TOWN OF CHARLTON

New York State Department of Environmental Conservation SPDES General Permit Coverage For Municipal Separate Storm Sewer Systems

Permit # NYR20A032

STORM WATER MANAGEMENT PROGRAM

2014 ANNUAL REPORT March 10, 2014 – March 9, 2015

Report Date: April 22, 2015



Town of Charlton 784 Charlton Road Charlton, New York 12019 Telephone: 518 384-0152 Fax 518 384-0385

Prepared By:

The Environmental Design Partnership 900 Route 146 Clifton Park, N.Y. 12065 (518) 371-7621 This annual report is a statutory requirement of the Town of Charlton's State Pollutant Discharge Elimination System (SPDES) permit number **NYR20A032**. This report summarizes activities undertaken during the past permit year related to its Storm Water Management Program (SWMP).

Copies of the written SWMP are available for public review and comment at the Charlton Town Hall at 758 Charlton Road or with the report preparer by appointment at:

Michael McNamara, P.E. Charlton Town Engineer Environmental Design Partnership 900 Route 146 Clifton Park, N.Y. 12065 (518) 371-7621 mmcnamara@edpllp.com

This annual report and prior annual reports are also available for public review on the Charlton website at www.townofcharlton.org/pages/chartonny_ms4/reports. Comments on the annual report may also be submitted on the website or directly to the preparer at the address above.

This annual report is submitted to the New York State Department of Environmental Conservation by June 1rst every year as part of the Saratoga County Inter-Municipal Stormwater Management Program. Information on the County program can be found online at www.saratogastormwater.org.

MCC form for period ending March 9, 2 0 1 5

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Name of MS4 Town of Charlton	N	Y	R	2	0	А	0	3	2

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- O A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

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MCC form for period ending March 9, $\begin{vmatrix} 2 & 0 & 1 \end{vmatrix}$ 5

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Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

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

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

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

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MCC form for period ending March 9, 2 0 1 5

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- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

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MCC form for period ending March 9, 2 0 1 5

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- O Local Stormwater Public Contact
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- Report Preparer

First Name	MI Last Name
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Title	
Town Engineer	
Address	
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City	State Zip
	State Zip
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C l i f t o n P a r k	N Y 1 2 0 6 5 -
Clifton Park eMail	N Y 1 2 0 6 5 -

MCC form for period ending March 9, 2 0 1 5

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MCC form for period ending March 9, 2 0 1 5

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Name of MS4 Town of Charlton		A A	R	2	0	A	0	3	2

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 A 1 a n	MI	Last Nam	t i	đ	g	е				
Title (Clearly print title of individual signing report) S u p e r v i s o r						;				
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Send completed form and any attachments to the DEC Central Office at:

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

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 5 & 1 \end{vmatrix}$

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	las this MS4/Coalition produced any reports documenting velated to stormwater? If not, answer No and proceed to Minone. s, choose one of the following port(s) attached to the annual report b Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can URL URL URL																											
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	SPDES ID
Name of MS4/Coalition Town of Charlton	N Y R 2 0 A 0 3 2
Minimum Control Measure 1. Public Ed	ucation and Outreach
The information in this section is being reported (check one):	
● On behalf of an individual MS4 ○ On behalf of a coalition How many MS4s contributed to this report?	
1. Targeted Public Education and Outreach Best Managem	ent Practices
Check all topics that were included in Education and Outreach d	luring this reporting period:
• Construction Sites	O Pesticide and Fertilizer Application
• General Stormwater Management Information	Pet Waste Management
 Household Hazardous Waste Disposal 	Recycling
O Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
O Infrastructure Maintenance	O Trash Management
O Smart Growth	O Vehicle Washing
O Storm Drain Marking	O Water Conservation
• Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
Other:	○ None
Other	
2. Specific audiences targeted during this reporting period:	
● Public Employees ○ Contractors	
ResidentialDevelopers	
○ Businesses	
○ Restaurants ○ Industries	
• Other: O Agricultural	
Planning & Town Board Other	members

