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# STORMWATER MANAGEMENT PROGRAM

## MS4 ANNUAL REPORT FOR 2022-2023

SPDES #NYR20A396

FOR

*TOWN OF POMPEY*  
ONONDAGA COUNTY, NEW YORK

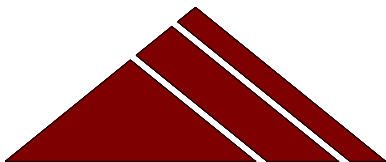
May 2023



***DUNN & SGROMO ENGINEERS, PLLC***  
***SYRACUSE • NEWBURGH***

Principal Office:  
5800 Heritage Landing Drive  
East Syracuse, New York 13057  
Telephone: (315) 449-4940  
Facsimile: (315) 449-4941  
Email: [info@dunnandsgromo.com](mailto:info@dunnandsgromo.com)

**50** YEARS  
ANNIVERSARY



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**APPENDIX F** – Stormwater Facility Inspection/Maintenance Reports

**APPENDIX A**

**Annual Report**

**Form**

**MS4 Annual Report Cover Page**

MCC form for period ending March 9, 2 0 2 3

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

SPDES ID  
N Y R 2 0 A 3 9 6

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

T o w n o f P o m p e y

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

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**MS4 Annual Report Cover Page**

MCC form for period ending March 9,

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, 2023

Name of MS4

SPDES ID  
N Y R 2 0 A 3 9 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  MI  Last Name

Title

Address

City  State  Zip

eMail

Phone  County

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

MCC form for period ending March 9, 2023

Name of MS4

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N Y R 2 0 A 3 9 6

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

First Name  MI  Last Name

Title

Address

City  State  Zip

eMail

Phone  County



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

MCC form for period ending March 9, 

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Name of MS4 

Town of Pompey
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SPDES ID  

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**Section 2 - Contact Information**

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Contact information must be provided for *each* of the following positions as indicated below:

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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 

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 Last Name 

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City 

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 State 

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 Zip 

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eMail 

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Phone 

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 County 

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

MCC form for period ending March 9, 2023

Name of MS4

SPDES ID  

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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

Partner/Coalition Name (con't.)

SPDES Partner ID - If applicable

Address

City

State

Zip

eMail

Phone

(   )   -

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

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.

Public education program includes an enhanced focus of the sources, impacts, and strategies for addressing phosphorus in the Onondaga Lake watershed

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

MCC form for period ending March 9, 

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Name of MS4 

Town of Pompey
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SPDES ID  

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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.

<b>First Name</b>	<b>MI</b>	<b>Last Name</b>
R e n e e		R o t o n d o

**Title (Clearly print title of individual signing report)**

S u p e r v i s o r
---------------------

**Signature**

--

**Date**

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The annual report form and any attachments can be sent to the DEC Central Office clicking the Submit Form link below, or by sending it directly to: [MS4compliance@dec.ny.gov](mailto:MS4compliance@dec.ny.gov). All submissions must include the SPDES ID in the title and must be complete before hitting the Submit Form link below:

**Submit Form**

If unable to submit electronically, hardcopy submissions can be sent to:

Bureau of Water Compliance  
 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,**

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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 

CNY Stormwater Coalition
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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="display: inline-table;"><tr><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input type="radio"/> Direct Mailings                        | # Mailings          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input checked="" type="radio"/> Kiosks or Other Displays    | # Locations         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>2</td></tr></table>   |   |   |   | 2 |
|  |                     |   | 2 |   |   |   |
| <input checked="" type="radio"/> List-Serves                 | # In List           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input type="radio"/> Mailing List                           | # In List           | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input checked="" type="radio"/> Newspaper Ads or Articles   | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td>1</td></tr></table>   |   |   |   | 1 |
|  |                     |   | 1 |   |   |   |
| <input checked="" type="radio"/> Public Events/Presentations | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td>2</td><td>5</td><td>5</td></tr></table> |   | 2 | 5 | 5 |
|  | 2                   | 5   | 5 |   |   |   |
| <input type="radio"/> School Program                         | # Attendees         | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |
|  |                     |   |   |   |   |   |
| <input type="radio"/> TV Spot/Program                        | # Days Run          | <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td></tr></table>    |   |   |   |   |
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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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URL

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### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2023

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

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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Name of MS4/Coalition: 

CNY Stormwater Coalition
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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.**

Maintain a regional stormwater website and information library for reference and use by regulated MS4s and the general public in the Syracuse Urban Area.

