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**MS4 Annual Report Cover Page****MCC form for period ending March 9,**

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

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## MCC form for period ending March 9,

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Village of Great Neck

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Name of MS4

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## **Section 2 - Contact Information**

## Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name

MI

Last Name

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Title

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City

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State

Zip

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eMail

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Phone

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County

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

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

Name of MS4 Village of Great Neck

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 u n t y o f N a s s a u

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

N Y R 2 0 A 0 2 2

Address

3 3 4 0 M e r r i c k R o a d B l d g R

City

W a n t a g h

State

N Y

Zip

1 1 7 9 3 -

eMail

D f u c c i @ n a s s a u c o u n t y n y . g o v

Phone

( 5 1 6 ) 5 7 1 - 7 5 2 0

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 u b l i c a t i o n s , p r i n t e d m e d i a

● MM2 s c h o o l p r o g r a m s , l o g o s

● MM3 o u t f a l l m a p p i n g , D O H a s s i s t

● MM4 t r a i n i n g

● MM5 t r a i n i n g

● MM6 t r a i n i n g , g u i d a n c e d o c u m e n t s

Additional tasks/responsibilities

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

Nassau County is planning to model and plan improvements for impaired watersheds within its boundaries.

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

MCC form for period ending March 9,

2 0 2 3

Name of MS4 Village of Great Neck

SPDES ID

N Y R 2 0 A 4 5 3

**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

P e d r a m

MI

Last Name

B r a l

Title (Clearly print title of individual signing report)

M a y o r

Signature

Date

/ /

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

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

## MS4 Annual Report Form

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

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

Name of MS4/Coalition 

Village of Great Neck
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SPDES ID

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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? 

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

If Yes, choose one of the following

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

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

URL

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Name of MS4/Coalition

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

Village of Great Neck
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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:**

☐ Construction Site Operators Trained

# Trained 

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☐ Direct Mailings

# Mailings 

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☒ Kiosks or Other Displays

# Locations 

			1	4
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☒ List-Serves

# In List 

		1	8	7
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☒ Mailing List

# In List 

		3	7	8
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☒ Newspaper Ads or Articles

# Days Run 

			2	9
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☒ Public Events/Presentations

# Attendees 

		4	2	0
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☐ School Program

# Attendees 

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☐ TV Spot/Program

# Days Run 

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☒ Printed Materials:

Total # Distributed 

		1	5	0
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Locations (e.g. libraries, town offices, kiosks)

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☐ Other:

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

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

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## MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

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### 4. Evaluating Progress Toward Measurable Goals MCM 1

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

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

The Village has educational information pertaining to proper handling of household waste, yard waste, animal waste, lawn care, and reducing runoff, on its website. The informational materials from the coalition members Manhasset Bay Protection Committee and Nassau County are made available to Village residents, as well.

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

The Stormwater Management page on the Village website includes past annual MS4 reports, as well as information pertaining to household waste, pet waste, yard waste, lawn care and reducing runoff. There are also links to watershed information and water quality information.

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

			1
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*(ex.: samples/participants/events)*

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

☒ Yes    ☐ No

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

☒ Yes    ☐ No

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

Continue to be coalition members with Nassau County and the Manhasset Bay Protection Committee, and continue to maintain the website information.

# MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

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## **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
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**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   |  |  |  |   | 1  |
| <input checked="" type="radio"/> Comments on SWMP Received | # Comments   |  |  |  |   | 0  |
| <input checked="" type="radio"/> Community Hotlines        | Phone #  | ( <input type="text" value="5"/> <input type="text" value="1"/> <input type="text" value="6"/> ) | <input type="text" value="5"/> <input type="text" value="7"/> <input type="text" value="1"/> | -  | <input type="text" value="7"/> <input type="text" value="5"/> <input type="text" value="3"/> <input type="text" value="5"/> |  |
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|  |  |  |  |  |   |  |
| <input checked="" type="radio"/> Community Meetings        | # Attendees  |  |  | 4  | 2   | 0  |
| <input type="radio"/> Plantings                            | Sq. Ft.  |  |  |  |   |  |
| <input type="radio"/> Storm Drain Markings                 | # Drains   |  |  |  |   |  |
| <input checked="" type="radio"/> Stakeholder Meetings      | # Attendees  |  |  | 5  | 2   | 5  |
| <input checked="" type="radio"/> Volunteer Monitoring      | # Events   |  |  |  | 1   | 3  |
| <input type="radio"/> Other:                               | <input type="text"/>   |  |  |  |   |  |

