





# MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2010

Name of MS4 CITY OF SYRACUSE, NEW YORK

SPDES ID  
N Y R 2 0 A 1 8 6

## 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: M A R Y      MI: E      Last Name: R O B I S O N

Title: C I T Y   E N G I N E E R

Address: 2 3 3   E A S T   W A S H I N G T O N   S T,   R O O M   4 0 1

City: S Y R A C U S E      State: N Y      Zip: 1 3 2 0 2 -

eMail: m r o b i s o n @ c i . s y r a c u s e . n y . u s

Phone: ( 3 1 5 ) 4 4 8 - 8 2 0 0      County: O N O N D A G A

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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:

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

First Name: DONALD MI: H Last Name: SPIES

Title: FACILITIES ENGINEER

Address: 233 EAST WASHINGTON ST, ROOM 401

City: SYRACUSE State: NY Zip: 13202

eMail: dspies@ci.syracuse.ny.us

Phone: (315) 448-8210 County: ONONDAGA

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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 N Y R e g i o n a l P l a n n i n g a n d

Partner/Coalition Name (con't.)  
D e v e l o p m e n t B o a r d  
SPDES Partner ID - If applicable  
N Y R 2 0

Address  
1 2 6 N o r t h S a l i n a S t r e e t

City  
S y r a c u s e  
State Zip  
N Y 1 3 2 0 2 -

eMail  
b e r t u c h @ c n y r p d b . o r g

Phone  
( 3 1 5 ) 4 2 2 - 8 2 7 6

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 E d u c a t i o n
- MM2
- MM3
- MM4
- MM5
- MM6

Additional tasks/responsibilities

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

[Empty text box for additional information]

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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 M A R Y MI E Last Name R O B I S O N

Title (Clearly print title of individual signing report)  
C I T Y E N G I N E E R

Signature  
*Mary E Robinson*

Date  
0 5 / 2 8 / 2 0 1 0

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, 2010

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

Name of MS4/Coalition **CITY OF SYRACUSE, NEW YORK**

SPDES ID  

N	Y	R	2	0	A	1	8	6
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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
- Direct Mailings
- Kiosks or Other Displays
- List-Serves
- Mailing List
- Newspaper Ads or Articles
- Public Events/Presentations
- School Program
- TV Spot/Program
- Printed Materials:

# Trained				
# Mailings				6
# Locations			6	2
# In List			1	7
# In List			5	7
# Days Run				
# Attendees			1	0
# Attendees				
# Days Run				
Total # Distributed			1	0

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

P	u	b	l	i	c		L	i	b	r	a	r	i	e	s				
M	u	n	i	c	i	p	a	l		B	u	i	l	d	i	n	g	s	
V	e	t	e	r	e	n	a	r	i	a	n		O	f	f	i	c	e	s

Other:  

R	a	d	i	o		S	p	o	t	s									
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Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

c	n	y	r	p	d	b	.	o	r	g	/	s	t	o	r	m	w	a	t	e	r	/	m	s	4						
c	n	y	r	p	d	b	.	o	r	g	/	s	t	o	r	m	w	a	t	e	r	/	m	s	4	/	A	d	d	R	e
g	s	O	n	o	n	W	S	.	a	s	p																				

URL

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l	R	e	p	o	r	t	i	n	g	.	a	s	p																		

**MS4 Annual Report Form**

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Name of MS4/Coalition **CITY OF SYRACUSE, NEW YORK**

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

URL  
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n d t o o l s . a s p

URL  
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URL  
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URL  
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y w o r r y . a s p

**MS4 Annual Report Form**

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

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Name of MS4/Coalition 

CITY OF SYRACUSE, NEW YORK
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SPDES ID

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

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

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

Prepare summary of City's Stormwater Activities and goals for the Annual Newsletter from the Department of Water.

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

Not evaluated at this time.

**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).**

Update summary for next year's newsletter.

**MS4 Annual Report Form**

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

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Name of MS4/Coalition 

CITY OF SYRACUSE, NEW YORK
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SPDES ID

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

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (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.**

Maintain regional stormwater website and information library for reference and use by regulated MS4s and the general public in thh SUA.