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

The website received 4,698 views in this reporting period including 3,641 unique views. PDFs were opened 167 times suggesting that information displayed directly on the website is more likely to be viewed and consulted.

**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 website will be updated and reorganized to reflect new information and evolving program requirements. Non-current information and materials will be archived The website will be promoted as an educational tool for the general public, municipalities and professionals.



**MS4 Annual Report Form**

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2	0	2	3
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Name of MS4/Coalition

CNY Stormwater Coalition

SPDES ID

N	Y	R	2	0			
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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.**

A seasonally themed, electronic newsletter will be developed and distributed quarterly to interested individuals. The newsletter will maintain a focus on primary pollutants of concern in the SUA, stormwater processes, and will offer advice on reducing negative water quality impacts through simple actions. The newsletter will encourage participation in locally sponsored events that support stormwater management and protection efforts.

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

Gardens and Gutters was electronically distributed in 2 times in the reporting period. In addition to the 150 email subscribers, the newsletter is promoted on social media and on websites of partner organizations. Feedback indicates that the topics, graphics tone is appropriate for the target audience. The reach of this newsletter is expanded by watershed groups outside of the SUA that distribute the publication to their members.

**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).**

Quarterly distribution of Gardens and Gutters will transition to a shorter form and more frequent email blast in 2023. This will allow more regular communication and for smaller amount of information to be shared at one time which is consistent with current marketing strategies.

**MS4 Annual Report Form**

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Name of MS4/Coalition

CNY Stormwater Coalition

SPDES ID

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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 (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.**

CNY RPDB will conduct two training workshops for municipal representatives on topics selected to address current training and informational needs.

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

Training sessions for 2022-2023 continued as virtual sessions. Five online professional development training sessions were held. The CNY RPDB also maintained a membership to the Center for Watershed Protection and circulated announcements of online training opportunities available through these platforms. Three of these sessions were screened in the office and municipal representatives were invited to view and discuss them together including one session on IDDE.

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

			8
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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).**

In the next year, CNY RPDB plans to continue the Training sessions and maintain an membership to the Center for Watershed Protection. Quarterly coalition meetings will include short training opportunities related to program requirements.

**MS4 Annual Report Form**

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

2	0	2	3
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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

CNY Stormwater Coalition

SPDES ID

N	Y	R	2	0				
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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.**

Syracuse Post Standard Stormwater Pullout: Develop a 4-page pullout to be distributed in the main section of the daily Syracuse Post Standard newspaper that focuses on stormwater processes, impacts, issues of concern, primary pollutants of concern, and citizen generated solutions.

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

The pullout was published in April of 2022. As reported by the Post Standard, the insert reached 108,000 readers in a 7 county CNY distribution area.

**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).**

In the next year we will continue to digitally circulate the contents of this 4 page document and promote the information it contains online and through social media. In the next year we will transition to digital outreach tools using email list serve and social media accounts and will not be running a print add.

**MS4 Annual Report Form**

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

2	0	2	3
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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 

CNY Stormwater Coalition
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SPDES ID  

N	Y	R	2	0				
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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.I. Submit additional pages as needed.

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

Use social media to share information about Stormwater pollution prevention with a general audience. Reach should be measured by number of views. This was a new measure for 2022-2023.

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

In this reporting period, posts from the CNY Stormwater twitter account had a total of 4152 views. Information shared through this platform included notices of upcoming events, information on phosphorus reduction, proper lawn care and other stormwater pollution prevention tips.

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

4	1	5	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 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).**

In the next period we plan to continue regular use of existing social media account with at least 2 posts a month and to expand to an additional platform in 2024.