**2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?** ☒ Yes

☒ 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,**

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

Name of MS4/Coalition 

Village of Great Neck
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SPDES ID

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

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

URL

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

Village of Great Neck

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

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# MS4 Annual Report Form

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

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

Name of MS4/Coalition	Village of Great Neck
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SPDES ID

N	Y	R	2	0	A	4	5	3
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**3. Where can the public access copies of this annual report, Stormwater Management Program (SWMP) Plan and submit comments on those documents?**

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

● MS4/Coalition Office

● Annual Report    ● SWMP Plan    ● Comments

Department

[illegible]

Address		

[illegible]

City

[illegible]

Phone

$$\begin{pmatrix} 5 & 1 & 6 \end{pmatrix} \begin{bmatrix} 4 & 8 & 2 \end{bmatrix} - \begin{bmatrix} 0 & 0 & 1 & 9 \end{bmatrix}$$

○ Library

☐ Annual Report    ☐ SWMP Plan    ☐ Comments

Address

[illegible]

City

[illegible]

Phone

$$(\begin{array}{|c|c|c|} \hline & & \\ \hline \end{array}) \begin{array}{|c|c|c|} \hline & & \\ \hline \end{array} - \begin{array}{|c|c|c|} \hline & & \\ \hline \end{array}$$

☐ Other

☐ Annual Report    ☐ SWMP Plan    ☐ Comments

Address

[illegible]

City

[illegible]

Phone

$$\left( \begin{array}{|c|} \hline \phantom{00} \\ \hline \end{array} \right) \begin{array}{|c|} \hline \phantom{00} \\ \hline \end{array} - \begin{array}{|c|} \hline \phantom{00} \\ \hline \end{array}$$

● Web Page URL:

☒ Annual Report    ☐ SWMP Plan    ☐ Comments

[illegible]

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

● eMail

## ● Comments

[illegible]

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
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**4.a. If this report was made available on the internet, what date was it posted?**

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

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

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

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

☐ Yes ☒ No

If Yes, what was the date of the meeting?

		/			/				
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If No, is one planned?

☐ Yes ☒ No

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

☐ Yes ☒ No

If No, is one planned for each?

☐ Yes ☒ No

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

☐ Yes ☒ No

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



**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

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**7. Evaluating Progress Toward Measurable Goals MCM 2**

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

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

The Village promotes all local activities held by the Manhasset Bay Protection Committee, and the Village residents are informed of the activities at public meetings and at Village Hall. The Village invites its residents to public meetings where applications for land development are reviewed and discussed. As a coalition member with Nassau County, the Village benefits from their efforts pertaining to public participation.

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

The Village held Zoning Board meetings, Planning Board meeting, Board of Trustees meetings and Architectural Review Board meetings where the Village residents were invited to review and discuss applications for land development projects and environmental issues and concerns.

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

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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

The Village plans to continue to invite residents to meetings to review and discuss development plans, and the Village also intends to continue its coalition membership with Nassau County and the Manhasset Bay Protection Committee.

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

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Village of Great Neck

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☐ 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

[illegible]

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☐ Yes      ☒ No

		0	%
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☐ Yes      ☒ No

☐ Yes     ☒ No

☐ Yes     ☒ No

URL

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
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**12. Evaluating Progress Toward Measurable Goals MCM 3**

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

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

The Village completed the mapping and ownership verification for all outfalls mapped within the Village by Nassau County, and dry weather observation of outfalls is an ongoing process. The Village also is vigilant in patrolling streets to observe potential illicit discharges to the storm system. The Village storm system includes 30 interconnections to other storm sewer systems, including the Nassau County system on Middle Neck Road and East Shore Road, as well as the Kings Point

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

No dry weather flow was observed, other than groundwater infiltration.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

Continue to monitor the outfalls for dry weather flow.

## MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
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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
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**1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?** ☒ Yes   ☐ No

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

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

☐ 09/2004   ☒ 03/2006   ☐ NT

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

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

		0
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**4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?** ☒ Yes   ☐ No   ☐ NT

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

		0
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**5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?** ☒ Yes   ☐ No

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

<input checked="" type="radio"/> Notices of Violation	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	<input type="radio"/> No Authority
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<input checked="" type="radio"/> Stop Work Orders	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	<input type="radio"/> No Authority
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<input checked="" type="radio"/> Criminal Actions	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	<input type="radio"/> No Authority
				0				
<input checked="" type="radio"/> Termination of Contracts	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td>0</td></tr></table>					0	<input type="radio"/> No Authority
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<input type="radio"/> Other	#	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<input type="radio"/> No Authority

## MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
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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
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1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

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

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

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

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

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





## MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
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### 7. Evaluating Progress Toward Measurable Goals MCM 4

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

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

The Village reviews all applications for building permits for compliance to local laws pertaining to erosion control and stormwater management.

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

All applications were reviewed by Village staff and/or the Village consultants.

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

			1
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(ex.: samples/participants/events)

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

☒ Yes    ☐ No

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

☒ Yes    ☐ No

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

Continue to review all applications for building permits for compliance to local laws pertaining to erosion control and stormwater management.

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

SPDES ID

N	Y	R	2	0	A	4	5	3
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The information in this section is being reported (check one):

- |   |   |
|---|---|
| How many MS4s contributed to this report? | 1 |
|---|---|

# Inventoried	# Inspections	# Times Maintained
1	1	1
2	2	2
3	3	3
4	4	4
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7	7	7
8	8	8
9	9	9
10	10	10
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- [illegible]

☐ Yes    ☒ No

☐ 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

[illegible]

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

☒ Yes ☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

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

		0
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 %

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
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**6. Evaluating Progress Toward Measurable Goals MCM 5**

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

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

The Village monitors new and redevelopment projects which involve land disturbance to ensure that local stormwater laws are met. The Village investigates all reports of flooding, and SWPPP sites are monitored.

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

Construction sites are monitored by the Building Department for compliance with building codes and good housekeeping.

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

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(ex.: samples/participants/events)

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

☒ Yes   ☐ No

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

☒ Yes   ☐ No

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

Continue to investigate flooding causes within the Village and continue to monitor construction sites.

## MS4 Annual Report Form

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
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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
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- 1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.**

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
---	---	---	---	---	---	---	---	---

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

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

			9	0
--	--	--	---	---
- ☒ Streets Swept (Number of miles X Number of times swept) # Miles 

	1	8	3	7
--	---	---	---	---
- ☒ Catch Basins Inspected and Cleaned Where Necessary # 

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

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

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

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

				.	
--	--	--	--	---	--

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

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

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

1	0
---	---

 / 

2	1
---	---

 / 

2	0	1	9
---	---	---	---

**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?**

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

 %

**MS4 Annual Report Form**

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

2	0	2	3
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Name of MS4/Coalition

Village of Great Neck

SPDES ID

N	Y	R	2	0	A	4	5	3
---	---	---	---	---	---	---	---	---

**7. Evaluating Progress Toward Measurable Goals MCM 6**

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

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

The Village sweeps its streets and parking lots, cleans catch basins and its stormwater system to help prevent sand and sediment and debris from entering surface waters.

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

The Village routinely inspects catch basins and the storm system. The Village logs miles of sweeping, which equates to the entire Village being swept 80 times last year. Catch basins are monitored daily and cleaned when warranted. Each catch basin grate was cleaned 6 times, and 7 catch basins were repaired during the reporting year. The Village documented the removal of 21 tons of street sweepings and 280 tons of other debris from the streets for the reporting year.

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

		8	0
--	--	---	---

(ex.: samples/participants/events)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

Continue to sweep streets and clean catch basins and the storm system as required.