This report is being submitted for the reporting period ending March 9, 2 0 1 5 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

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This report is being submitted for the reporting period ending March 9, 2 0 1 5

If submitting this form as part of a joint report on behalf of a	coalition leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition Town of Charlton	N Y R 2 0 A 0 3 2
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMF III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Actively participate in the Saratoga County Intermunicipal progra Town Newsletter. Continue to educate Board members through c annual coordination meeting with relevant officials. Continue sig wastes.	onference attendance and Town's
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Attendance at road cleanups increases yearly. Planning Board ha Stormwater management techniques and has increased focus in the	
C. How many times was this observation measured or evaluate	ted in this reporting period? (ex.: samples/participants/events
D. Has your MS4 made progress toward this Measurable Goa	
E. Is your MS4 on schedule to meet the deadline set forth in t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	
Road cleanup events in spring. Continue participation in County newsletter/website information, rerun MS4 informational article, licenses.	1 0

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 5 & 1 \end{vmatrix}$

Name of MS4/Coalition Town of Charlton		N Y R 2	0	A 0	3	2
Minimum Control Measure 2.	Public Involvemen	t/Participa	<u>atio</u>	<u>n</u>		
The information in this section is being reported (check	cone):					
 ◆ On behalf of an individual MS4 ○ On behalf of a coalition How many MS4s contributed to this re 	eport?					
1. What opportunities were provided for public development, evaluation and improvement o (SWMP) Plan during this reporting period?	f the Stormwater Mai	nagement P	_	am		
Cleanup Events		# Events				2
O Comments on SWMP Received		# Comments				
Community Hotlines	Phone # ()	-			
Phone # (5 1 8) 8 8 5 - 8 9 9 5	Phone # ()] - [
Phone # () -	Phone # ()	-			
Phone # () -	Phone # (-			
Phone # () -	Phone # (-			
Phone # () -	Phone # (-			
O Community Meetings	\	# Attendees				
Plantings		Sq. Ft.		1 5	0	0
O Storm Drain Markings		#Drains				
O Stakeholder Meetings		# Attendees				
O Volunteer Monitoring		# Events				
Other:						
2. Was public notice of availability of this annu Program (SWMP) Plan provided?	al report and Stormy	vater Manaş		e nt Yes	0	No
• List-Serve		# In List		6	0	0
O Newspaper Advertising		# Days Run				
○ TV/Radio Notices		# Days Run				
● Other: C o p y a t T o w n H	[a 1 1					
• Web Page URL: Enter URL(s) on the following t	wo pages.					

Name of MS4/Coalition Town of Charlton

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 5 & 1 \end{vmatrix}$

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

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Name of MS4/Coalition Town of Charlton

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 5 & 1 \end{vmatrix}$

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

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Name of MS4/Coalition Town of Charlton

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

Program SWMP) Plan and submit comments on those documents?

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

SPDES ID

N Y R 2 0 A 0 3 2

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This report is being submitted for the reporting period ending March 9, 2 0 1 5

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Name of MS4/Coalition Town of Charlton		N	YR	2	0	A	0	3	2
4.a. If this report was made available on the internet, what da	ate was it	po	sted?						
Leave blank if this report was not posted on the internet.	0	5	/ 3	0	/	2	0	1	5
4.b. For how many days was/will this report be posted?							9	9	9
If submitting a report for single MS4, answer 5.a If submitt	ting a join	ıt re	eport,	ans	we	r 5.	b		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting perio	d?	,			Ye	es	•	No
,			/		/				
If No, is one planned?					С	Ye	es	•	No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	tin	g to t	his	rep	ort	t dı	ırir	ıg
this reporting period?					С	Υe	es		No
If No, is one planned for each?					С	Υe	es		No
6. Were comments received during this reporting period?					C	Ye	es	•	No
If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.									