**MS4 Annual Report Form**

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

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	6
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**2. URL(s) con't.:**

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

URL

h	t	t	p	:	/	/	w	w	.	t	o	w	n	o	f	p	o	m	p	e	y	.	o	r	g	/	s	t	o	r	
m	w	a	t	e	r	-	m	s	4																						

URL


URL


URL


URL


URL


URL








**MS4 Annual Report Form**

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

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	6
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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
---	---

 / 

0	9
---	---

 / 

2	0	2	3
---	---	---	---

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

3	6	5
---	---	---

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
---	---

 / 

0	9
---	---

 / 

2	0	2	3
---	---	---	---

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, 

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	6
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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.**

<ul style="list-style-type: none"><li>- Provide public access to all Town records relating to the MS4 permit compliance.</li><li>- Maintain participation in the CNY Stormwater Coalition and local access to the coalitions stormwater hotline.</li><li>- Present the annual report at a Town Board meeting and receive public comments.</li></ul>
---

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

<ul style="list-style-type: none"><li>- No comments or requests for access were received during the reporting period.</li></ul>
---

**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).**

<ul style="list-style-type: none"><li>- continue to publicize access to all Ms4 permit documents on Town's stormwater web page.</li></ul>
---







## MS4 Annual Report Form

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

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	6
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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.

- Conduct outfall reconnaissance inventory for outfalls every 5 years

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

- All outfalls inspected in 2022 and no illicit discharges were noted

#### 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 participate in Onondaga County Department of Water Environmental Protection IDDE program and respond to illicit discharges that may be identified or reported.

**MS4 Annual Report Form**

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

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	6
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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?**

--	--	--

**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? 

--	--	--

**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:**

- Notices of Violation # 

--	--	--	--	--	--

 ○ No Authority
- Stop Work Orders # 

--	--	--	--	--	--

 ○ No Authority
- Criminal Actions # 

--	--	--	--	--	--

 ○ No Authority
- Termination of Contracts # 

--	--	--	--	--	--

 ○ No Authority
- Administrative Fines # 

--	--	--	--	--	--

 ○ No Authority
- Civil Penalties # 

--	--	--	--	--	--

 ○ No Authority
- Administrative Orders # 

--	--	--	--	--	--

 ○ No Authority
- Enforcement Actions or Sanctions # 

--	--	--	--	--	--

 ○ No Authority
- Other # 

--	--	--	--	--	--

 ○ No Authority



**MS4 Annual Report Form**

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

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	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? 

		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, 2023

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 3 9 6

**6. con't.:**

Submit additional pages as needed.

MS4/Coalition Office

Department

Address

City  Zip  -

Phone  
(  )  -

Library

Address

City  Zip  -

Phone  
(  )  -

Other

Address

City  Zip  -

Phone  
(  )  -

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

URL

URL

**MS4 Annual Report Form**

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

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	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 (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.**

- Review all SWPPPs and perform inspections of all construction sites within the Town's jurisdiction.
---

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

- All SWPPPs within the Town's jurisdiction were reviewed and construction site inspected.
--

**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 review all SWPPPs and inspect active construction sites.
--



**MS4 Annual Report Form**

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

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	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? 

		0
--	--	---

 %

**MS4 Annual Report Form**

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

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	6
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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.**

- Inspect and follow-up on maintenance of post-construction stormwater management facilities within the Town's jurisdiction.

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

- Stormwater management facilities being maintained in good condition.

**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).**

- Inspect all post-construction stormwater management facilities within the Town's jurisdiction.

**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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	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>	
Street Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Bridge Maintenance.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Solid Waste Management.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Parks and Open Space.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Other.....	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No

## MS4 Annual Report Form

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

2	0	2	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	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 

				1
--	--	--	--	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

			6	0
--	--	--	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

			5	3
--	--	--	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

				6
--	--	--	--	---
- 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?**

--	--

 / 

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 / 

--	--	--	--

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

--	--	--

**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	3
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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 

Town of Pompey
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SPDES ID  

N	Y	R	2	0	A	3	9	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 (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.**

- Sweep all Town streets and parking lots.  
- Clean catch basins at least once annually.

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

- The sweeping and catch basin cleaning has been completed

**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 Town good housekeeping program.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 2 3

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 Pompey

SPDES ID  
N Y R 2 0 A 3 9 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	1,2,77a-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	2	3
---	---	---	---

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 Pompey
----------------

SPDES ID

N	Y	R	2	0	A	3	9	6
---	---	---	---	---	---	---	---	---

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? 

