

MS4 Municipal Compliance Certification(MCC) Form

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

Name of MS4 Village of Kings Point

SPDES ID
N Y R 2 0 A 4 5 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 MI Last Name

D o m e n i c k S t a n c o

Title

S u p e r i n t e n d e n t o f P u b l i c W o r k s

Address

3 2 S t e p p i n g s t o n e L a n e

City State Zip

K i n g s P o i n t N Y 1 1 0 2 4 -

eMail

d s t a n c o @ v i l l a g e o f k i n g s p o i n t . o r g

Phone County

(5 1 6) 4 8 2 - 7 8 3 0 N a s s a u

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2023

SPDES ID

Name of MS4 Village of Kings Point

NYR 20A 451

Section 2 - Contact Information

Important Instructions - Please Read

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2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
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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).

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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: G o m i e MI: Last Name: P e r s a u d

Title: V i l l a g e C l e r k - T r e a s u r e r

Address: 3 2 S t e p p i n g s t o n e L a n e

City: K i n g s P o i n t State: N Y Zip: 1 1 0 2 4 -

eMail: g p e r s a u d @ v i l l a g e o f k i n g s p o i n t . o r g

Phone: (5 1 6) 5 0 4 - 1 0 0 0 County: N a s s a u

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Name of MS4 Village of Kings Point

SPDES ID
N Y R 2 0 A 4 5 1

Section 2 - Contact Information

Important Instructions - Please Read

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5. Report Preparer (Consultants may provide company name in the space provided).

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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 MI Last Name

M e r e d i t h A B y e r s

Title

D & B E n g i n e e r s a n d A r c h i t e c t s

Address

3 3 0 C r o s s w a y s P a r k D r i v e

City State Zip

W o o d b u r y N Y 1 1 7 9 7 -

eMail

m b y e r s @ d b - e n g . c o m

Phone County

(5 1 6) 3 6 4 - 9 8 9 0 N a s s a u

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9,

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Name of MS4

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SPDES ID

N	Y	R	2	0	A	4	5	1
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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

N	a	s	s	a	u	C	o	u	n	t	y	S	t	o	r	m	w	a	t	e	r
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Partner/Coalition Name (con't.)

C	o	a	l	i	t	i	o	n
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SPDES Partner ID - If applicable

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Address

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City

W	e	s	t	b	u	r	y
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State

N	Y
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Zip

1	1	5	9	0	-
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eMail

s	t	o	r	m	w	a	t	e	r	2	@	n	a	s	s	a	u	c	o	u	n	t	y	n	y	.	g	o	v
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Phone

(

5	1	6
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)

5	7	1
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7	5	0	8
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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

M	u	l	t	i	p	l	e	T	a	s	k	s
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- MM2

M	u	l	t	i	p	l	e	T	a	s	k	s
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- MM3

M	u	l	t	i	p	l	e	T	a	s	k	s
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- MM4
- MM5
- MM6

M	u	l	t	i	p	l	e	T	a	s	k	s
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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, 2023

Name of MS4 Village of Kings Point

SPDES ID

NYR 20A 451

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

Manhasset Bay Protection

Partner/Coalition Name (con't.)

Committee

SPDES Partner ID - If applicable

NYR 20A

Address

15 Vanderventer Avenue

City

Port Washington

State

NY

Zip

11050 - 3710

eMail

mbpcExec@gmail.com

Phone

(516) 869-7983

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 Multiple Tasks
- MM2 Multiple Tasks
- MM3 Water Quality Monitoring; Other
- MM4 Runoff Monitoring; Education
- MM5 Runoff Monitoring; Education
- MM6 Education

Additional tasks/responsibilities

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

Empty text box for additional information.

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N Y R 2 0 A 4 5 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.

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If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

T o w n o f N o r t h H e m p s t e a d W Q I P

Partner/Coalition Name (con't.)

P r o j e c t

SPDES Partner ID - If applicable

M U L T I P L E

Address

2 2 0 P l a n d o m e R o a d

City

M a n h a s s e t

State

N Y

Zip

1 1 0 3 0 -

eMail

Phone

(5 1 6) 8 6 9 - 6 3 1 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
- MM2
- MM3 O u t f a l l M a p p i n g
- 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,

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Name of MS4

V	i	l	l	a	g	e	o	f	K	i	n	g	s	P	o	i	n	t
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SPDES ID

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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.

