MS4 Annual Report Cover Page

MCC form for period ending March 9, 2014

SPDES ID
NYR20C006

This cover page must be completed by the report preparer.
Joint reports require only one cover page.

Choose one:

○ **This report is being submitted on behalf of an individual MS4.**

Fill in SPDES ID in upper right hand corner.

Name of MS4

OR

○ **This report is being submitted on behalf of a Single Entity**

(Per Part II.E of GP-0-10-002)

Name of Single Entity

OR

● **This is a joint report being submitted on behalf of a coalition.**

Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.

Name of Coalition

Saratoga County Intermunicipal
Stormwater Management Program

SPDES ID NYR20A157	SPDES ID NYR20A376	SPDES ID NYR20A032
SPDES ID NYR20A035	SPDES ID NYR20A123	SPDES ID NYR20A375
SPDES ID NYR20A086	SPDES ID NYR20A108	SPDES ID NYR20A158
SPDES ID NYR20A099	SPDES ID NYR20A209	SPDES ID NYR20A216
SPDES ID NYR20A091	SPDES ID NYR20A037	SPDES ID NYR20A469
SPDES ID NYR20A114	SPDES ID NYR20A	SPDES ID NYR20A