--	--	--

 %

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? 

--	--	--

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

--	--	--

 %

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

--	--	--

 %

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**

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

2	0	2	3
---	---	---	---

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 Pompey
----------------

SPDES ID  

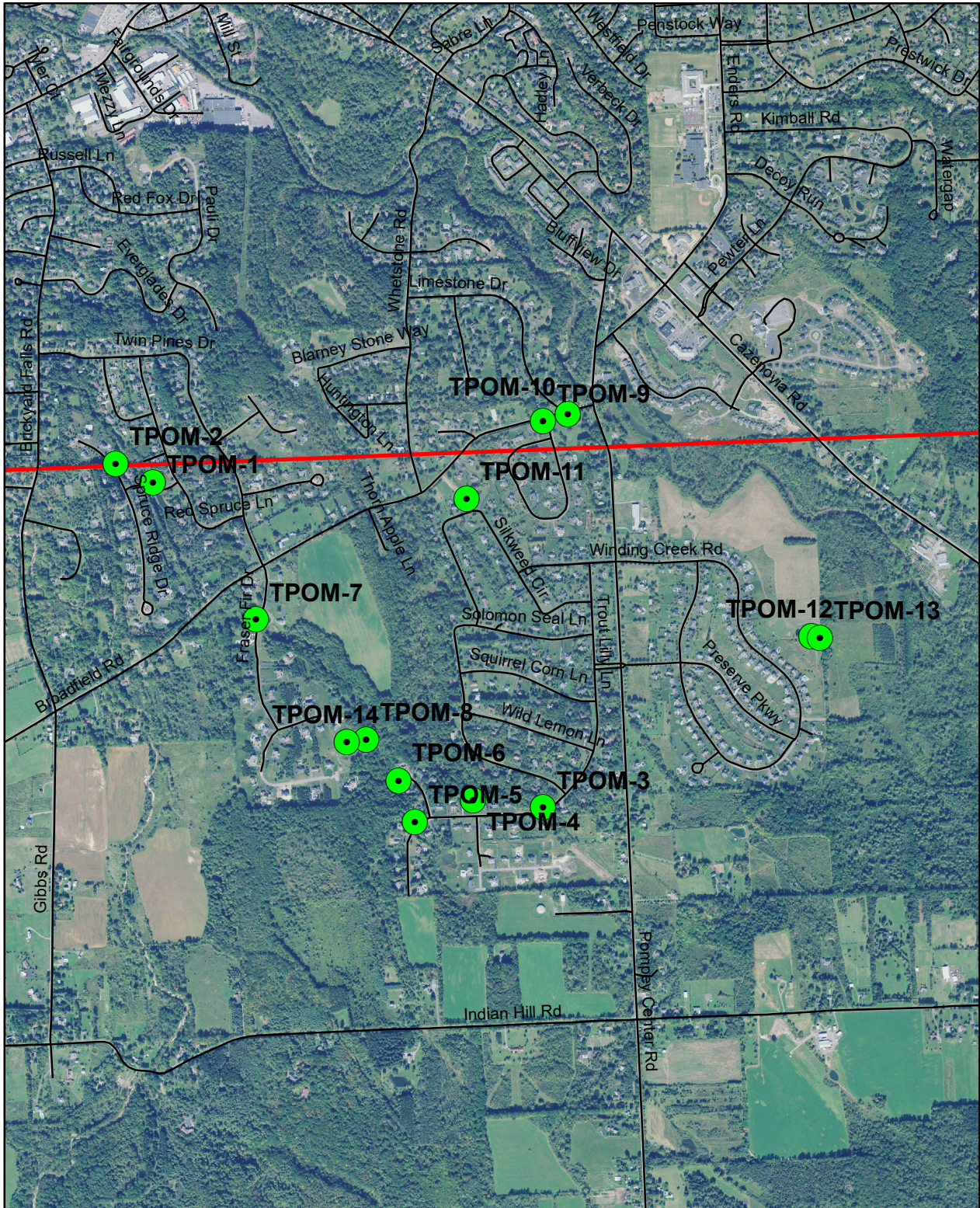
N	Y	R	2	0	3	9	6	
---	---	---	---	---	---	---	---	--