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If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

T	o	w	n	o	f	N	o	r	t	h	H	e	m	p	s	t	e	a	d
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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

M	a	n	h	a	s	s	e	t
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State

N	Y
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Zip

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eMail

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Phone

(

5	1	6
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)

8	6	9
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6	3	1	1
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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

S	.	T	.	O	.	P	.	P	r	o	g	r	a	m
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
- MM2

S	.	T	.	O	.	P	.	P	r	o	g	r	a	m
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- MM3

3	1	1	C	a	l	l	C	e	n	t	e	r
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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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Name of MS4 Village of Kings Point

SPDES ID
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Section 3 - Partner Information

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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

G r e a t N e c k P a r k D i s t r i c t

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

N Y R 2 0 A

Address

6 5 A r r a n d a l e A v e n u e

City

G r e a t N e c k

State

N Y

Zip

1 1 0 2 4 -

eMail

g n p a r k s @ g r e a t n e c k p a r k s . o r g

Phone

(5 1 6) 4 8 7 - 7 6 6 5

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 P a r k M a i n t e n a n c e & O p e r a t i o n s

Additional tasks/responsibilities

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

[Empty text box for additional tasks/responsibilities]

MS4 Municipal Compliance Certification(MCC) Form

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Name of MS4 Village of Kings Point

SPDES ID
N Y R 2 0 A 4 5 1

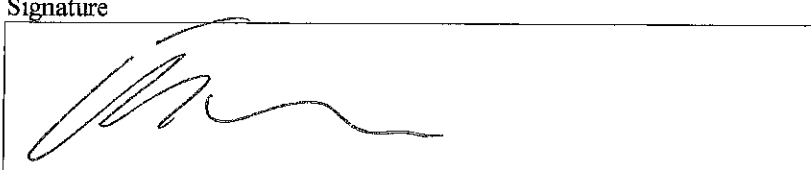
Section 4 - Certification Statement

"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
K o u r o s T o r k a n

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

Signature


Date
0 5 / 3 1 / 2 0 2 3

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

Submit Form

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

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

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

Village of Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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

h	t	t	p	s	:	/	/	m	a	n	h	a	s	s	e	t	b	a	y	p	r	o	t	e	c	t	i	o	n
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URL

URL

URL

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 Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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3. Web Page con't.: Provide specific web addresses - not home page.

URL

w	w	w	.	v	i	l	l	a	g	e	o	f	k	i	n	g	s	p	o	i	n	t	.	o	r	g	/	n	o	d	e
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URL

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URL

URL

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

Village of Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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's Public Education and Outreach program will be tailored to describe topics related to the impacts of stormwater discharges on local waterbodies, pollutants of concern and their sources, and the steps that can be taken to reduce pollutants in stormwater runoff and non-stormwater discharges. The Village's program will make special note of the discharge of pathogens and nitrogen to the Long Island Sound and the discharge of pathogens to Manhasset Bay and its tidal tributaries.

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 mailings as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Education and Outreach program requirements. The Village conducted four direct mailings related to stormwater and pollution prevention in this reporting period.

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 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 mailings to residents 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 related to stormwater and/or pollution prevention in the next reporting cycle.

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

Village of Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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4.a. If this report was made available on the internet, what date was it posted?

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

0	5
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1	5
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 /

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

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

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

Yes No

If Yes, what was the date of the meeting?

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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

Village of Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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 (eg., pathogens and nitrogen to Long Island Sound and pathogens to Manhasset Bay) and encourage the general public and residents to become involved in stormwater management and environmental stewardship events.

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

The Village has chosen to evaluate the number of cleanup events held as an indicator for measuring the overall effectiveness of the Village's compliance with the Public Involvement and Participation program requirements. There were two cleanup events hosted by the Manhasset Bay Protection Committee in the reporting period. The Village continues to promote cleanup events to Village residents.

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 evaluating the number of 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 continue to support programs and cleanup events related to stormwater management and environmental stewardship.

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 Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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.

The Village Illicit Discharge Detection and Elimination program will focus on identifying, locating, eliminating, reducing and preventing illicit discharges to the maximum extent practicable, including the discharge of pathogens and nitrogen to the Long Island Sound and the discharge of pathogens to 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 illicit discharges confirmed as an indicator for measuring the overall effectiveness of the Village's compliance with the Illicit Discharge Detection and Elimination program requirements. There were no illicit discharges detected during 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 will continue to follow the procedures for Illicit Discharge Detection and Elimination described in the Village of Kings Point Written Procedures for MCM3: IDDE and 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 Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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?**

		4
--	--	---
- 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 #

--	--	--	--	--

 ○ No Authority
- Stop Work Orders #

--	--	--	--	--

 ○ No Authority
- Criminal Actions #

--	--	--	--	--

 ○ No Authority
- Termination of Contracts #

--	--	--	--	--

 ○ No Authority
- Administrative Fines #

--	--	--	--	--

 ○ No Authority
- Civil Penalties #

--	--	--	--	--

 ○ No Authority
- Administrative Orders #

--	--	--	--	--

 ○ No Authority
- Enforcement Actions or Sanctions #

--	--	--	--	--

 ○ No Authority
- Other #

--	--	--	--	--

 ○ 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 Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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?