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

The stormwater website is successfully functioning as a public education tool based on recorded number of "hits" during the current reporting period (11,258). The online library is being utilized by both elected officials (343 hits recorded to the MS4 library page) and the general public (192 hits recorded to the Public library page). Website information is current based on 18 informational updates recorded between June 2009 and March 2010.

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

			1
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(ex.: samples/participants/events)

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

Yes  No

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

Yes  No

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

New information will continuously be added to the regional stormwater website.

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SPDES ID							
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**4. Evaluating Progress Toward Measurable Goals MCM 1**

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

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

Conduct a half day training workshop for municipal highway and DPW staff to address regulatory requirements, roles, responsibilities, exempted municipal project criteria and E&S control practices for daily operations.

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

On November 5, 2009, 42 municipal staff representing 14 MS4 communities received training and information on the goals and intent of the SPDES general stormwater permits, pollutants of concern, special requirements in the Onondaga Lake watershed, E&S and SWPPP basic administration requirements, exemptions for highway construction, water quality standards violations, NYS Technical Standards, municipal pollution prevention, IDDE discharges, inspections and source

**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).**

No further municipal training is scheduled under the current education program contract.

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

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

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

Provide direct information to topics of interest to construction contractors and developers through three direct informational mailings between June 2009 and May 2010.

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

The number of contacts on the distribution list continues to rise upon request from the target audience suggesting that information is being shared and viewed to have merit. Content is determined by requests for information received in between mailings and changes in statewide construction/post construction requirements.

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

			2
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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 final scheduled contractor mailing will be sent in May, 2010.

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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.**

Conduct a workshop for municipal planning board members and code enforcement officers to address regulatory requirements related to construction and post-construction stormwater management, jurisdictional responsibilities related to transfer of property from private to public ownership.

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

47 municipal officials representing 23 regulated MS4s received training and information related to the roles of planning boards, code enforcement officers, highway departments, SWPPP reviews, site inspections, acceptance of post construction practices, funding mechanisms, jurisdictional issues, intermunicipal connections, site violations, BSD, LID, and assessing local regulations at a 2/23/10 workshop. Evaluation forms (38 returned) provided high ranks for training content and relevancy.

**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).**

No further training workshops for planning board members and code enforcement officers are planned under the current education program contract.

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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.

Develop a multi-page stormwater education supplement to the Syracuse Post Standard targeted toward the general public. The supplement will present basic information on stormwater pollutants, pathways, impacts and controls and will be distributed within all home delivery and point of sale editions of the Post Standard sold in Madison, Onondaga and Oswego Counties on a single day in Spring 2010

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

The narrative, graphics and layout have been completed and submitted to the Post Standard for distribution on April 22, 2010 as the centerfold of the Neighbors section. Anticipated readership: 205,000. Feedback and requests for reprints of a similar education supplement suggest the level and quality of information presented was well received and useful.

##### 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).

Following publication of the Post Standard supplement on April 22, 2010, no further newspaper supplements are planned under the current education program contract.

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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.**

Develop and produce 2, thirty second radio commercials to air on two highly ranked and distinctly different radio stations (WSYR and B104.7) during prime listening hours over a one week period. The commercials will promote general awareness about stormwater pollutants, pathways, impacts and controls.

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

Commercial No. 1 aired 12 times on WSYR - 570 AM between July 13 and July 16, 2009. Estimated listeners reached in the 3 county target area: 46,400. Commercial No 2. aired 30 times on WBBS - 104.7 FM between July 13 and July 19, 2009. Estimated listeners reached in the 3 county target area: 90,600. Anecdotal feedback and response received suggested these commercials were entertaining and informative.

**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).**

No further radio commercials are planned under the current education program contract.

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

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

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

Develop and/or modify and distribute existing education and outreach materials for primary target audiences. topics may include low phosphorus/no phosphorus fertilizer, soil testing, pet waste, native plants to control erosion and/or the dangers of discharging materials into storm sewers.

