Report SWMP Plan Comments

Address:

City: Zip:

Phone:

- Web Page URL: Annual Report SWMP Plan Comments

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

- eMail Comments

MS4 Annual Report Form

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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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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,

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

Name of MS4/Coalition

NYS Dept of Environmental Conservation, Div of Operations

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.

Provide public access to the annual report on the Operations web site, and Stormwater Management Program Plan (SWMPP) information as it is developed at the Central Office. (Ref GP-0-10-002, Part VIII.A.2. Public Involvement/Participation - SWMP Development / Implementation, pg 51.) For Impaired Waters, assess potential sources of discharge of stormwater POCs, identify potential stormwater pollutant reduction measures, and evaluate the progress in addressing and POCs.

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

Public access to annual report is available on internet. Stormwater related activities are prioritized and are evaluated annually. Use of DEC Operations web site, Contract Reporter and other means to disseminate information will continue. DEC Operations would schedule a public meeting if enough public interest in response to a public notice in ENB. The DEC Operations SWMPP has not been posted on the website but is available at the Central Office and distributed for internal use.

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

			1
--	--	--	---

(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue to post the DEC Operations MS4 Annual Report on the internet. Modify the Stormwater Management Program Plan (SWMPP) materials for posting on the Division of Operations web page. Thereafter, revise plan as required and continue to provide public access to copies of the MS4 Annual report and relevant SWMPP materials.

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

NYS Dept. of Environmental Conservation, Div of Operations									
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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 (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.

(See MCM 3.3a.) Eliminate any illicit discharges that have been found during this reporting period or previous reporting periods.
(Ref. Part VIII.A.3 Illicit Discharge Detection and Elimination (IDDE) - SWMP Development / Implementation, pg. 70.)

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

Regular self-inspections of DEC Storm Water Pollution Prevention operations are ongoing continuously throughout the year wherever there are facilities to be maintained, or where there is current construction. Is an illicit discharge is identified, initiate a project to eliminate it. No illicit discharges were identified or reported during this 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).

Conduct routine and regular self-inspections of DEC Storm Water Pollution Prevention operations where there are facilities to be maintained, or where there is current construction. If an illicit discharges are identified, initiate a project to eliminate it.

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

NYS Dept. of Environmental Conservation, Div. of Operations																													
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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?

--	--	--

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

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

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

09/2004 03/2006 NT

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

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

		0
--	--	---

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

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

		0
--	--	---

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

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

- Notices of Violation #

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

 ○ No Authority
- Stop Work Orders #

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

 ○ No Authority
- Criminal Actions #

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

 ○ No Authority
- Termination of Contracts #

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

 ○ No Authority
- Administrative Fines #

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

 ○ No Authority
- Civil Penalties #

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

 ○ No Authority
- Administrative Orders #

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

 ○ No Authority
- Enforcement Actions or Sanctions #

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

 ○ No Authority
- Other #

					0
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 ○ No Authority

MS4 Annual Report Form

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

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

Name of MS4/Coalition

NYS Dept. of Environmental Conservation, Div. of Operations

SPDES ID

N	Y	R	2	0	A	2	5	2
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Minimum Control Measure 4. Construction Site Stormwater Runoff Control

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

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

How many MS4s contributed to this report?

--	--	--

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

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

		0
--	--	---
3. What percent of active construction sites were inspected during this reporting period? NT

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

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

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

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

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition: NYS Dept. of Environmental Conservation, Div. of Operations

SPDES ID: N Y R 2 0 A 2 5 2

6. con't.:

Submit additional pages as needed.

- MS4/Coalition Office

Department: [Grid]

Address: [Grid]

City: [Grid] Zip: [Grid]-[Grid]

Phone: ([Grid]) [Grid]-[Grid]

- Library

Address: [Grid]

City: [Grid] Zip: [Grid]-[Grid]

Phone: ([Grid]) [Grid]-[Grid]

- Other

Address: [Grid]

City: [Grid] Zip: [Grid]-[Grid]

Phone: ([Grid]) [Grid]-[Grid]

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

URL: [Grid]

URL: [Grid]

MS4 Annual Report Form

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

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

Name of MS4/Coalition

NYS Dept. of Environmental Conservation, Div. of Operations									
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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.

1. Prepare/review construction site Stormwater Pollution Prevention Plan (SWPPP) for disturbance of one acre or more. Measured by number of projects implemented/reviewed during the period.
2. Inspect construction site stormwater runoff control mitigation measures for projects disturbing at least 1 acre. Measured by number of projects inspected during the period. (Ref. Part VIII.A.4. Construction Site Stormwater Runoff Control - SWMP, pgs 71, 76.

