MS4 Annual Report Cover Page

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

This	cover	page	must	be o	completed	l by	the	report	preparer
Joint	repor	rts re	quire	only	one cove	r p	age.		

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Choose one:

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

Fill in SPDES ID in upper right hand corner.

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OR

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

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

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OR

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

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

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MS4 Annual Report Cover Page

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

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

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

SPDES ID

Name of MS4 Rockland County Solid Waste Management Authority		N	Y]	R 2	0	A	2	9	6			
Each MS4 must submit an MCC form.												
Section 1 - MCC Identification Page												
dicate whether this MCC form is being submitted to certify endorsement or acceptance of:												
An Annual Report for a single MS4												
A Single Entity (Per Part II.E of GP-0-10-002)												
○ A Joint Report												
Joint reports may be submitted by permittees with legally	binding	agı	reen	nents								
If Joint Report, enter coalition name:												
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MCC form for period ending March 9, 2 0 2 2

	SPI	DES	ID						
Name of MS4 Rockland County Solid Waste Management Authority	N	Y	R	2	0	A	2	9	6

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> 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
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name	MI	Last Name
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Title		
E X E C U T I V E D I R E C T	O R	
Address P.O Box 1217		
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City		State Zip
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MCC form for period ending March 9, 2 0 2 2

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Name of MS4 Rockland County Solid Waste Management Authority	N	Y	R	2	0	A	2	9	6

Section 2 - Contact Information

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- 4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
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If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

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

First Name	MI	Last Name
ANDREW	M	MILLSPAUGH, PE
Title		
V I C E P R E S I D E N T		
Address Sterling Environmental Engin	neeri	ng, P.C.
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City		State Zip
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MCC form for period ending March 9, 2 0 2 2

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

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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 G e r a r d	MI Last Name M
Title (Clearly print title of individual signing report) E x e c u t i v e D i r e c t	or
Signature M. Manuau	Date 0 5 1 2 7 1 2 0 2 2

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

This report is being submitted for the reporting period ending March 9, 2 0 2 2 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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Water Quality Trends

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Minir	num Control Measure 1. Public Ed	ucation and Outreach
The information in this	s section is being reported (check one):	
On behalf of an indiOn behalf of a coaliHow ma		
1. Targeted Public	Education and Outreach Best Manageme	ent Practices
Check all topics that	were included in Education and Outreach de	uring this reporting period:
O Construction Sites		Pesticide and Fertilizer Application
General Stormwater	Management Information	O Pet Waste Management
 Household Hazardou 	us Waste Disposal	Recycling
O Illicit Discharge Det	tection and Elimination	Riparian Corridor Protection/Restoration
Infrastructure Maint	tenance	Trash Management
O Smart Growth		• Vehicle Washing
Storm Drain Markin	g	Water Conservation
○ Green Infrastructure	/Better Site Design/Low Impact Development	O Wetland Protection
Other: COMPOST Other	, O R G A N I C G A R D E	O None N I N G , R A I N BARRELS
2. Specific audienc	es targeted during this reporting period:	
Public Employees	○ Contractors	
Residential	O Developers	
Businesses	• General Public	
○ Restaurants	○ Industries	
• Other:	O Agricultural	
S C H O O L Other	DISTRICTS, FAR	M E R S M A R K E T S

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

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

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

		SPI	DES	ID						
Name of MS4/Coalition	Rockland County Solid Waste Management Authority	N	Y	R	2	0	A	2	9	6

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 RCSWMA, A Non-Traditional MS4, Public Education and Outreach Program, will be tailored to describe topics related to the impacts of stormwater discharges on local water bodies, pollutants of concern and their sources, and the steps that can be taken to reduce pollutants in stormwater runoff and non-stormwater discharges.

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

RCSWMA, a Non-Traditional MS4, has evaluated school programs hosted by RCSWMA as an indicator for measuring the overall effectiveness of the Public Education & Outreach Program. Programs included school recycling program visits, Keep Rockland Beautiful - Great American Cleanup, Storm Drain Marker Program, Local Farmer's Markets, Rockland Service Corps, Rockland Classes and Local Summer Camps. RCSWMA utilizes their website and social media platforms for residents for information regarding local events, presentations and pertinent recycling information.

