



### MS4 Annual Report Cover Page

MCC form for period ending March 9, 2018

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, 2018

Name of MS4

SPDES ID

## 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
<input type="text" value="M"/> <input type="text" value="i"/> <input type="text" value="c"/> <input type="text" value="h"/> <input type="text" value="a"/> <input type="text" value="e"/> <input type="text" value="l"/>	<input type="text" value="B"/>	<input type="text" value="S"/> <input type="text" value="p"/> <input type="text" value="e"/> <input type="text" value="c"/> <input type="text" value="h"/> <input type="text" value="t"/>

Title

Address

City	State	Zip
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eMail

Phone	County
<input "="" type="text" value="("/> <input type="text" value="8"/> <input type="text" value="4"/> <input type="text" value="5"/> <input type="text" value=")"/> <input type="text" value="3"/> <input type="text" value="5"/> <input type="text" value="7"/> <input type="text" value="-"/> <input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="R"/> <input type="text" value="o"/> <input type="text" value="c"/> <input type="text" value="k"/> <input type="text" value="l"/> <input type="text" value="a"/> <input type="text" value="n"/> <input type="text" value="d"/>

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

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

Name of MS4

Town of Ramapo

SPDES ID

N Y R 2 0 A 2 0 2

**Section 2 - Contact Information**

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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

F r e d

MI

Last Name

B r i n n

Title

S u p e r i n t e n d e n t o f H i g h w a y s

Address

1 6 P i o n e e r A v e n u e

City

T a l l m a n

State

N Y

Zip

1 0 9 8 2 -

eMail

B r i n n F @ R a m a p o - n y . g o v

Phone

( 8 4 5 ) 3 5 7 - 0 9 0 3

County

R o c k l a n d

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

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

SPDES ID

Name of MS4

**Section 2 - Contact Information**

Important Instructions - Please Read

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- 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
<input type="text" value="M"/> <input type="text" value="i"/> <input type="text" value="c"/> <input type="text" value="h"/> <input type="text" value="a"/> <input type="text" value="e"/> <input type="text" value="l"/>	<input type="text" value="J"/>	<input type="text" value="S"/> <input type="text" value="a"/> <input type="text" value="d"/> <input type="text" value="o"/> <input type="text" value="w"/> <input type="text" value="s"/> <input type="text" value="k"/> <input type="text" value="i"/>

Title

Address

City	State	Zip
<input type="text" value="T"/> <input type="text" value="a"/> <input type="text" value="l"/> <input type="text" value="l"/> <input type="text" value="m"/> <input type="text" value="a"/> <input type="text" value="n"/>	<input type="text" value="N"/> <input type="text" value="Y"/>	<input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="8"/> <input type="text" value="2"/> <input type="text" value="-"/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>

eMail

Phone	County
( <input type="text" value="8"/> <input type="text" value="4"/> <input type="text" value="5"/> ) <input type="text" value="3"/> <input type="text" value="5"/> <input type="text" value="7"/> <input type="text" value="-"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="9"/> <input type="text" value="1"/>	<input type="text" value="R"/> <input type="text" value="o"/> <input type="text" value="c"/> <input type="text" value="k"/> <input type="text" value="l"/> <input type="text" value="a"/> <input type="text" value="n"/> <input type="text" value="d"/>

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

MCC form for period ending March 9, 2018

Name of MS4

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.

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

C o r n e l l C o o p e r a t i v e E x t e n s i o n o f

Partner/Coalition Name (con't.)

R o c k l a n d

SPDES Partner ID - If applicable

N Y R 2 0

Address

1 0 P a t r i o t H i l l s D r i v e

City

S t o n y P o i n t

State

N Y

Zip

1 0 9 8 0 -

eMail

p w t 2 @ c o r n e l l . e d u

Phone

( 8 4 5 ) 4 2 9 - 7 0 8 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 P r i n t e d M a t e r i a l s D i s t r i b u t i o n
- MM2 P u b l i c E v e n t s / P r e s e n t a t i o n s
- MM3
- MM4
- MM5
- MM6 E m p l o y e e E d u c a t i o n

Additional tasks/responsibilities

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

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

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

Name of MS4

SPDES ID

**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.

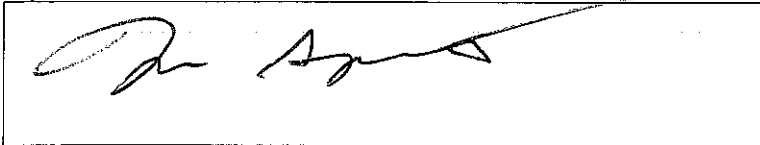
First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature



Date

/   /

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

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



**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

Town of Ramapo

SPDES ID

N	Y	R	2	0	A	2	0	2
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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


URL


URL


URL


### MS4 Annual Report Form

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Name of MS4/Coalition 

Town of Ramapo														
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SPDES ID  

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### Minimum Control Measure 1. Public Education and Outreach

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

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

How many MS4s contributed to this report? 