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

1. All Div. of Operations construction projects authorized for disturbance of one acre or more during reporting period were reviewed for their SWPPP (0 project statewide).
2. All construction projects disturbing at least one acre during this period were inspected based on their SWPPP (0 statewide). At a minimum projects are inspected at the beginning and closeout of construction. (During this period 0 active construction project disturbed over one acre and 0 disturbed less than one acre.

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

			0
--	--	--	---

(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

1. Continue review of Div of Operations construction projects authorized to disturb one acre or more during period and the associated SWPPP. Measured by number of projects reviewed.
2. Continue inspection of construction projects disturbing at least one acre. Measured by number of projects inspected.

MS4 Annual Report Form

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

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

Name of MS4/Coalition

NYS Dept of Environmental Conservation, Div. of Operations
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SPDES ID

N	Y	R	2	0	A	2	5	2
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Minimum Control Measure 5. Post-Construction Stormwater Management

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

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

How many MS4s contributed to this report?

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

	# Inventoried	# Inspections	# Times Maintained									
<input type="radio"/> Alternative Practices	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>			
<input type="radio"/> Filter Systems	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>			
<input type="radio"/> Infiltration Basins	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>			
<input type="radio"/> Open Channels	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>			
<input type="radio"/> Ponds	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>			
<input type="radio"/> Wetlands	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>				<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td></tr></table>			
<input checked="" type="radio"/> Other	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>1</td></tr></table>			1	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>1</td></tr></table>			1	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td>1</td></tr></table>			1
		1										
		1										
		1										

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

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

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

Other:

D	E	C		O	p	e	r	a	t	i	o	n	s		S	W	M	P	P															
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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

NYS Dept. of Environmental Conservation

SPDES ID

N	Y	R	2	0	A	2	5	2
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

Yes No

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

Yes No

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

Yes No

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

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

		0
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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

NYS Dept. of Environmental Conservation, Div. of Operations																																							
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SPDES ID

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

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

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

Inspect and evaluate any NYSDEC post-construction stormwater management practices in MS4 municipalities and watershed areas.
(Ref. Park VIII.A.5. Post-Construction Stormwater Management - SWMP Development Implementation, pg 64, 71.)

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

1-Mattituck Creek Boat Launch, Southhold, Suffolk County. (Mattituck Inlet/Creek, Low & tidal tributaries.) Pretreatment Trenches, Vegetative Swales/Filters, and Biofilters. Periodically inspected and maintained by Operations staff. Repair as needed.

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).

Conduct periodic inspections of NYSDEC facilities with post-construction stormwater assets and evaluate their effectiveness. NYSDEC owns 1 such facilities.
-Mattituck Creek Boat Launch, Southhold, Suffolk County. (Watershed: Mattituck Inlet/Creek, Low, and tidal tributaries.) Pretreatment Trenches, Vegetative Swales/Filters, and Biofilters.

MS4 Annual Report Form

This report is submitted for the reporting period ending in 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

NYS Dept. of Environmental Conservation, Div. of Operations

SPDES ID

N	Y	R	2	0	A	2	5	2
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Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

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

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

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

NYS Dept. of Environmental Conservation, Div. of Operations

SPDES ID

N	Y	R	2	0	A	2	5	2
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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

				4
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles

--	--	--	--	--
- Catch Basins Inspected and Cleaned Where Necessary #

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

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

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

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

--	--	--	--	--

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

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

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

4. What was the date of the last training?

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

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

		99
--	--	----

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

Name of MS4/Coalition

NYS Dept. of Environmental Conservation, Div. of Operations									
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SPDES ID

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

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

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

During planning and implementation of operations and maintenance projects follow good housekeeping practices at all Department owned facilities/operations that could potentially contribute pollutants to the MS4 system.
(Ref. Park VIII.A.6. Pollution Prevention/Good Housekeeping for Municipal Operations, pg73.)

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

NYSDEC has a variety of Department owned facilities/operations that could potentially contribute pollutants to the MS4 systems. These facilities are located in 9 Regions. These facilities and operations are listed in the SWMP plan, and are managed such that during planning and implementation of maintenance projects, pollution prevention and good housekeeping practices are followed.

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

			9
--	--	--	---

(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

Continue to implement good housekeeping practices at all Department owned facilities/operations located within the 9 Statewide Regions that could potentially contribute pollutants to the MS4 system.

MS4 Annual Report Form

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

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

Name of MS4/Coalition NYS Dept. of Environmental Conservation, Div. of Operations

SPDES ID
N Y R 2 0 A 2 5 2

Additional Watershed Improvement Strategy Best Management Practices

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

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

How many MS4s contributed to this report?