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

Average of 1 event/week.	
(ex.: samples/participan	s/events)

- D. Has your MS4 made progress toward this Measurable Goal during this reporting period?
 - Yes O 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 RCSWMA plans to continue to evaluate the Public Education and Outreach programs hosted by the RCSWMA as an indicator for measuring the overall effectiveness of the program in the next reporting period. The RCSWMA plans to continue hosting education and outreach programs throughout the next reporting period. In addition, RCSWMA will continue using their website and social media platforms (i.e. twitter, instagram) to provide residents with local events, presentations and pertinent recycling information. RCSWMA plans to continue marking and maintenance activities associated with storm drains.

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

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

	SPDES ID		
Name of MS4/Coalition Rockland County Solid Waste Management Authority	N Y R 2	0 A	2 9 6
Minimum Control Measure 2. Public Invo	lvement/Particip	ation_	
The information in this section is being reported (check one):			
On behalf of an individual MS4On behalf of a coalition			
How many MS4s contributed to this report?			
1. What opportunities were provided for public participation development, evaluation and improvement of the Stormws (SWMP) Plan during this reporting period? Check all that	ater Management P	,	
Cleanup Events	# Events		1
O Comments on SWMP Received	# Comments		
○ Community Hotlines Phone # ()]-	
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Phone # (Phone # ([)	_	
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Phone # (Phone # ()	-	
O Community Meetings	# Attendees		
○ Plantings	Sq. Ft.		
O Storm Drain Markings	# Drains		
O Stakeholder Meetings	# Attendees		
O Volunteer Monitoring	# Events		
Other: HOUSEHOLDHAZWASTE	F A C I L I	TY	
2. Was public notice of availability of this annual report and Program (SWMP) Plan provided?	Stormwater Manag	gement • Yes	○ No
○ List-Serve	# In List		
O Newspaper Advertising	# Days Run		
○ TV/Radio Notices	# Days Run		
Other:			

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

Name of MS4/Coalition Rockland County Solid Waste Management Authority

MS4 Annual Report Form

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

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

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

3. Where can the public access copies of this annual report, Stormwater Management

Name of MS4/Coalition Rockland County Solid Waste Management Authority

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

SPDES ID

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

SPDES ID				
Name of MS4/Coalition Rockland County Solid Waste Management Authority N Y R 2	0 A	2	9	6
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.	/ 2	0	2	1
4.b. For how many days was/will this report be posted? Remain posted on we	bsite.			
If submitting a report for single MS4, answer 5.a If submitting a joint report, ans	wer 5.	b		
5.a. Was an Annual Report public meeting held in this reporting period? If Yes, what was the date of the meeting? 0 5 / 2 7	● Ye		0 N 2	No 1
If No, is one planned?	○ Ye	es	01	Vо
5.b. Was an Annual Report public meeting held for all MS4s contributing to this this reporting period?	report ○ Ye		rin; O N	
If No, is one planned for each?	○ Ye	es	\circ	No
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.	○ Ye	es	• N	No

III.C.1. Submit additional pages as needed.

MS4 Annual Report Form

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

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

,		SPI	DES	ID						
Name of MS4/Coalition	Rockland County Solid Waste Management Authority	N	Y	R	2	0	A	2	9	6
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7. Evaluating Prop	gress Toward Measurable Goals MCM 2									
Use this page to rep	ort on your progress and project plans toward achie	eving m	eas	ura	ble	go	als			

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

identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part

The RCSWMA, a Non-Traditional MS4, Public Involvement/Participation program, incorporates opportunities for the public (i.e., employees and visitors) to become involved in the development, implementation, review and revision of the Storm Water Management Program.

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

The RCSWMA, a Non-Traditional MS4, has evaluated the number of events they participate in annually as an indicator for measuring the overall effectiveness of the Public Involvement/Participation program. The RCSWMA participated in and provided services for the annual Keep Rockland Beautiful Day, Household Hazardous Waste Days and Controlled Substance Days.

C.	How mar	v times	was this	observation	measured	or	evaluated i	n this	reporting	neriod?
•	HUW IIIAI	ty timits	was this	ODSCI VALIULI	micasul cu	UI	evaluateu i	n mis	reporting	periou:

(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 RCSWMA plans to continue to evaluate the number of cleanup and other public events that the RCSWMA participates in during the reporting period as an indicator for measuring overall effectiveness of the Public Involvement/Participation program.