			1
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#### 1. Targeted Public Education and Outreach Best Management Practices

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

- Construction Sites
- General Stormwater Management Information
- Household Hazardous Waste Disposal
- Illicit Discharge Detection and Elimination
- Infrastructure Maintenance
- Smart Growth
- Storm Drain Marking
- Green Infrastructure/Better Site Design/Low Impact Development
- Other: 

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- Pesticide and Fertilizer Application
- Pet Waste Management
- Recycling
- Riparian Corridor Protection/Restoration
- Trash Management
- Vehicle Washing
- Water Conservation
- Wetland Protection
- None

Other: 

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#### 2. Specific audiences targeted during this reporting period:

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

Other: 

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### MS4 Annual Report Form

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Name of MS4/Coalition 

Town of Ramapo
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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 checked="" type="radio"/> Construction Site Operators Trained | # Trained           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>5</td><td>8</td></tr></table>  |   |   |   | 5 | 8 |
|  |                     |  | 5 | 8 |   |   |   |
| <input type="radio"/> Direct Mailings                                | # Mailings          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays            | # Locations         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td>8</td></tr></table>   |   |   |   |   | 8 |
|  |                     |  |   | 8 |   |   |   |
| <input type="radio"/> List-Serves                                    | # In List           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Mailing List                                   | # In List           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Newspaper Ads or Articles                      | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations         | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>1</td><td>7</td></tr></table>  |   |   |   | 1 | 7 |
|  |                     |  | 1 | 7 |   |   |   |
| <input type="radio"/> School Program                                 | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> TV Spot/Program                     | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>1</td><td>1</td></tr></table>  |   |   |   | 1 | 1 |
|  |                     |  | 1 | 1 |   |   |   |
| <input checked="" type="radio"/> Printed Materials:                  | Total # Distributed | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td>4</td><td>2</td><td>4</td></tr></table> |   |   | 4 | 2 | 4 |
|  |                     | 4  | 2 | 4 |   |   |   |

Locations (e.g. libraries, town offices, kiosks)

R	a	m	a	p	o		T	o	w	n		H	a	l	l	a	n	d	
P	u	b	l	i	c		W	o	r	k	s		D	e	p	t	.		

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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f	/	1	2	9	3	8	1	1	6	8	9	-	C	e	a	s	e	-	t	h	e	-	G	r	e	a	s	e	.	p	d
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URL  

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y	s	-	C	l	e	a	n	.	p	d	f																				

### MS4 Annual Report Form

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Name of MS4/Coalition

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#### 3. Web Page cont.: Provide specific web addresses - not home page.

URL

URL

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Town of Ramapo

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

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

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

The measurable goal was to sponsor or facilitate at least one class that would educate the public and /or contractors with respect to a particular pollutant. Through our contact with Cornell Cooperative Extension, nine (9) classes were held on the County Fertilizer Law and eleven (11) radio shows were broadcast on WRRCR on a variety of stormwater related topics.

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

Seventeen (17) people from Ramapo attended the classes regarding the Fertilizer Law. Eleven (11) half hour radio shows were broadcast over local airways. Many shows received telephone calls pertaining to the topics of discussion.

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

		2	8
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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).**

We hope to sponsor or facilitate at least several classes next year.

Ramapo also intends to be involved with a minimum of six (6) additional radio programs on stormwater related issues.

**MS4 Annual Report Form**

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2	0	1	8
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Name of MS4/Coalition 

Town of Ramapo
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SPDES ID

N	Y	R	2	0	A	2	0	2
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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.**

Our measureable goal was to distribute a minimum of 175 pieces of educational literature at the DPW and Town Hall offices. We surpassed this goal by distributing over 400 pieces of educational materials at three different locations in Ramapo offices as well at CCE events in Ramapo

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

This activity seems to be effective because the brochures are being placed only when the existing materials are being taken by the public.