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

MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed			
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
Onondaga Lake Watershed			
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
Greenwood Lake Watershed			
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
Oyster Bay			
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
Peconic Estuary			
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
Oscawana Lake Watershed			
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
LI 27 Embayments			
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. 0 %

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

NYS Dept. of Environmental Conservation, Div. of Operations																													
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SPDES ID

N	Y	R	2	0	A	2	5	2
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3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes No N/A

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

		0
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 %

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

		0
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 %

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

1	0	0
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 %

No Projects Planned

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

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

MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID

N	Y	R	2	0	A	2	5	2
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9. Has your MS4/Coalition developed and implemented a program of native planting?

Yes No N/A

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

Yes No N/A

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

Yes No N/A

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

Yes No N/A

NYSDEC MS4 Report
Supplemental Information

NYSDEC Facilities

(Within MS4 GIS Layer)

SORTED BY: Region / Facility Name

REGION	FACILITY_NAME	COUNTY	ACRES
1	ACCABONAC MARSH TIDAL WETLANDS AREA	SUFFOLK	6.8
1	BAITING HOLLOW TIDAL WETLANDS AREA	SUFFOLK	76.8
1	BELLPORT BAY MARSH TIDAL WETLANDS AREA	SUFFOLK	65.3
1	BROWNS RIVER TIDAL WETLANDS AREA	SUFFOLK	9.8
1	CANOE LAKE NRMA	SUFFOLK	37.0
1	CARMANS RIVER PINE BARRENS STATE FOREST	SUFFOLK	24.8
1	DAVID A. SARNOFF PRESERVE	SUFFOLK	2,696.0
1	EAST BARTLETT PINE BARRENS STATE FOREST	SUFFOLK	99.7
1	FIREPLACE NECK TIDAL WETLANDS AREAS	SUFFOLK	169.5
1	FLAX POND TIDAL WETLANDS AREA	SUFFOLK	146.2
1	HASHAMOMUCK POND WATERWAY ACCESS	SUFFOLK	4.0
1	HAVENS POINT TIDAL WETLANDS AREA	SUFFOLK	78.0
1	HENRY'S HOLLOW PINE BARRENS STATE FOREST	SUFFOLK	188.1
1	INWOOD BAY TIDAL WETLANDS AREA	NASSAU	12.2
1	ISBRANDTSEN MARSH TIDAL WETLANDS AREA	SUFFOLK	67.0
1	JOHNS NECK TIDAL WETLANDS AREA	SUFFOLK	91.0
1	L. GRONLUND MEM. NP @ BARCELONA NECK	SUFFOLK	500.0
1	LAKE RONKONKOMA FAS	SUFFOLK	1.6
1	LAUREL LAKE FAS	SUFFOLK	12.7
1	LIDO BEACH TIDAL WETLANDS AREA	NASSAU	98.5
1	LITTLE NORTHWEST TIDAL WETLANDS AREA	SUFFOLK	34.4
1	LONG BEACH BAY TIDAL WETLANDS AREA	SUFFOLK	431.8
1	LUDLOW CREEK TIDAL WETLANDS AREA	SUFFOLK	136.7
1	LYMAN MARSH TIDAL WETLANDS AREA	SUFFOLK	17.4
1	MATTITUCK CREEK WATERWAY ACCESS	SUFFOLK	17.1
1	MONEYBOGUE BAY TIDAL WETLANDS AREA	SUFFOLK	57.2
1	MORICHES BAY MARINE WAS	SUFFOLK	11.8
1	MOUNT SINAI TIDAL WETLANDS AREA	SUFFOLK	5.7
1	NAMKEE CREEK TIDAL WETLANDS AREA	SUFFOLK	20.8
1	NORTH HAVEN TIDAL WETLANDS AREA	SUFFOLK	7.6
1	NORTHWEST HARBOR TIDAL WETLANDS AREA	SUFFOLK	48.9
1	OCEANSIDE LANDING WATERWAY ACCESS SITE	NASSAU	0.5
1	OREGON MARSH TIDAL WETLANDS AREA	SUFFOLK	28.4
1	OTIS PIKE PRESERVE WMA	SUFFOLK	4,000.0
1	OYSTER BAY WESTERN WATERFRONT TWA	NASSAU	4.1
1	OYSTER PONDS BLS	SUFFOLK	2.2
1	PANAMOKA PINE BARRENS STATE FOREST	SUFFOLK	28.2
1	PEPPERIDGE HALL MARSH TWA	SUFFOLK	41.6
1	PICKMAN-REMMER TIDAL WETLANDS AREA	SUFFOLK	151.5
1	SAG HARBOR TIDAL WETLANDS AREA	SUFFOLK	0.5
1	SHELTER ISLAND TIDAL WETLANDS AREA	SUFFOLK	38.6
1	SHINNECOCK BAY TIDAL WETLANDS AREA	SUFFOLK	11.1
1	STILLMAN CREEK TIDAL WETLANDS AREA	SUFFOLK	32.1
1	TIMBER POINT TIDAL WETLANDS AREA	SUFFOLK	185.0
1	TUTHILL COVE TIDAL WETLANDS AREA	SUFFOLK	6.5