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

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

SPDES ID

Name of MS4/Coalition Rockland County Solid Waste Manag	ement Authority
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported ((check one):
On behalf of an individual MS4	
On behalf of a coalition How many MS4s contributed to t	his report?
,	
1. Enter the number and approx. percent	of outfalls mapped: 14# 100%
2. How many of these outfalls have been so	creened for dry weather discharges during this
reporting period (outfall reconnaissance	e inventory)?
3.a. What types of generating sites/sewershe	eds were targeted for inspection during this
reporting period?	
O Auto Recyclers	○ Landscaping (Irrigation)
Building Maintenance	○ Marinas
○ Churches	O Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	Parking Lot Maintenance
Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
• Other:	○ None
TRUCK WASHOUT	S
O Sewersheds:	

This report is being submitted for the reporting period ending March 9, 2 0 2 2 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID												
Name of MS4/Coalition Rockland County Solid Waste Ma	anagement Authority NYR20A296												
3.b. What types of illicit discharges have	been found during this reporting period?												
O Broken Lines From Sanitary Sewer	O Industrial Connections												
O Cross Connections	○ Inflow/Infiltration												
O Failing Septic Systems	O Pump Station Failure												
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows												
O Illegal Dumping	O Straight Pipe Sewer Discharges												
Other: None													
4. How many illicit discharges/potential reporting period?	l illegal connections have been detected during this												
5. How many illicit discharges have bee	en confirmed during this reporting period?												
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during this reporting												
7. Has the storm sewershed mapping be If No, approximately what percent was													
8. Is the above information available in Is this information available on the w If Yes, provide URL(s):													
	where map(s) can be accessed - not home page.												
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This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 2 \end{bmatrix}$

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

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Name of MS4/Coalition	Rockland County Solid Waste Management Authority	N	Y	R	2	0	A	2	9	6
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12. Evaluating Progress Toward Measurable Goals MCM 3

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

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

The RCSWMA, a Non-Traditional MS4, IDDE program will focus on identifying, eliminating, reducing, and preventing illicit discharges to the maximum extent practicable and informing the public of improper disposal of waste.

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

The RCSWMA, a Non-Traditional MS4, has evaluated the number of outfalls screened for dry weather discharges as an indicator for measuring the overall effectiveness of the IDDE program. 100 percent of outfalls were screened for dry weather discharges. There were no illicit discharges detected in this reporting period.

C.	How	many	times	was	this	observation	measured	or	evaluated	in	this	reporting	period?
_						010001 100000		~ _	0 1 002 0200 0 00	-	-		Pon acous

One event for each facil	lity.	4	
(ex.	: samples/pa	rticipant	s/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 RCSWMA will continue to evaluate the number of outfalls screened for dry weather discharges as an indicator for measuring the overall effectiveness of the IDDE program. Illicit discharges observed will be investigated and eliminated on a case-by-case basis. The RCSWMA will continue to educate the public about improper disposal of waste through their education programs.

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$

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

		SPI	DES	ID		_				
Name of MS4/Coalition Rockland County Solid Was	ste Management Authority	N	Y	R	2	0	A	2	9	6

Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

•	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a	. Has each MS4 contributing to this report adopted a law, ordinance or other remechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?		○ No
1b	o. Has each Town, City and/or Village contributing to this report documented the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney certification or using the NYSDE Analysis Workbook?	Erosion C Gap	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La		• 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 reviewed in this reporting period?	e been	1
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs? O Yes	ublic	• NT
	If Yes, how many public comments were received during this reporting period?		
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	the loca O Yes	l ● 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:

O Notices of Violation	#				No Authority
O Stop Work Orders	#				No Authority
O Criminal Actions	#				No Authority
O Termination of Contracts	#		0	0	No Authority
O Administrative Fines	#				No Authority
O Civil Penalties	#				No Authority
O Administrative Orders	#				No Authority
O Enforcement Actions or Sanctions	#		0		
Other	#				No Authority

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

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

		SPI	DES	ID						
Name of MS4/Coalition	Rockland County Solid Waste Management Authority	N	Y	R	2	0	A	2	9	6