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

			8
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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).**

We intend to distribute a minimum of 175 more pieces of educational literature at the DPW and Town Hall Offices of the Building Dept. and Town Clerk's Office in the next reporting year as well as CCE events held in Ramapo.

## MS4 Annual Report Form

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Name of MS4/Coalition Town of Ramapo

SPDES ID  
N Y R 2 0 A 2 0 2

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

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

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

How many MS4s contributed to this report?     1

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

<input checked="" type="radio"/> Cleanup Events	# Events	
<input checked="" type="radio"/> Comments on SWMP Received	# Comments	
<input checked="" type="radio"/> Community Hotlines	Phone # ( <span style="border: 1px solid black; padding: 0 5px;">8</span> <span style="border: 1px solid black; padding: 0 5px;">4</span> <span style="border: 1px solid black; padding: 0 5px;">5</span> )	3 5 7 - 0 5 9 1
Phone # ( <span style="border: 1px solid black; padding: 0 5px;"> </span> <span style="border: 1px solid black; padding: 0 5px;"> </span> )	-	
Phone # ( <span style="border: 1px solid black; padding: 0 5px;"> </span> <span style="border: 1px solid black; padding: 0 5px;"> </span> )	-	
Phone # ( <span style="border: 1px solid black; padding: 0 5px;"> </span> <span style="border: 1px solid black; padding: 0 5px;"> </span> )	-	
Phone # ( <span style="border: 1px solid black; padding: 0 5px;"> </span> <span style="border: 1px solid black; padding: 0 5px;"> </span> )	-	
Phone # ( <span style="border: 1px solid black; padding: 0 5px;"> </span> <span style="border: 1px solid black; padding: 0 5px;"> </span> )	-	
<input type="radio"/> Community Meetings	# Attendees	
<input checked="" type="radio"/> Plantings	Sq. Ft.	1 5 0
<input checked="" type="radio"/> Storm Drain Markings	# Drains	8 9
<input type="radio"/> Stakeholder Meetings	# Attendees	
<input type="radio"/> Volunteer Monitoring	# Events	
<input type="radio"/> Other:		

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

<input type="radio"/> List-Serve	# In List	
<input type="radio"/> Newspaper Advertising	# Days Run	
<input type="radio"/> TV/Radio Notices	# Days Run	
<input type="radio"/> Other:		

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

### MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 2 0 2

**2. URL(s) con't.:**

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

URL

h t t p : / / w w w . r a m a p o . o r g /  
( N o t i f i c a t i o n i s o n m a i n p a g e )

URL

URL

URL

URL

URL

URL



### MS4 Annual Report Form

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

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

Name of MS4/Coalition

SPDES ID  

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

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

URL


URL


URL


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URL


URL


URL




**MS4 Annual Report Form**

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

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

Name of MS4/Coalition: 

Town of Ramapo
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SPDES ID

N	Y	R	2	0	A	2	0	2
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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	/	1	0	/	2	0	1	8
---	---	---	---	---	---	---	---	---	---

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

3	6	5
---	---	---

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?

		/			/				
--	--	---	--	--	---	--	--	--	--

If No, is one planned?

Yes  No

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

Yes  No

If No, is one planned for each?

Yes  No

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

Yes  No

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Town of Ramapo
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SPDES ID

N	Y	R	2	0	A	2	0	2
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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.**

Our goal was to continue going door to door to interact with residents to inform them about the storm drain markings and the importance of clean stormwater in relation to our drinking water supply. A numeric goal was not set due to the uncertainty of how many residents would be home or answer the door in targeted areas.

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

Forty-one (41) of the one hundred and nine (109) attempts had individuals answer the door and listen to the information being presented. Those that were spoken with for the most part were receptive to the concepts. Each house also received a pamphlet explaining the purpose of the decals whether they answered the door or not.

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

		4	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).**

We hope to continue with this program in the next calendar year. We also hope to include literature dissemination totals of brochures delivered to residents who live along streams and waterways.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Town of Ramapo
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SPDES ID  

N	Y	R	2	0	A	2	0	2
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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 measurable goal was to post our Annual Report on the Town's website a couple of weeks before the close of the public comment period in May.

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

It is difficult to observe how effective posting our Annual Report is on the website particularly when no formal comments are obtained. We can tell though that more people are becoming more conscious of the environment and the impact it has on their quality of life by the types of inquiries that are made. Whether that is a function of the Annual Report being on the website or just a generally more informed public is unknown.