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

First of three distributions (focused on pet waste) was sent to veterinary offices, public libraries, animal shelters and municipal buildings in the 3 county SUA in November, 2009. A survey response form was sent to veterinary offices and shelters. Responses indicated that the information was useful and additional brochures will be printed from the stormwater website and distributed when the initial supply of brochures is depleted.

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

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

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

Yes    No

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

Yes    No

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

The following tasks are underway and will be completed as follows: School posters have been designed, and are awaiting final price quotes for printing. Posters will be distributed to every public elementary, middle and high school building in the 3 regulated SUA in late April, 2010. Narrative has been developed and a contact list is being updated for distributing the final targeted mailing to landscape/garden centers and local gardening groups and public libraries in May, 2010.

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

Update and provide training on simple record keeping procedures/tracking mechanisms to facilitate annual reporting of specific compliance activities and to provide concrete records for compliance audits.

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

MS4 Program Effectiveness Evaluation Forms and a list of SWMP contents were presented to MS4 representatives at a use and training meeting held on 10/29/10. The forms were distributed electronically to all designated contacts on 11/4/09. Two requests for feedback on the usefulness and degree to which the forms were adopted generated only 2 responses, both of which were positive.

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

			2
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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).**

No additional work is planned under the current education program contract.

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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.**

Conduct a follow up to the 2007 SUS Stormwater Public Education Survey to assess the effectiveness of ongoing regional education and outreach efforts and to identify areas in need of improvement.

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

Not yet evaluated

**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 SWMP?**

Yes  No

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

The original stormwater survey instrument has been formatted for electronic distribution and will be made available online and in hard copy. The survey will be distributed and promoted in late April through May. A student intern will be employed to complete analysis of all survey responses and prepare a final report under supervision by CNY RPDB. The report will be distributed to participating MS4s in August, 2010.



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2010

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

Name of MS4/Coalition **CITY OF SYRACUSE, NEW YORK**

SPDES ID  
N Y R 2 0 A 1 8 6

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

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

URL

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### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2010

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

SPDES ID

NYR20A186

Name of MS4/Coalition CITY OF SYRACUSE, NEW YORK

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

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

- MS4/Coalition Office
- Annual Report
- SWMP Plan
- Comments

Department

Address

City Zip

Phone ( ) -

- Library
- Annual Report
- SWMP Plan
- Comments

Address

City Zip

Phone ( ) -

- Other
- Annual Report
- SWMP Plan
- Comments

Address 233 WASHINGTON ST, ROOM 401

City SYRACUSE NY Zip 13202 -

Phone (315) 448-8200

- Web Page URL:
- Annual Report
- SWMP Plan
- Comments

WWW.SYRACUSE.NY.US/ENGINEERING

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

- eMail
- Comments

**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 

C	I	T	Y		O	F		S	Y	R	A	C	U	S	E	,	N	E	W		Y	O	R	K
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SPDES ID  

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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	/	2	5	/	2	0	1	0
---	---	---	---	---	---	---	---	---	---

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

		7
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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?

0	5	/	2	7	/	2	0	0	9
---	---	---	---	---	---	---	---	---	---

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, 2010

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Name of MS4/Coalition **CITY OF SYRACUSE, NEW YORK**

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 (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.**

Establish a working relationship with the Central New York Regional Planning and Development Board to develop and implement a public involvement program.

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

City has retained the CNYRP&DB for several years through agreements with the CNYRP&DB to conduct public education programs.

**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).**

Continue to work with the CNYRP&DB on initiatives for public involvement and participation in stormwater management and quality issues







**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 

CITY OF SYRACUSE, NEW YORK
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SPDES ID

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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (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.**

Examine stormwater outfalls during dry weather periods to determine existence of illicit discharges.

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

Of 89 outfalls examined in 2009, only one had evidence of an illicit discharge which was later found to be the result of a joint separation on a sanitary sewer.

**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 examine stormwater outfalls during dry weather periods for the existence of illicit discharges.

**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 

CITY OF SYRACUSE, NEW YORK
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SPDES ID  

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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (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.**

Continue to develop sewershed maps for use in an illicit discharge detection and elimination program.