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The	e 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 a during this reporting period?	icre or i	more 1
2.	How many construction projects disturbing at least one acre were active in you during this reporting period?	r jurisd	iction 1
3.	What percent of active construction sites were inspected during this reporting p	period?	O NT
4.	What percent of active construction sites were inspected more than once?	1 0	O NT
5.	Do all inspectors working on behalf of the MS4s contributing to this report use	the NY	S
	Construction Stormwater Inspection Manual?	○ No	• NT
6.	Does your MS4/Coalition provide public access to Stormwater Pollution Preven (SWPPPs) of construction projects that are subject to MS4 review and approva	1?	
	O Yes If your MS4 is Non-Traditional are SWPDPs of construction projects made are		
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made avapublic review?	• Yes	O No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed	l.	

This report is being submitted for the reporting period ending March 9, 2 0 2 2 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID Name of MS4/Coalition Rockland County Solid Waste Management Authority Y R 2 0 A 2 9 6 N 6. con't.: Submit additional pages as needed. MS4/Coalition Office Department R O CKLAND UNT Y CO 0 L ID WA ST \mathbf{E} Address 1 7 2 i M а n S t r е t е City Zip Nanu е t NY 1 0 9 5 4 Phone 8 5 5 3 2 2 0 0 O Library Address City Zip Phone Other Address City Zip Phone O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL

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

	SPDES ID							
Name of MS4/Coalition Rockland County Solid Waste Management Authority	N Y R 2 0 A 2 9 6							
7. Evaluating Progress Toward Measurable Goals MCM 4								
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.								
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.							
The RCSWMA, a Non-Traditional MS4, Construction Site Storm will provide equivalent protection to the NYSDEC General Permi Construction Activity as applicable.	1 0							
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.								
RCSWMA will implement erosion and sediment control management construction site operators to control waste for construction activity the overall effectiveness of the Construction Site Storm Water Ma	ties as an indicator for measuring							
C. How many times was this observation measured or evaluate	ed in this reporting period?							
Min	nimum of 1 event/week							
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 th								
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	5							
RCSWMA will continue evaluating the implementation of erosion management practices and Construction Activity General Permit r as an indicator for measuring the overall effectiveness of the Cons Management program	requirements for applicable projects							

O Building Codes

Overlay Districts

○ Zoning

None

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 0 \end{vmatrix}$

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

SPDES ID

Name of MS4/Coalition Rockland County Soli	N Y R 2	0 A 2 9 6							
Minimum Control Measure 5. Post-Construction Stormwater Management									
The information in this section is being	g reported (che	eck one):							
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contr 	ibuted to this	report?							
1. How many and what type of post MS4/Coalition inventoried, inspe				your					
	# Inventoried	# Inspections	# Times Maintained						
 Alternative Practices (Filtrexx Soxx) 	1 2	1 4 4	4 8						
• Filter Systems (Stone filter basins)	4	1 6	4						
Infiltration Basins									
Open Channels (Grass and Concrete	3	3 6	1 2						
• Ponds Swales)	3	9	0						
○ Wetlands									
Other (Oil/Water Separators, Catch basin inserts)	4	8	4						
2. Do you use an electronic tool (BMPs, inspections and mainta	•	abase, spreads	neet) to track post-con	o Yes • No					
3. What types of non-structural p Development/Better Site Desig			_	ct					

O Municipal Comprehensive Plans

Open Space Preservation Program

O Local Law or Ordinance

O Land Use Regulation/Zoning

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 2 \mid 2$

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Name of MS4/Coalition Rockland County Solid Waste Management Authority	N Y	R 2	0	A	2 9	9	6
4a. Are the MS4s contributing to this report involved in a regional/watersh	ned wide	planı	0	effo Yes			No
4b. Does the MS4 have a banking and credit system for stormwater manag	ement pi	actic	es?				
	_		0	Yes		N	No
4c. Do the SWMP Plans for each MS4 contributing to this report include a and approval of banking and credit of alternative siting of a stormwater			t pr	acti	ce?		
4d. How many stormwater management practices have been implemented	as part o	f this		Yes tem			No
reporting period?	•				0		
5. What percent of municipal officials/MS4 staff responsible for program training on Low Impace Development (LID), Better Site Design (BSD)				tten	ded		
Infrastructure principles in this reporting period?	oran oran	516			0	9	%