**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).**

We will at a minimum have the Annual Report posted on the internet at least a week before we close the public comment period in May.



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

SPDES ID

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

- Broken Lines From Sanitary Sewer
- Industrial Connections
- Cross Connections
- Inflow/Infiltration
- Failing Septic Systems
- Pump Station Failure
- Floor Drains Connected To Storm Sewers
- Sanitary Sewer Overflows
- Illegal Dumping
- Straight Pipe Sewer Discharges

Other:  None

H y d r a u l i c o i l s p i l l

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

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

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

7. Has the storm sewershed mapping been completed in this reporting period?  Yes  No  
If No, approximately what percent was completed in this reporting period?    %

8. Is the above information available in GIS?  Yes  No  
Is this information available on the web?  Yes  No  
If Yes, provide URL(s):

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

URL





**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Town of Ramapo

SPDES ID

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

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

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

Since the beginning of the original 5 year permit period, the Town of Ramapo has been flushing our sanitary trouble areas to prevent sewer blockages and resulting sewer discharges. We have reached our goal of flushing at least 5 miles in each of the past 14 years. This year we flushed 5.2 miles in Unincorporated Ramapo.

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

This activity has been effective in pro-actively removing grease and paper buildup on the inner walls of our sewer lines. We see this working every day by virtue of the reduction of call outs we receive reporting blockages both during and after work hours.

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

	2	4	8
--	---	---	---

(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).**

We intend to continue flushing a minimum of 5 miles of sanitary sewers during the next reporting year.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Town of Ramapo
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SPDES ID  

N	Y	R	2	0	A	2	0	2
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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.**

Our measurable goal was to inspect and photograph each of our 190 known outfall structures and look for illicit discharges. It was also to use the work sheets designed by the Center for Watershed Protection and endorsed by the DEC.

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

All of Ramapos' outfalls were inspected and photographed and the proper forms were utilized. No illicit discharges were found.

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

1	9	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 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).**

We intend to continue inspecting each of our known outfalls again this Summer. We will continue to use the NYSDEC endorsed forms again and photograph each outfall.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Town of Ramapo

SPDES ID

N	Y	R	2	0	A	2	0	2
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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? 

		1
--	--	---

**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?**

	1	7
--	---	---

**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 # 

			1	2
--	--	--	---	---

 ○ 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, 

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

Name of MS4/Coalition 

Town of Ramapo
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SPDES ID  

N	Y	R	2	0	A	2	0	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
--	--	---

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

		2
--	--	---

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

	2	1
--	---	---

3. What percent of active construction sites were inspected during this reporting period?  Yes  No  NT  

	6	2
--	---	---

 %

4. What percent of active construction sites were inspected more than once?  Yes  No  NT  

	5	7
--	---	---

 %

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

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

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

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

SPDES ID

**6. con't.:**

Submit additional pages as needed.

● MS4/Coalition Office

Department

Address

City          Zip      -

Phone  
        -

○ Library

Address

City   Zip  -

Phone  
      -

○ Other

Address

City   Zip  -

Phone  
      -

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

URL

URL

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Town of Ramapo
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SPDES ID  

N	Y	R	2	0	A	2	0	2
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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.**

Our measurable goal is to review 100% of the SWPPPs that enter our Office for compliance with NYSDEC and local requirements.

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

This measure is very effective because most of the SWPPPs submitted need to be reviewed multiple times to be compliant. Ed Moran reviews the plans for the most part on behalf of the Town. Without these multiple reviews, propose plans will likely be designed incorrectly in terms of function and size.

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

		1	7
--	--	---	---

(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).**

Next year we again anticipate reviewing all of the SWPPPs that are submitted to the DPW Office.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Town of Ramapo
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SPDES ID  

N	Y	R	2	0	A	2	0	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? 