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

Stormwater outfalls and sewershed boundaries have been plotted on a GIS base map.

**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).**

Plot the locations of stormwater sewer lines, manholes and catch basins on the GIS base map.

**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 

CITY OF SYRACUSE, NEW YORK
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SPDES ID

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**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (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.**

Participate in the Onondaga - City of Syracuse CSO Abatement /Green Infrastructure Program.

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

Final draft of updated stormwater ordinance completed. Several projects are being pursued to use green infrastructure to reduce stormwater runoff and improve water quality.

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

			3
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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 participate in program.

**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 

CITY OF SYRACUSE, NEW YORK
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SPDES ID

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

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

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

How many MS4s contributed to this report? 

--	--	--

- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?  Yes  No
- 1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  
 09/2004  03/2006  NT

2. Does your MS4/Coalition have a SWPPP review procedure in place?  Yes  No
3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period? 

	3	3
--	---	---
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:**

- |  |   |   |  |   |   |  |   |   |                                    |
|--|---|---|--|---|---|--|---|---|------------------------------------|
| <input type="radio"/> Notices of Violation             | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">2</td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table> |  |   |   |  | 2 | 0 | <input type="radio"/> No Authority |
|  |   |   |  | 2 | 0 |  |   |   |                                    |
| <input type="radio"/> Stop Work Orders                 | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table>                      |  |   |   |  |   | 0 | <input type="radio"/> No Authority |
|  |   |   |  |   | 0 |  |   |   |                                    |
| <input type="radio"/> Criminal Actions                 | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table>                      |  |   |   |  |   | 0 | <input type="radio"/> No Authority |
|  |   |   |  |   | 0 |  |   |   |                                    |
| <input type="radio"/> Termination of Contracts         | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table>                      |  |   |   |  |   | 0 | <input type="radio"/> No Authority |
|  |   |   |  |   | 0 |  |   |   |                                    |
| <input type="radio"/> Administrative Fines             | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table>                      |  |   |   |  |   | 0 | <input type="radio"/> No Authority |
|  |   |   |  |   | 0 |  |   |   |                                    |
| <input type="radio"/> Civil Penalties                  | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table>                      |  |   |   |  |   | 0 | <input type="radio"/> No Authority |
|  |   |   |  |   | 0 |  |   |   |                                    |
| <input type="radio"/> Administrative Orders            | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table>                      |  |   |   |  |   | 0 | <input type="radio"/> No Authority |
|  |   |   |  |   | 0 |  |   |   |                                    |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">2</td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table> |  |   |   |  | 2 | 0 |                                    |
|  |   |   |  | 2 | 0 |  |   |   |                                    |
| <input type="radio"/> Other                            | # | <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">0</td></tr></table>                      |  |   |   |  |   | 0 | <input type="radio"/> No Authority |
|  |   |   |  |   | 0 |  |   |   |                                    |

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

CITY OF SYRACUSE, NEW YORK
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SPDES ID  

N	Y	R	2	0	A	1	8	6
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**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

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

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

How many MS4s contributed to this report? 

--	--	--

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

		8
--	--	---
2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		5
--	--	---
3. What percent of active construction sites were inspected during this reporting period?  NT 

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

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

	2	5
--	---	---

 %
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, 2010  
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition CITY OF SYRACUSE, NEW YORK

SPDES ID  
N Y R 2 0 A 1 8 6

**6. con't.:**

Submit additional pages as needed.

MS4/Coalition Office

Department  
 Address  
 City Zip  
 Phone  
 ( ) -

Library

Address  
 City Zip  
 Phone  
 ( ) -

Other

Address  
 233 E WASHINGTON ST, ROOM 401  
 City Zip  
 SYRACUSE NY 13202  
 Phone  
 (315) 448-8200

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

URL  
 URL

URL  
 URL

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

CITY OF SYRACUSE, NEW YORK
----------------------------

SPDES ID  

N	Y	R	2	0	A	1	8	6
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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 (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.**

Require owners and developers of sites containing more than 10,000 square feet of land to submit a SWPPP and execute agreements with the City to assure long-term maintenance of all stormwater control facilities installed.