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$

II Submittin	ig this form as part of a joint report on ben	an or a coantion	SPDES 1		o o ani	K.	
Name of MS4/Coalition	Rockland County Solid Waste Management Authority		N Y) A :	2 9	9 6
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6. Evaluating Prop	gress Toward Measurable Goals MC	M 5					
identified in your St	ort on your progress and project plans to ormwater Management Program Plan (tional pages as needed.		_	_		ı Pa	ırt
A. Briefly summar	ize the Measurable Goal identified in	the SWMPP	in this 1	reporti	ng pe	rio	ł.
address stormwater	Non-Traditional MS4, Post-Construction runoff from regulated new development ontinue to inventory and maintain RCS	nt and redevelop	_		_	100	1
B. Briefly summar Goal.	ize the observations that indicated th	e overall effec	tiveness	s of this	s Mea	sur	able
pollution prevention	ed stormwater runoff from redevelopment plan (Construction SWPPP) which invasion as an indicator for measuring the overagement program.	ventoried, main	tained a	and trac	ked th	ne p	- 1
C. How many time	s was this observation measured or e	valuated in thi	is repor	ting pe	riod?	?	
							1
D II MC4							cipants/eve
D. Has your MS4 i	nade progress toward this measurab	le goal during	this rep	_	perio Pes		⊃ No
E. Is your MS4 on	schedule to meet the deadline set for	th in the SWM	IPP?		Yes	C) No
	ize the stormwater activities planned ng cycle (including an implementatio		als of t				
measuring the overa	ns to continue to evaluate the number of all effectiveness of the Post-Construction to the inventory as necessary.						

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Self-Assessment

		SPI	DES	ID						
Name of MS4/Coalition	Rockland County Solid Waste Management Authority	N	Y	R	2	0	A	2	9	6

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.

			Operation/Activity/F				
			performed within	n the past 3			
Operation/Activity/Facility	Addressed i	n SWMP?	years'	?			
Street Maintenance	• Yes	○ No	• Yes	○ No			
Bridge Maintenance	O Yes	• No	○ Yes	No			
Winter Road Maintenance	• Yes	○ No	• Yes	○ No			
Salt Storage	• Yes	○ No	• Yes	○ No			
Solid Waste Management	• Yes	○ No	• Yes	○ No			
New Municipal Construction and Land Disturba	nce • Yes	○ No	• Yes	○ No			
Right of Way Maintenance	O Yes	No	○ Yes	No			
Marine Operations		• No	○ Yes	No			
Hydrologic Habitat Modification		• No	○ Yes	No			
Parks and Open Space	○ Yes	No	○ Yes	No			
Municipal Building	• Yes	○ No	• Yes	\bigcirc No			
Stormwater System Maintenance		○ No	• Yes	○ No			
Vehicle and Fleet Maintenance	• Yes	○ No	• Yes	\bigcirc No			
Other	• Yes	○ No	• Yes	\bigcirc No			

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

	SPDES ID									
Name of MS4/Coalition Rockland County Solid Waste Management Authority	N Y R 2 0 A 2 9 6									
2. Provide the following information about municipal operations good housekeeping programs:										
Parking Lots Swept (Number of acres X Number of times swept)	# Acres 8 2 0									
O Streets Swept (Number of miles X Number of times swept)	# Miles									
 Catch Basins Inspected and Cleaned Where Necessary 	# 1 2									
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#									
O Phosphorus Applied In Chemical Fertilizer	# Lbs.									
O Nitrogen Applied In Chemical Fertilizer	# Lbs.									
Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)Pesticide application was less than 0.1 acre, approximately 0.03 acre along										
fencing and onsite building sidings for West Nyack and West Haverstraw facilities. 3. How many stormwater management trainings have been provided to municipal employees during this reporting period?										
4. What was the date of the last training?	0 6 / 3 0 / 2 0 2 1									
5. How many municipal employees have been trained in this reporting period?										
6. What percent of municipal employees in relevant positions and departments receive stormwater management training?										

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		SPI	DES	ID	,	,		,		
Name of MS4/Coalition	Rockland County Solid Waste Management Authority	N	Y	R	2	0	A	2	9	6
		-		-			*******************	-		

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 RCSWMA, a Non-Traditional MS4, Municipal Storm Water Management and Good Housekeeping program, will address operations that collect, store or release sediments, wastes, or other potential pollutants. The RCSWMA will address pollution prevention and good housekeeping BMP priorities.