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$ 1 $\begin{vmatrix} 5 & 1 \end{vmatrix}$

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

SPDES ID

Name of MS4/Coalition Town of Charlton	N Y R 2 0 A 0 3 2
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Participate in Saratoga County Intermunicipal Storm program. C giveaway. Continue waste collection and recycling events as post	
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
Attendance at tree planting giveaway and roadside pickup events	increases annually.
C. How many times was this observation measured or evaluation	ted in this reporting period?
	(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 t	
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	eet the goals of this MCM during
Continue participation in County program and town wide cleanup	o events

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 5 & 1 \end{vmatrix}$

Name of MS4/Coalition Town of Charlton	N Y R 2 0 A 0 3 2										
Minimum Control Measure 3. 1	Illicit Discharge Detection and Elimination										
The information in this section is being reported (check one):										
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 											
1. Enter the number and approx. percent of outfalls mapped: 2 5 # 1 0 0 %											
2. How many of these outfalls have been so reporting period (outfall reconnaissance	ereened for dry weather discharges during this inventory)?										
3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?											
O Auto Recyclers	○ Landscaping (Irrigation)										
O Building Maintenance	○ Marinas										
○ Churches	O Metal Plateing Operations										
O Commercial Carwashes	Outdoor Fluid Storage										
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance										
O Construction Vehicle Washouts	O Printing										
○ Cross-Connections	• Residential Carwashing										
O Distribution Centers	Restaurants										
O Food Processing Facilities	O Schools and Universities										
O Garbage Truck Washouts	Septic Maintenance										
○ Hospitals	○ Swimming Pools										
O Improper RV Waste Disposal	○ Vehicle Fueling										
O Industrial Process Water	O Vehicle Maint./Repair Shops										
● Other: A G R I C U L T U R E	O None										
O Sewersheds:											

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 \end{bmatrix}$ 1 $\begin{bmatrix} 5 & 1 \end{bmatrix}$

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

SPDES ID

Name of MS4/Coalition Town of Charlton				N Y	R	2	0 2	0	3	2
3.b.What types of illicit discharges have	e been found dui	ring this r	eport	ing p	erio	od?				
O Broken Lines From Sanitary Sewer	O Industrial Con	nnections								
O Cross Connections	O Inflow/Infiltra	tion								
O Failing Septic Systems	O Pump Station	Failure								
O Floor Drains Connected To Storm Sewers	O Sanitary Sewe	er Overflow	'S							
O Illegal Dumping	O Straight Pipe	Sewer Disc	harge	S						
Other: 4. How many illicit discharges/potentia	● None	ions have	been	dete	cted	l dı	ıring	thi	s	
reporting period?										0
5 Hamman 202-24 Park and bare k				.4°		•1	n		$\overline{}$	0
5. How many illicit discharges have be	en commineu uu	iring tins	repor	ung	per	lou	•			U
6. How many illicit discharges/illegal c	onnections have	been elim	inate	ed du	rin	g th	is re	por	ting	,
period?										0
7. Has the storm sewershed mapping b	-	-	•		iod'	?	• 7	'es	0	No
If No, approximately what percent was	s completed in thi	is reporting	g peri	od?						%
8. Is the above information available in	ı GIS?						\circ Y	'es		No
Is this information available on the value of Yes, provide URL(s):	web?						\circ Y	'es	•	No
Please provide specific address of page	where map(s) ca	n be acces	sed -	not h	ome	e pa	ge.			
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This report is being submitted for the reporting period ending March 9, 2 0 1 5

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This report is being submitted for the reporting period ending March 9, 2 0 1 5

