4961183103

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2011

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 Waterford

SPDES ID: NYR20A037

Minimum Control Measure 2. Public Involvement/Participation

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

● On behalf of an individual MS4
○ On behalf of a coalition
How many MS4s contributed to this report? ___

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

● Cleanup Events — # Events: 4

○ Comments on SWMP Received — # Comments: ___

● Community Hotlines — Phone # (518) 234-1413

Phone # ( ) - ; Phone # ( ) -
Phone # ( ) - ; Phone # ( ) -
Phone # ( ) - ; Phone # ( ) -
Phone # ( ) - ; Phone # ( ) -
Phone # ( ) - ; Phone # ( ) -

○ Community Meetings — # Attendees: ___

○ Plantings — Sq. Ft.: ___

● Storm Drain Markings — # Drains: 30

○ Stakeholder Meetings — # Attendees: ___

○ Volunteer Monitoring — # Events: ___

● Other: Literature Distribution

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided? ● Yes ○ No

○ List-Serve — # In List: ___

○ Newspaper Advertising — # Days Run: ___

○ TV/Radio Notices — # Days Run: ___

○ Other: ___

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