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

An increasing number of SWPPP's and agreements are being submitted for review.

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

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

(ex.: samples/participants/events)

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

Yes  No

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

Yes  No

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

Continue to require developers to submit SWPPP's and agreements for proposed projects.



**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 

CITY OF SYRACUSE, NEW YORK
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SPDES ID  

N	Y	R	2	0	A	1	8	6
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4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?  Yes  No

4b. Does the MS4 have a banking and credit system for stormwater management practices?  Yes  No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?  Yes  No

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

		0
--	--	---

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

	5	0
--	---	---

 %

**MS4 Annual Report Form**

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

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Name of MS4/Coalition 

CITY OF SYRACUSE, NEW YORK
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SPDES ID

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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 (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.**

Develop and inventory of post-construction stormwater management practices for use in an inspection program.

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

Due to lack of staff, the inventory has not been completed. Inspections are performed on a random basis.

**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).**

Within the next six (6) months, begin development of a spreadsheet listing post construction practices including a description of the practice, it's location, and when it was last inspected.

**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 

CITY OF SYRACUSE, NEW YORK
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SPDES ID  

N	Y	R	2	0	A	1	8	6
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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. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

CITY OF SYRACUSE, NEW YORK
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SPDES ID  

N	Y	R	2	0	A	1	8	6
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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 

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

2	5	0	0	0
---	---	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

	9	2	9	1
--	---	---	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

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

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

				0
--	--	--	--	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

			0	.	0
--	--	--	---	---	---

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

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

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

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

 / 

0	2
---	---

 / 

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

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

		3
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**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	1	0
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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 

CITY OF SYRACUSE, NEW YORK
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SPDES ID  

N	Y	R	2	0	A	1	8	6
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**7. Evaluating Progress Toward Measurable Goals MCM 6**

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

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

Rebuilt catch basins.

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

In the past year, 830 catch basins were rebuilt.

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

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

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

Yes  No

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

Yes  No

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

Continue rebuilding catch basins.

### MS4 Annual Report Form

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Name of MS4/Coalition CITY OF SYRACUSE, NEW YORK

SPDES ID  
N Y R 2 0 A 1 8 6

### Additional Watershed Improvement Strategy Best Management Practices

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

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

How many MS4s contributed to this report?      

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

MS4 Description	Answer	Check NA	(POC)
<b>NYC EOH Watershed</b>			
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	1,2,7a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
<b>Onondaga Lake Watershed</b>			
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
<b>Greenwood Lake Watershed</b>			
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
<b>Oyster Bay</b>			
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
<b>Peconic Estuary</b>			
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
<b>Oscawana Lake Watershed</b>			
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
<b>LI 27 Embayments</b>			
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?  Yes  No  N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?  Yes  No  N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.       %

Estimate what percentage was mapped in this reporting period.       %

**MS4 Annual Report Form**

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

2	0	1	0
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Name of MS4/Coalition 

CITY OF SYRACUSE, NEW YORK
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SPDES ID  

N	Y	R	2	0	A	1	8	6
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3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program?  Yes  No  N/A

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

N	/	A
---	---	---

 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more?  Yes  No  N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards?  Yes  No  N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading?  Yes  No  N/A

7b. How many projects have been sited in this reporting period? 

		3
--	--	---

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

		0
--	--	---

 %

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

		0
--	--	---

 %

No Projects Planned

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

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

### MS4 Annual Report Form

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2	0	1	0
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Name of MS4/Coalition 

CITY OF SYRACUSE, NEW YORK
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SPDES ID  

N	Y	R	2	0	A	1	8	6
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- 9. Has your MS4/Coalition developed and implemented a program of native planting?  
 Yes    No    N/A
  
- 10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?  
 Yes    No    N/A
  
- 11. Does your MS4/Coalition have a pet waste bag program?  
 Yes    No    N/A
  
- 12. Does your MS4/Coalition have a program to manage goose populations?  
 Yes    No    N/A