



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

MCC form for period ending March 9, 2020

Name of MS4

SPDES ID

#### Section 4 - Certification Statement

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

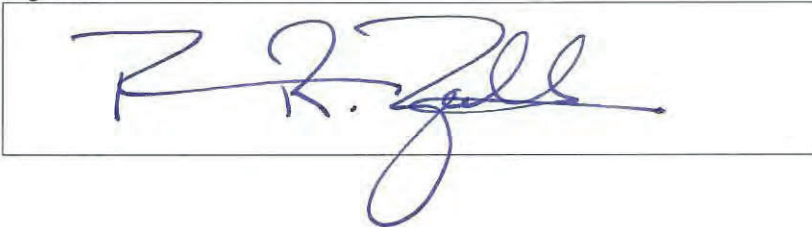
First Name

MI

Last Name

Title (Clearly print title of individual signing report)

Signature



Date

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

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

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2020

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

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 4 4 0

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

Yes  No

If Yes, choose one of the following

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

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

URL

h t t p : / / f r i e n d s o f t h e b a y . o r g / r e s  
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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 Cove 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:**

- |  |                     |  |   |   |   |   |   |
|--|---------------------|--|---|---|---|---|---|
| <input type="radio"/> Construction Site Operators Trained    | # Trained           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Direct Mailings                        | # Mailings          | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> Kiosks or Other Displays               | # Locations         | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> List-Serves                            | # In List           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Mailing List                | # In List           | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td>1</td><td>8</td><td>0</td></tr></table> |   |   | 1 | 8 | 0 |
|  |                     | 1  | 8 | 0 |   |   |   |
| <input checked="" type="radio"/> Newspaper Ads or Articles   | # Days Run          | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td>6</td></tr></table> |   |   |   |   | 6 |
|  |                     |  |   | 6 |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees         | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td>5</td><td>0</td><td>0</td><td>0</td></tr></table> |   | 5 | 0 | 0 | 0 |
|  | 5                   | 0  | 0 | 0 |   |   |   |
| <input type="radio"/> School Program                         | # Attendees         | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input type="radio"/> TV Spot/Program                        | # Days Run          | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |   |   |   |   |   |
|  |                     |  |   |   |   |   |   |
| <input checked="" type="radio"/> Printed Materials:          | Total # Distributed | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td>5</td><td>0</td><td>0</td></tr></table> |   |   | 5 | 0 | 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 Cove Neck
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SPDES ID  

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**3. Web Page con't.: Provide specific web addresses - not home page.**

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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 Cove Neck
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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 actively supports and promotes the education and outreach materials promoted by Nassau County (a coalition member), as well as The Friends of the Bay, and the Oyster Bay Cold Spring Harbor Protection Committee. There is no Village hall in Cove Neck, so that public posting of education materials is done by the County and protection committee in the area. The Village website contains information on sanitation.

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

The Village sends a representative to the monthly meetings of the Oyster Bay Cold Spring Harbor Protection Committee, and the information from the meetings is passed on to the Mayor, Village Trustees and members of other Village boards. The Village has been a member of the committee since the formation of the committee.

**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 will continue to be an active member of the Oyster Bay Cold Spring Harbor Protection Committee, and the Village will continue to be a coalition member with Nassau County, and to promote and support efforts made by the Friends of the Bay.









**MS4 Annual Report Form**

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Village of Cove Neck
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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**

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Name of MS4/Coalition

Village of Cove Neck
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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 openly invites its residents to public meetings where land development projects are reviewed and discussed, as well as discussions of the Oyster Bay Cold Spring Harbor Protection Committee. The Village promoted the Oyster Bay Beach cleanup held April 2018. As a coalition member with Nassau County, the Village has the added benefit of the County's activities relating to stormwater.
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**B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.**

See above.
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**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 is promoting a Oyster Bay beach cleanup to be held in 2019. The Village will continue to invite the public to meetings where proposed development projects are discussed.
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**MS4 Annual Report Form**

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Name of MS4/Coalition

Village of Cove Neck
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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.**

The Village completed the field reconnaissance of the Village in 2009. This included the verification that the Village does not have any piped stormwater system. The Village is low density residential, with no other land uses other than the Sagamore Hill National Historic Site.