If submittin	ng this form as part of a joint report on behalf of	
		SPDES ID
Name of MS4/Coalition	Town of Charlton	N Y R 2 0 A 0 3 2
Use this page to rep	gress Toward Measurable Goals MCM 3 ort on your progress and project plans towa	rd achieving measurable goals
III.C.1. Submit addi	tional pages as needed.	,
A. Briefly summar	rize the Measurable Goal identified in the	e SWMPP in this reporting period.
observations of stor collection sites, trac officials of the proh	in MS4 outfall map, monitor land use changer outfalls, continue laboratory testing of sek changes in 9 parameter pollutant profile, nibition of discharges to storm system relates scharges via public input and reporting.	urface water at two watershed continue to inform public & town
B. Briefly summar Goal.	rize the observations that indicated the o	verall effectiveness of this Measurable
	vations did not indicate the presence of any nent pure water results.	illicit discharges. Stream testing
C. How many time	es was this observation measured or eval	3
D. Has your MSA	made progress toward this measurable g	(ex.: samples/participants/even
D. Has your MS4	made progress toward this measurable g	• Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth i	n the SWMPP?
E Duioffer summer	ing the stormwater optivities planned to	• Yes • No
-	rize the stormwater activities planned to ing cycle (including an implementation so	9
	tinue to perform the same tasks related to Il	licit Discharge Detection and

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 5 & 1 \end{vmatrix}$

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

			SPI	<u>DES</u>	ID						
Name of MS4/Coalition	Town of Charlton		N	Y	R	2	0	А	0	3	2
	Minimum Cardual Managemen	4 3 5									

Minimum Control Measures 4 and 5.

	Construction Site and Post-Construction Control		
The	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a	. Has each MS4 contributing to this report adopted a law, ordinance or other reg mechanism that provides equivalent protection to the NYS SPDES General Per	mit for	
	Stormwater Discharges from Construction Activities?	• Yes	○ No
	Sediment Control through either an attorney cerfification or using the NYSDE Analysis Workbook? ■ Yes If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La ○ 09/2004 ● 0.	○ No	O 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	e been	
	reviewed in this reporting period?		1
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of purcomments related to construction SWPPPs? • Yes	ıblic O No	O 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 SWPPP process?	the loca • Yes	al O No

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

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

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 5 & 1 \end{vmatrix}$

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

Name of MS4/Coalition Town of Charlton N Y R	2 0 A 0 3 2
Minimum Control Measure 4. Construction Site Stormwater Ru	unoff 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 o during this reporting period?	ne acre or more
2. How many construction projects disturbing at least one acre were active in during this reporting period?	your jurisdiction 2
3. What percent of active construction sites were inspected during this reporting	ng period? ONT
4. What percent of active construction sites were inspected more than once?	O NT
5. Do all inspectors working on behalf of the MS4s contributing to this report Construction Stormwater Inspection Manual?	

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPs) 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

If your MS4 is Non-Traditional, are SWPPs of construction projects made available for public review? $\hfill \circ$ Yes $\hfill \circ$ No