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

The RCSWMA, a Non-Traditional MS4, plans to evaluate existing BMPs and good housekeeping and the need to implement appropriate pollution prevention and good housekeeping BMPs and measurable goals to ensure the reduction of pollutants of concern in stormwater discharges to the maximum extent practicable. BMPs and outfall locations have been repaired and modified in the reporting period.

C.	How	many	times	was	this	observation	measured	or	evaluated in	n this	reporting	neriod?
•	AAU W	ARREGARY	CHARRED	44 6613	CHARD	onsei vation	micasui cu	UI	cvaluated 1	II THIE	r chai mis	periou.

Four events for each facil	ity.		1	6	
(ex.	: sample	s/part	ici	pant	s/event

- 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 RCSWMA plans to continue evaluating the pollution prevention and good housekeeping BMPs and will continue sweeping facility roadways. The RCSWMA will continue to follow the BMPs outlined in the NYSDEC Municipal Pollution Prevention and Good Housekeeping Assistance document as necessary and will implement maintenance of onsite stormwater management systems as needed.

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

		SPI	DES	ID						
Name of MS4/Coalition	Rockland County Solid Waste Management Authority	N	Y	R	2	0	A	2	9	6

On behalf of an individual M On behalf of a coalition How many MS4	104		
How many MS4	a contributed to this me	om omt?	
	is contributed to this re	eport?	
ACAs marrat amount at the aure	adiana an alarah MA a		1 1
MS4s must answer the que	stions of check NA a	s indicated in the table	delow.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	Answei	CHECK NA	(FOC)
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	-	-	-
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	-	-	_
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay	-	-	
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary Traditional Land Use	1 4 7 - 4 9 - 0 10 11 12	225601	- 12F
Traditional Land Use Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b 2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	1,4,7a-u,6a,9	2,3,4,3,80,10,11,12	Pathogens and Nitrogen
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12 2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments	-	2,5,5,00,10,11,12	-
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens
. Does your MS4/Coalitic phosphorus/nitrogen/pa			mpacts of ○ Yes ○ No • No
. Has 100% of the MS4/C			
If N/A, go to question 3. If No, estimate what perc	C.1	1 1	pped so far.

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					SP.	DES ID			
Na	me of MS4/Coalition	Rockland County Solid	Waste Management Au	uthority	N	Y R 2	0 A 2	9 6	
3.	Does your MS4/ and Maintenand			Conveyance	System (inf		u re) Ins p O No		
4.	Estimate the perand maintained						n inspec		
5.	Has your MS4/C NYSDEC SPDE (GP-0-08-001) to disturb five thou	S General Perm reduce polluta	it for Stormwats in stormwa	ater Dischar	ges from Co	nstructi	on Activ tivities tl	ities GP-0-	20-001
6.	Has your MS4/C runoff from new equal to one acr Permit for Storn the New York Standards?	development a e that provides o nwater Dischar	nd redevelopm equivalent pro ges from Cons	nent projects tection to the truction Act	that disture NYS DEC vities (GP-0	b greater SPDES -08-001)	than or General , includi	GP-0-20-	001
7a	.Does your MS4/ phosphorus/nitr			rogram to re	educe erosio	n or O Yes	O No	• N/A	
7b	.How many proje	ects have been si	ted in this rep	orting perio	d?			N A	
7c.	. What percent of	the projects inc	luded in 7b ha	ave been com	pleted in th	is report	ing peri		
7d	.What percent of	projects planne	d in previous	years have b	een comple	ted?	N	A%	
						○ No	Projects	Planned	
8a.	.Has your MS4/C procedures polic lands?						wned	• N/A	
8b	.Has your MS4/C procedures polic	y that addresses			_	_			
	municipally own	ed lands?				O Yes	O No	N/A	

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Name of MS4/Coalition Rockland County Solid Waste Management Authority	N Y R 2	0 A 2	9 6
9. Has your MS4/Coalition developed and implemented a program of		ting? ○ No	• N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste of prohibiting goose feeding?	_		ties and N/A
11. Does your MS4/Coalition have a pet waste bag program?	○ Yes	○ No	• N/A
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	○ No	• N/A