- 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




**APPENDIX B**  
**Outfall Inspection**  
**Report**

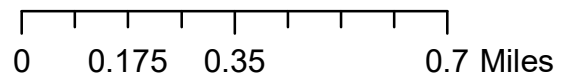


# Town of Pompey Inspected Outfalls Pompey, NY Onondaga County Soil and Water Conservation District 2017 GIS Orthoimagery



## Legend

-  Pompey Inspected Outfalls
-  Roads
-  Pompey Town Boundary





Onondaga County Soil & Water Conservation District  
 Outfall Inspection Program 2022-23 Summary  
 Town of Pompey Outfalls  
 MS4 Annual Report

Outfall ID	Northing	Easting	Material	Diameter	Type	2022 Status	2023 Status
TPOM-1	1088718.1820	981777.7406	CMP	36	Pipe	Inspected	Blank
TPOM-2	1088911.0170	981485.6325	HDPE	12	Pipe	Inspected	Blank
TPOM-3	1085142.1930	986237.0473	HDPE	12	Pipe	Inspected	Blank
TPOM-4	1085237.5360	985482.7651	HDPE	12	Pipe	Inspected	Blank
TPOM-5	1084963.5080	984836.1453	HDPE	24	Pipe	Inspected	Blank
TPOM-6	1085447.8500	984655.8378	HDPE	12	Pipe	Inspected	Blank
TPOM-7	1087193.2730	983005.4646	HDPE	42	Pipe	Inspected	Blank
TPOM-8	1085862.4510	984308.2978	HDPE	12	Pipe	Inspected	Blank
TPOM-9	1089505.8100	986195.8300	Earthen	0	Ditch/Swale	Inspected	Blank
TPOM-10	1089555.7600	986401.9200	HDPE	15	Pipe	Inspected	Blank
TPOM-11	1088591.6400	985296.0300	CMP	36	Pipe	Inspected	Blank
TPOM-12	1087122.0900	989265.2600	Earthen	0	Basin	Inspected	Blank
TPOM-13	1087105.4200	989340.2600	HDPE	12	Pipe	Inspected	Blank
TPOM-14	1085834.6900	984033.8900	Earthen	0	Basin	Inspected	Blank

**APPENDIX C**  
**Road Sweeping**  
**Report**





	A	B	C	D	E	F	G	H	I	J
34	DEER RUN CROSSING									
35	ELDRIDGE RAD	6/18,7/26								
36	ESTEY RD									
37	FAIRPORT RD									
38	FRANK LONG RD	4/12,6/14,6/16,7/13								
39	GARDNER ROAD	6/16,5/10								
40	GIBBS	4/6,5/10,6/16								
41	GULF RD	4/4,6/16								
42	HAMILTON RD	4/13,5/19,7/13,6/21								
43	HARTSFIELD PLACE									
44	HENDERSON RD	4/12,6/16,6/11,								
45	HEPATICA HILL									
46	HILLS RD	20-Jul								
47	INDIAN HILL ROAD EAST	4/6,5/10,6/16,								
48	INDIAN HILL ROAD WEST	4/6,5/10,6/16								
49	JACK IN THE PULPIT									
50	JEROME ROAD	27-Jul								
51	KASSONTA DR	13-Jul								
52	KELLY	14-Jul								
53	KILLARNEY LANE									
54	LAMP POST CIRC	21-Mar								
55	LIMBER PINE CIRC									
56	MEADOWVIEW COURT									
57	MICHAEL AVE		13-Jul							
58	OLD COLEMAN HILL RD	5/19,7/13								
59	ORAN GULF RD	4/4,5/31,4/5, 5/10								
60	ORAN STATION RD			18-Jun						
61	PALLADINO RD			19-Jul						
62	PALMER ROAD WEST									
63	PHINNEY PURCEL ROAD									
64	POMPEY PINES RD									
65	PRESERVAY PARKWAY									
66	PURCELL RD			21-Jul						