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

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix}$ 1 | 5

	SPI	DES	ID					
Name of MS4/Coalition Town of Charlton	N	Y	R	2	0	A	0	3 2
6. con't.:								
Submit additional pages as needed.								
● MS4/Coalition Office								
Department								
T o w n E n g i n e e r								
Address								
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City	Zip	\equiv						
C 1 i f t o n P a r k N Y	1 2	0	6	5	-			
Phone								
(5 1 8) 3 7 1 - 7 6 2 1								
○ Library								
Address								
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If submitting this form as part of a joint report on benaif of a	SPDES ID blank.
Name of MS4/Coalition Town of Charlton	N Y R 2 0 A 0 3 2
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward dentified in your Stormwater Management Program Plan (SWM II.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the S	SWMPP in this reporting period.
continue review of development projects by PB and Town Engir temporary mitigation efforts used during construction to combat pollution prevention plans & erosion and sediment control plans developer SWPPP and erosion plans, supervise field conditions, construction program, continue inform developers of their obliga-	erosion, review written storm water drawings, issue approval of continue implementation of small
3. Briefly summarize the observations that indicated the ove Goal.	rall effectiveness of this Measurable
No erosion problems during construction. At close of reporting	period, disturbance is less than one
No erosion problems during construction. At close of reporting acre. No erosion and sediment related complaints Town wide re	period, disturbance is less than one lated to any construction projects. ted in this reporting period?
No erosion problems during construction. At close of reporting acre. No erosion and sediment related complaints Town wide re	period, disturbance is less than one lated to any construction projects.
No erosion problems during construction. At close of reporting acre. No erosion and sediment related complaints Town wide re C. How many times was this observation measured or evalua	period, disturbance is less than one lated to any construction projects. ted in this reporting period? (ex.: samples/participants/e
No erosion problems during construction. At close of reporting acre. No erosion and sediment related complaints Town wide re C. How many times was this observation measured or evalua D. Has your MS4 made progress toward this measurable goa	period, disturbance is less than one lated to any construction projects. ted in this reporting period? (ex.: samples/participants/ell during this reporting period? Yes O No the SWMPP?
Only 2 current projects in Town during reporting period with gree No erosion problems during construction. At close of reporting acre. No erosion and sediment related complaints Town wide recommendated. Town wide recommendated complaints Town wide recommendated to measured or evaluated. How many times was this observation measured or evaluated. How many times was this observation measured or evaluated. It is your MS4 made progress toward this measurable goals. Is your MS4 on schedule to meet the deadline set forth in the next reporting cycle (including an implementation schedule to meet the next reporting cycle (including an implementation schedule).	ted in this reporting period? (ex.: samples/participants/e I during this reporting period? Yes O No the SWMPP? Yes O No eet the goals of this MCM during

Other:

P | 1 | a | n | n | i | n | g

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 5

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

		<i>J</i> • • • • • • • • • • • • • • • • • • •		SPDES ID	
Name of MS4/Coalition	Town of Char	·lton		N Y R	2 0 A 0 3 2
Minimum	Control Mea	asure 5. Post	-Constructio	on Stormwater I	<u>Management</u>
The information in the	nis section is bei	ng reported (che	ck one):		
On behalf of an incOn behalf of a coa					
	nany MS4s con	tributed to this	report?		
•	• • •			anagement practices reporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
Alternative Practice	ces	1	1	0	
• Filter Systems		1	1	0	
• Infiltration Basins		1	1	0	
Open Channels		6 5	6 5	1	
Ponds		1	1	1	
O Wetlands					
Other					
2. Do you use an BMPs, inspect			abase, spreads	heet) to track post	-construction ○ Yes • No
3. What types of Development/H		-		implement Low Inciples?	npact
O Building Codes	Municipal C	Comprehensive F	Plans		
Overlay Districts	Open Space	Preservation Pr	ogram		
Zoning	O Local Law o	or Ordinance			
○ None	• Land Use R	Legulation/Zoning	g		
O Watershed Plans	Other Comr	rehensive Plan			

i c y

Board

This report is being submitted for the reporting period ending March 9, 2 0 1 5

		SPL	DES II)				
Name of MS4/Coalition Town of Charlton		N	YF	2	0 2	0 A	3	2
4a. Are the MS4s contributing to this report involved in a regiona	l/watershe	ed w	ide p	lanı	0	e ffor Yes		No
4b. Does the MS4 have a banking and credit system for stormwater	er manage	mei	nt pra	ectic	es?			
					0	Yes		No
4c. Do the SWMP Plans for each MS4 contributing to this report and approval of banking and credit of alternative siting of a st					t pra		?	No
4d. How many stormwater management practices have been impl	emented a	s pa	art of	this	syste	em ir	ı thi	is
reporting period?							0	
5. What percent of municipal officials/MS4 staff responsible for		-				tend	ed	
training on Low Impace Development (LID), Better Site Desig Infrastructure principles in this reporting period?	n (BSD) a	nd o	other	Gre	en _			ا ۾ ا
init astructure principles in this reporting period:						1	0	%