NYSDEC Facilities

(Within MS4 GIS Layer)

SORTED BY: Region / Facility Name

REGION	FACILITY_NAME	COUNTY	ACRES
1	WILDWOOD LAKE FAS	SUFFOLK	1.8
2	BRONX RIVER TRAILWAY	BRONX	1.3
2	BUTLER MANOR WOODS	RICHMOND	18.0
2	GOETHALS POND COMPLEX TWA	RICHMOND	66.8
2	LEMON CREEK TIDAL WETLANDS AREA	RICHMOND	41.8
2	MT. LORETTO UNIQUE AREA	RICHMOND	269.9
2	NORTON BASIN NATURAL RESOURCE AREA	QUEENS	10.9
2	OLD PLACE CREEK TIDAL WETLANDS AREA	RICHMOND	69.0
2	SAW MILL CREEK WETLAND AREA	RICHMOND	5.4
2	UDALL'S COVE AND RAVINE NRA	QUEENS	41.4
2	ZUCKERMAN NATURAL RESOURCE AREA	RICHMOND	2.7
3	BAXTERTOWN WOODS WMA	DUTCHESS	250.0
3	BIG BUCK MUA	PUTNAM	146.2
3	BLUESTONE WILD FOREST	ULSTER	3,000.0
3	BOG BROOK UNIQUE AREA	PUTNAM	148.1
3	CRANBERRY MOUNTAIN WMA	PUTNAM	1,090.0
3	CROTON GORGE UNIQUE AREA	WESTCHESTER	21.0
3	ESOPUS CREEK PFRA	ULSTER	
3	GREAT SWAMP WMA	PUTNAM	444.0
3	KOWAWESE UNIQUE AREA	ORANGE	208.9
3	MINISCEONGO CREEK ERR	ROCKLAND	24.0
3	MONTROSE POINT STATE FOREST	WESTCHESTER	51.0
3	MOODNA CREEK ERR	ORANGE	65.0
3	NINHAM MT. MUA	PUTNAM	1,023.0
3	PIERMONT MARSH ERR	ROCKLAND	
3	RONDOUT CREEK PFRA	ULSTER	
3	STEWART STATE FOREST	ORANGE	6,700.0
3	STONY KILL ENVIRONMENTAL ED. CENTER	DUTCHESS	1,036.0
3	WHITE POND MUA	PUTNAM	276.1
5	SARATOGA SANDPLAINS WMA	SARATOGA	59.0
6	ORISKANY FLATS WMA	ONEIDA	750.0
6	UTICA MARSH WMA	ONEIDA	213.0
7	CICERO SWAMP WMA	ONONDAGA	4,947.0
7	KIRKWOOD SUB-OFFICE	BROOME	
7	LIMESTONE CREEK PFRA	ONONDAGA	
7	NINE MILE CREEK PFRA	ONONDAGA	11.7
7	REYNOLDS GAME FARM	TOMPKINS	163.0
7	STANLEY J. HAMLIN MARSH WMA	ONONDAGA	1,686.0
7	THREE RIVERS WMA	ONONDAGA	3,607.0
8	BRADDOCK BAY WMA	MONROE	2,402.0
8	CATHARINE CREEK PFRA	SCHUYLER	
8	SLATER CREEK FAS	MONROE	
9	CAZENOVIA CREEK FWMA	ERIE	127.0
9	GREAT BAEHRE SWAMP WMA	ERIE	271.0
9	HAMPTON BROOK WOODS WMA	ERIE	61.0

NYSDEC Facilities

(Within MS4 GIS Layer)

SORTED BY: Region / Facility Name

REGION	FACILITY_NAME	COUNTY	ACRES
9	REINSTEIN WOODS NATURE PRESERVE UA	ERIE	300.0
9	TILLMAN ROAD WMA	ERIE	234.0

Count: 92

7/22/2020