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

The Village Building Inspector requires upgrades of existing septic systems for new homes and large additions to existing homes, and actively monitors the Village for signs of failing septic systems.

**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 monitor to detect illicit discharges within the Village and require upgraded sewage disposal systems for new homes.

**MS4 Annual Report Form**

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Village of Cove Neck
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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?**

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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> </td><td>0</td></tr></table> |  |  |   |  |  | 0 | <input type="radio"/> No Authority |
|   |   |   |  |  | 0 |  |  |   |                                    |
| <input checked="" type="radio"/> Stop Work Orders                 | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> |  |  |   |  |  | 0 | <input type="radio"/> No Authority |
|   |   |   |  |  | 0 |  |  |   |                                    |
| <input checked="" type="radio"/> Criminal Actions                 | # | <table border="1"><tr><td> </td><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> </td><td>0</td></tr></table> |  |  |   |  |  | 0 | <input type="radio"/> No Authority |
|   |   |   |  |  | 0 |  |  |   |                                    |
| <input checked="" type="radio"/> Administrative Fines             | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> |  |  |   |  |  | 0 | <input type="radio"/> No Authority |
|   |   |   |  |  | 0 |  |  |   |                                    |
| <input checked="" type="radio"/> Civil Penalties                  | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> |  |  |   |  |  | 0 | <input type="radio"/> No Authority |
|   |   |   |  |  | 0 |  |  |   |                                    |
| <input checked="" type="radio"/> Administrative Orders            | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> |  |  |   |  |  | 0 | <input type="radio"/> No Authority |
|   |   |   |  |  | 0 |  |  |   |                                    |
| <input checked="" type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> |  |  |   |  |  | 0 |                                    |
|   |   |   |  |  | 0 |  |  |   |                                    |
| <input type="radio"/> Other                                       | # | <table border="1"><tr><td> </td><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, 

2	0	2	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

Village of Cove Neck

SPDES ID

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

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

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

How many MS4s contributed to this report? 

		1
--	--	---

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

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

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

--	--	--

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

--	--	--

 %
  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 Cove Neck
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SPDES ID

N	Y	R	2	0	A	4	4	0
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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 Building Department reviews all applications for compliance with local laws pertaining to erosion control and stormwater management.
--

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

Enforcement actions taken in 2010 were effective to prevent additional land disturbances and to ensure that sediment would not reach surface waters.
--

**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 active construction sites and to review applications which include land disturbance.
--



**MS4 Annual Report Form**

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

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Name of MS4/Coalition 

Village of Cove Neck
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SPDES ID  

N	Y	R	2	0	A	4	4	0
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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?

		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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Name of MS4/Coalition

Village of Cove Neck
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SPDES ID

N	Y	R	2	0	A	4	4	0
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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.**

Monitoring stormwater practices at construction sites, and sources flooding in the Village.
---

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

There were no incidents of flooding or stormwater related issues to report.
---

**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).**

Continue to monitor and investigate stormwater systems and flooding.
--

**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 Cove Neck
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SPDES ID  

N	Y	R	2	0	A	4	4	0
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**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

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

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

How many MS4s contributed to this report? 

		1
--	--	---

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

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

### MS4 Annual Report Form

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

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

Name of MS4/Coalition 

Village of Cove Neck
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SPDES ID  

N	Y	R	2	0	A	4	4	0
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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 

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

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

--	--	--	--	--
- 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 # Acres 

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

  
 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

**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?**

--	--

 / 

--	--

 / 

--	--	--	--	--

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

		0
--	--	---

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

		0
--	--	---

 %

**MS4 Annual Report Form**

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

2	0	2	0
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Name of MS4/Coalition

Village of Cove Neck
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SPDES ID

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

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

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

The Village has 1/3 road mile and no public works staff. There is no municipal storm system owned by the Village. The Village sweeps its road to prevent debris and sand from being transported to surface waters.
--

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

No observation were made of any discharges from the Village road into surface waters.
---

**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).**

Continue to sweep the road and monitor effectiveness of activities.
---