This report is being submitted for the reporting period ending March 9, 2 0 1 5

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.	
SPDES ID	_
Name of MS4/Coalition Town of Charlton N Y R 2 0 A 0 3 2	
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.	٦
Continue to ensure the use of permanent stormwater management treatment facilities for applicable development projects, institute perpetual care agreements or require public dedication to promote long term health of treatment facilities.	
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.	e
Charlton has had only two major development projects in at least 20 years. Currently there are only 3 privately owned and 1 municipally owned, modern stormwater management facilities. The oldest of those facilities was completed in 2009.	
C. How many times was this observation measured or evaluated in this reporting period?]
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).	_
2 major subdivision projects are now under construction. The Town has inspected the sites numerous times to ensure compliance with their SWPPPs. Private inspections occur weekly at each site and the reports are emailed to the Town Engineer.	

This report is being submitted for the reporting period ending March 9, 2 0 1

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

	SPI	DES	ID						
Name of MS4/Coalition Town of Charlton	N	Y	R	2	0	А	0	3	2

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
On behalf of an individual MS4On behalf of a coalition	
How many MS4s contributed to this report?	

1. 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.

Self-Assessment

Operation/Activity/Facility performed within the past 3 **Operation/Activity/Facility** Addressed in SWMP? vears? Street Maintenance...... 9 Yes ○ No • Yes \bigcirc No ● No ○ Yes No Bridge Maintenance. O Yes Winter Road Maintenance.

• Yes ○ No • Yes \bigcirc No Salt Storage. • Yes ○ No • Yes \bigcirc No No Solid Waste Management..... O Yes ● No ○ Yes New Municipal Construction and Land Disturbance.. • Yes ○ No • Yes \bigcirc No Right of Way Maintenance.

• Yes \bigcirc No ● No ○ Yes Marine Operations.... O Yes No Hydrologic Habitat Modification..... O Yes ● No ○ Yes No \bigcirc No Parks and Open Space.

• Yes ○ No • Yes Municipal Building.... • Yes \bigcirc No \bigcirc No Stormwater System Maintenance.

• Yes ○ No • Yes \bigcirc No Vehicle and Fleet Maintenance.

• Yes Other. O Yes ○ No ○ Yes \bigcirc No

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 5 & 1 \end{vmatrix}$

	SPDES ID		
Name of MS4/Coalition Town of Charlton	N Y R 2	0 A 0	3 2
2. Provide the following information about municipal operat	ions good housekeep	oing progr	ams:
O Parking Lots Swept (Number of acres X Number of times swep	t) # Acres		
• Streets Swept (Number of miles X Number of times swept)	# Miles		1 5
• Catch Basins Inspected and Cleaned Where Necessary	#		2 0
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		1
O Phosphorus Applied In Chemical Fertilizer	# Lbs.		
O Nitrogen Applied In Chemical Fertilizer	# Lbs.		
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	# Acres [umber of].
3. How many stormwater management trainings have been put during this reporting period?	provided to municipa	al employe	0
4. What was the date of the last training?	0 3 / 0 1	/ 2 0	1 2
5. How many municipal employees have been trained in this	reporting period?		0
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments r		5 %

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 1 & 5 \end{vmatrix}$

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

		SPD	ES	ID						
Name of MS4/Coalition	Town of Charlton	N	Y	R	2	0	А	0	3	2

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.

Continue to maintain new Town Hall storm water management system, continue housekeeping policies at Town Garage for salt and fuel oil storage, continue training classes for Highway Superintendent, continue street sweeping agreement with Village of Ballston Spa, rotating storm sewer cleanout, ditch maintenance.

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

Charlton's water testing program continues to validate the lack of pollutants in the watershed. Town owned & managed facilities are in good condition and are well maintained. Municipal facilities are observed daily and maintenance issues are addressed as soon as possible.

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

|--|

(ex.: samples/participants/events)

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

Yes	○ No
● 1 C3	\circ 110

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

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

Charlton's good housekeeping MCM is in full implementation in accordance with its Storm Water Management Program Plan. The Town will continue to pursue the same policies in the upcoming year.