		1
--	--	---

**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"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>			
<input checked="" type="radio"/> Filter Systems	<table border="1"><tr><td></td><td>4</td><td></td></tr></table>		4		<table border="1"><tr><td>5</td><td>2</td><td></td></tr></table>	5	2		<table border="1"><tr><td>1</td><td>2</td><td></td></tr></table>	1	2	
	4											
5	2											
1	2											
<input checked="" type="radio"/> Infiltration Basins	<table border="1"><tr><td>2</td><td>1</td><td></td></tr></table>	2	1		<table border="1"><tr><td></td><td>0</td><td></td></tr></table>		0		<table border="1"><tr><td></td><td>0</td><td></td></tr></table>		0	
2	1											
	0											
	0											
<input type="radio"/> Open Channels	<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>			
<input checked="" type="radio"/> Ponds	<table border="1"><tr><td>2</td><td>3</td><td></td></tr></table>	2	3		<table border="1"><tr><td></td><td>0</td><td></td></tr></table>		0		<table border="1"><tr><td></td><td>0</td><td></td></tr></table>		0	
2	3											
	0											
	0											
<input type="radio"/> Wetlands	<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>			
<input type="radio"/> Other	<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>			

**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:

R a i n    G a r d e n s



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Town of Ramapo
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SPDES ID  

N	Y	R	2	0	A	2	0	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?**

		6
--	--	---

 %

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Town of Ramapo
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SPDES ID  

N	Y	R	2	0	A	2	0	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.**

Our measurable goal was to continue documenting projects in which SWPPPs are required and to perform final inspections on the water quality devices when the Notices of Termination are to be filed. It was also to clean out the one organic filter the Town owns and begin maintenance on the stormwater ponds that were recently transferred to us.

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

Our master spread sheet has been updated so its easy to see all of our projects in one file. We continue to maintain our digitally organized weekly reports on E&SC inspections on those projects that have greater than an acre of disturbance.

**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).**

Our goal is to continue documenting the projects that require SWPPPs. We will perform final inspections on those projects that are looking for their Notices of Termination. We will also continue to maintain our organic filter as least quarterly and put our new ponds on an inspection schedule.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Town of Ramapo

SPDES ID

N	Y	R	2	0	A	2	0	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.**

Our measurable goal was to purchase at least 12 structural devices that would assist the Town in keeping priority pollutants from entering the storm drain system. This past year we purchased and installed 16 retrofit inlet covers. (grate plates)

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

We are noticing that both the stream and wterbody areas downstream and the piping system itself are noticeably cleaner then they have been in the past.

**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).**

We anticipate purchasing at least twelve (12) more of these structural devices in the upcoming year. Since the catchbasins immediately upstream from Lake Suzanne in the Town's jurisdiction are almost complete, we will install future grate plates on other catchbasins that lead to other tributaries of the Pascack Brook.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Town of Ramapo
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SPDES ID  

N	Y	R	2	0	A	2	0	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? 

		1
--	--	---

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

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

**MS4 Annual Report Form**

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

2	0	1	8
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Name of MS4/Coalition 

Town of Ramapo
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SPDES ID  

N	Y	R	2	0	A	2	0	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	7
--	--	--	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

			8	7
--	--	--	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

		1	0	9
--	--	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

			1	2
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

			1	8
--	--	--	---	---
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

	4	1	5	8
--	---	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

	2	7	7	.	5
--	---	---	---	---	---

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

				2
--	--	--	--	---

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

1	2
---	---

 / 

0	7
---	---

 / 

2	0	1	7
---	---	---	---

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

	4	5
--	---	---

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

	4	5
--	---	---

 %

**MS4 Annual Report Form**

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

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Name of MS4/Coalition 

Town of Ramapo
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SPDES ID

N	Y	R	2	0	A	2	0	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 (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 previous measureable goal was to sweep seventy-five (75) miles of roadway in Unincorporated Ramapo but the goal was modified downward last year. Hopefully it was just a one year anomaly because this year we were back above our goal by sweeping 87 miles of roadway in Unincorporated Ramapo.

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

By continuing to sweep a significant amount of miles, less sediment and trash is deposited in our catchbasins that flow into our water bodies.

**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).**

We hope to return to our original street sweeping goal of at least 75 miles in the upcoming stormwater year.

**MS4 Annual Report Form**

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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.**

Initially, our measurable goal was to clean 30 catch basins in Unincorporated Ramapo. We later increased that figure to 40 and most recently to 50. Catchbasins will be cleaned out mainly between March and November.

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

This action increases the effectiveness of our storm drain system by collecting and transporting stormwater runoff and removes both sediment and debris from downstream water bodies. We cleaned out 109 catchbasins in this past 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).**

We propose to clean out an additional 50 catch basins next year in Unincorporated Ramapo mainly between the months of March and November 2017 before the debris freezes in the catch basins making it extremely difficult to remove.