		4
--	--	---

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

		2
--	--	---

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

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

 %

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

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

 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

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

MS4 Annual Report Form

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

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 4 5 1

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

B u i l d i n g D e p a r t m e n t

Address

3 2 S t e p p i n g s t o n e L a n e

City

K i n g s P o i n t

N Y

Zip

1 1 0 2 4 -

Phone

(5 1 6) 5 0 4 - 1 0 0 0

○ Library

Address

City

Zip

-

Phone

() -

○ Other

Address

City

Zip

-

Phone

() -

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

URL

URL

MS4 Annual Report Form

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

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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 Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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 Stormwater Runoff Control program will provide equivalent protection to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activity. This includes reviewing SWPPPs submitted to the Village for projects disturbing an acre or greater of land. The review process will take note of any potential discharges of pathogens and nitrogen to the Long Island Sound and discharges of pathogens to 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 SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Village's compliance with the Construction Site Stormwater Runoff Control program requirements. The Village reviewed and commented on the four SWPPPs submitted to the Village in this reporting period.

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

			1
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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The Village plans to continue evaluating the number of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Village's compliance with the Construction Site Storm Water Runoff Control program requirements in the next reporting cycle. The Village will continue reviewing SWPPPs as they are submitted for comment and approval. The Village will continue to follow the Village's Written Procedures for MCM 4: Construction Site Storm Water Runoff Control.

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 Village of Kings Point

SPDES ID
N Y R 2 0 A 4 5 1

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?

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 checked="" type="radio"/> Alternative Practices	 0	 0	 0
<input checked="" type="radio"/> Filter Systems	 1 6	 1 6	 1 6
<input checked="" type="radio"/> Infiltration Basins	 0	 0	 0
<input checked="" type="radio"/> Open Channels	 0	 0	 0
<input checked="" type="radio"/> Ponds	 0	 0	 0
<input checked="" type="radio"/> Wetlands	 0	 0	 0
<input checked="" type="radio"/> Other	 2 6	 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:

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 Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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
--	--	---

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

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

 %

MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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.

The Village's Post-Construction Stormwater Management program will address stormwater runoff from regulated (ie., projects with land disturbances of an acre or greater) new development and redevelopment projects to the Village's MS4. This includes the enforcement of the Village's Stormwater Retention Local Law during the SWPPP review process, which requires on-site retention facilities of new construction of impervious surfaces greater than 500 square feet.

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

The Village has chosen to evaluate the number of SWPPPs reviewed to be in compliance with the Village's Stormwater Retention Local Law as an indicator for measuring the overall effectiveness of the Village's compliance with the Post-Construction Stormwater Management program requirements. The Village reviewed and commented on the four SWPPPs submitted to the Village in this reporting period.

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

			1
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(ex.: samples/participants/events)

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

Yes No

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

Yes No

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

The 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 Post-Construction Stormwater Management program requirements in the next reporting cycle. The Village will review SWPPPs as they are submitted to the Village for comment and approval. The Village will continue to follow the Village's Written Procedures for MCM 5: Post-Construction Stormwater Management.

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 Village of Kings Point

SPDES ID
N Y R 2 0 A 4 5 1

Minimum Control Measure 6. Stormwater Management for Municipal Operations

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

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

How many MS4s contributed to this report?

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

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

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 Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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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

			3	5
--	--	--	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles

1	0	0	0
---	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary #

			1	3
--	--	--	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #

			1	7
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs.

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

		4	1	7
--	--	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

			2	.	0
--	--	--	---	---	---

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?

0	6	/	0	7	/	2	0	2	2
---	---	---	---	---	---	---	---	---	---

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

		2
--	--	---

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,

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

Village of Kings Point

SPDES ID

N	Y	R	2	0	A	4	5	1
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7. Evaluating Progress Toward Measurable Goals MCM 6

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

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

The Village Municipal Stormwater Management and Good Housekeeping program will address operations that collect, store or release sediments, wastes or other potential pollutants with special consideration for discharges of pathogens and nitrogen to the Long Island Sound and discharges of pathogens to Manhasset Bay.

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

The Village has chosen to evaluate its street sweeping program as an indicator for measuring the overall effectiveness of the Village's compliance with the Municipal Stormwater Management and Good Housekeeping program requirements. The Village swept 35 acres of parking lots and 1,000 miles of streets during 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 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 its street sweeping program during the next reporting cycle. The Village will continue to follow the BMPs outlined in the Village of Kings Point Best Management Practices for Municipal Facilities and Operations guidance document and the NYSDEC Municipal Pollution Prevention and Good Housekeeping Assistance Document as necessary.