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314 North Pearl Street ♦ Albany, New York 12207 (800) 848-4983 ♦ (518) 434-4546 ♦ Fax (518) 434-0891

November 11, 2014

Michael McNamara-Envir. Design Charlton, Town of Town Hall 758 Charlton Road Charlton, NY 12019

> TEL: (518) 384-0152 FAX: (518) 384-0385

RE: Stage Road/Alplaus Kill

Dear Michael McNamara-Envir. Design:

Adirondack Environmental Services, Inc received 2 samples on 10/28/2014 for the analyses presented in the following report.

Please see case narrative for specifics on analysis.

If you have any questions regarding these tests results, please feel free to call.

Sincerely,

ELAP#: 10709

Work Order No: 141028060

Tara Daniels

Laboratory Manager

CC:

Mike McNamara-Envir. Design

Adirondack Environmental Services, Inc

CASE NARRATIVE

CLIENT:

Charlton, Town of

Date: 11-Nov-14

Project:

Stage Road/Alplaus Kill

Lab Order:

141028060

Sample containers were supplied by Adirondack Environmental Services.

C - Details are above in Case Narrative

Qualifiers:

ND - Not Detected at reporting limit

S - LCS Spike recovery outside acceptable limits(+ is over - is under)

J - Analyte detected below quantitation limit

R - Duplication outside acceptable limits

B - Analyte detected in Blank

T - Tentatively Identified Compound-Estimated

X - Exceeds maximum contamination limit

E -Above quantitation range-Estimated

H - Hold time exceeded

M - Matrix Spike outside acceptable limits(+ is over - is under)

Note: All Results are reported as wet weight unless noted

The results relate only to the items tested. Information supplied by the client is assumed to be correct.

Adirondack Environmental Services, Inc

Date: 11-Nov-14

CLIENT:

Charlton, Town of

Work Order:

141028060

Reference:

PO#:

Stage Road/Alplaus Kill /

Client Sample ID: Stage Road

Collection Date: 10/28/2014 3:00:00 PM

Lab Sample ID: 141028060-001

Matrix: WATER

Analyses	Result	PQL Qu	al Units	DF	Date Analyzed
ICP METALS - EPA 200.7 (Prep: SW3010A - 10/2	9/2014)				Analyst: TM
Sodium	46.3	0.500	mg/L	10	11/6/2014 6:14:58 PM
ANIONS BY ION CHROMATOGRAPH	IY - EPA 300.0				Analyst: CS
Chloride Nitrate, Nitrogen (As N)	94.7 0.65	1.00 0.02	mg/L mg/L	1 1	10/29/2014 5:08:45 PM 10/29/2014 5:08:45 PM
ALKALINITY TO PH 4.5 -SM 2320B					Analyst: PL
Alkalinity, Total (As CaCO3) TOTAL PHOSPHATE - SM 4500 P E	110	10	mg/L CaCO3	1	11/8/2014 Analyst: SH
TOTAL PROSPRATE - SIM 4500 P E					•
Phosphorus, Total (as P)	0.02	0.02	mg/L	1	11/7/2014
TOTAL DISSOLVED SOLIDS - SM 25	540C				Analyst: CS
TDS (Residue, Filterable)	335	5	mg/L	1	11/4/2014
SILICA GEL TREATED HEM (SGT-H	EM) - EPA 1664A				Analyst: AB
Total Petroleum Hydrocarbons	< 1.0	1.0	mg/L	1	11/6/2014
NITRITE - SM4500 NO2 B					Analyst: TS
Nitrite Nitrogen (as N)	< 0.01	0.01	mg/L	1	10/29/2014 12:35:00 PM
PH - SM4500 H B - NOT CERTIFIABLE	E PARAMETER				Analyst: TS
рН	7.9	1.0 H	I pH Units@66F	1	10/28/2014 5:07:00 PM

Adirondack Environmental Services, Inc

Date: 11-Nov-14

Collection Date: 10/28/2014 3:00:00 PM

CLIENT:

PO#:

Charlton, Town of

Work Order: Reference:

141028060

Stage Road/Alplaus Kill /

Matrix: WATER

Lab Sample ID: 141028060-002

Client Sample ID: Alplaus Kill

DF Analyses Result PQL Qual Units Date Analyzed **ICP METALS - EPA 200.7** Analyst: TM (Prep: SW3010A - 10/29/2014 Sodium 23.5 0.050 1 11/6/2014 6:18:21 PM mg/L ANIONS BY ION CHROMATOGRAPHY - EPA 300.0 Analyst: CS Chloride 10/29/2014 5:25:21 PM 45.7 1.00 mg/L 1 Nitrate, Nitrogen (As N) 10/29/2014 5:25:21 PM 0.14 0.02 mg/L ALKALINITY TO PH 4.5 -SM 2320B Analyst: PL Alkalinity, Total (As CaCO3) 10 mg/L CaCO3 1 11/8/2014 110 TOTAL PHOSPHATE - SM 4500 P E Analyst: SH 11/7/2014 Phosphorus, Total (as P) 0.03 0.02 mg/L 1 TOTAL DISSOLVED SOLIDS - SM 2540C Analyst: CS TDS (Residue, Filterable) 5 1 11/4/2014 265 mg/L SILICA GEL TREATED HEM (SGT-HEM) - EPA 1664A Analyst: AB 1 11/6/2014 Total Petroleum Hydrocarbons < 1.0 1.0 mg/L NITRITE - SM4500 NO2 B Analyst: TS 1 10/29/2014 12:35:00 PM Nitrite Nitrogen (as N) < 0.01 0.01 mg/L PH - SM4500 H B - NOT CERTIFIABLE PARAMETER Analyst: TS pH Units@64F 10/28/2014 5:07:00 PM рΗ 8.2 1.0 1



314 North Pearl Street Albany, New York 12207 518-434-4546/434-0891 FAX

CHAIN OF CUSTODY RECORD

AES Work Order #

A full service analytical research laboratory offering solutions to environmental concerns

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PINK - Generator Copy



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TERMS, CONDITIONS & LIMITATIONS

All service rendered by the **Adirondack Environmental Services**, **Inc**. are undertaken and all rates are based upon the following terms:

- (a) Neither Adirondack Environmental Services, Inc., nor any of its employees, agents or sub-contractors shall be liable for any loss or damage arising out of Adirondack Environmental Services, Inc.'s performance or nonperformance, whether by way of negligence or breach of contract, or otherwise, in any amount greater than twice the amount billed to the customer for the work leading to the claim of the customer. Said remedy shall be the sole and exclusive remedy against Adirondack Environmental Services, Inc. arising out of its work.
- (b) All claims made must be in writing within forty-five (45) days after delivery of the **Adirondack Environmental Services, Inc.** report regarding said work or such claim shall be deemed or irrevocably waived.
- (c) Adirondack Environmental Services, Inc. reports are submitted in writing and are for our customers only. Our customers are considered to be only those entities being billed for our services. Acquisition of an Adirondack Environmental Services, Inc. report by other than our customer does not constitute a representation of Adirondack Environmental Services, Inc. as to the accuracy of the contents thereof.
- (d) In no event shall Adirondack Environmental Services, Inc., its employees, agents or sub-contractors be responsible for consequential or special damages of any kind or in any amount.
- (e) No deviation from the terms set forth herein shall bind Adirondack Environmental Services, Inc. unless in writing and signed by a Director of Adirondack Environmental Services, Inc.
- (f) Results pertain only to items analyzed. Information supplied by client is assumed to be correct. This information may be used on reports and in calculations and **Adirondack Environmental Services, Inc.** is not responsible for the accuracy of this information.
- (g) Payments by Credit Card/Purchase Cards are subject to a 3% additional charge.