ROADS SWEEPED 2022

ROAD	DATES	MILES
R2 ROAD WEST	5/10/2022, 6/13/2022, 6/19/2022	1.4
R2 ROAD EAST	5/9/2022, 6/19/2022	2.4
R4 ROAD EAST	6/14/2022, 6/27/2022, 7/11/2022	1.53
R4 ROAD WEST	6/14/2022, 6/27/2022	2.67
JAMELIA TRAIL		
ANNA ACRES		
ARBUTUS DRIVE		
ASHLAND CIRCLE		
AUSTRIAN PINE CIRC		
BETHEL HILL ROAD	5/9/2022	0.18
BLACK SPRUCE CIRC		
BLUEGRASS BOULEVARD	4/26/2022, 6/26/2022	0.36
BRENNAN ROAD	4/13/2022, 7/13/2022, 5/19/2022	0.98
BRICKYARD FALLS RD	4/6, 5/10, 6/10	0.53
BROWN GULF ROAD	5/9, 4/13, 6/11, 7/21, 6/13	1.32
BURKE RD	5/10, 5/19, 6/14, 7/19, 6/11	0.69
BUSH RD	5/19, 7/13, 6/14	1.71
CANYONWOOD LANE		
CRADWICK CIRC		
CHASE RD	6/26, 7/18	1.07
CITATION DR	4/6, 7/18	0.44
CITY LIGHTS TERR	16-Jun	0.2
CLEARWATER CIRC	31-Aug	0.28
CLEMATIS CIRC		0.41
CCLTON RD	4/13, 5/19, 7/26, 7/18, 5/16	1.36
CORSICA LANE		
DEER RUN CROSSING		
ELDRIDGE RD	6/16, 7/26	0.09
ESTEY RD		
FAIRPORT RD		
FRANK LONG RD	4/12, 6/14, 6/16, 7/13	1.67
GARDNER ROAD	6/16, 5/10	2.51
GIBBS	4/6, 5/10, 6/16	0.71
GULF RD	4/4, 6/16	2.5
HAMILTON RD	4/13, 5/19, 7/13, 6/21	0.47
HARTSFIELD PLACE		
HENDERSON RD	4/12, 6/16, 6/11	1.43
HEPATICA HILL		
HILLS RD	20-Jul	0.97
INDIAN HILL ROAD EAST	4/6, 5/10, 6/16	1.11
INDIAN HILL ROAD WEST	4/6, 5/10, 6/16	1.91
JACK IN THE PULPIT		
JEROME ROAD	27-Jul	0.69
KASSONTA DR	13-Jul	0.64
KELLY	14-Jul	1
KOLLARNEY LANE		
LAMP POST CIRC	21-Jul	0.64
LIMBER PINE CIRC		
MEADOWVIEW COURT		
MICHAEL AVE	13-Jul	0.23
OLD COLEMAN HILL RD	5/19, 7/13	1.25
ORAN GULF RD	4/4, 5/31, 4/6, 5/10	3.35
ORAN STATION RD	16-Jun	0.77
PALMADO RD	19-Jul	0.14
PALMER ROAD WEST		
PHOENIX PURCEL ROAD		
POMPEY PINES RD		
PRESERVAY PARKWAY		
PURCELL RD	21-Jul	
QUICK ROAD	19-Jul	0.21
RALL ROAD	5/22, 5/16, 7/19	0.29
RANSON ROAD	5/19, 6/14, 6/19, 7/13	2.73
RED SPRUCE LAKE		
SAGESHUSH CIRCLE	31-Aug	0.17
SADDLE RIDGE	21-Jun	0.73
SEABURY DRIVE		
SEWER ROAD	5/19, 6/11, 7/19	0.88
SHEA ROAD	20-Jun	0.45
SILKWEED CIRCLE		
SMITH	16-Jul	
SOLOMON SEAL LAKE		
SPRUCE RIDGE DRIVE		
SWAMP ROAD	28-Jul	1.12
SWISSVALE DRIVE	31-Aug	0.48
TAYLOR ROAD	16-Jun	1.39
TRACY ROAD	20-Jul	0.4
TRILLIUM TRAIL		
TROUT LILY LAKE		
TWYN PINES DR		
WAVY ROAD	7/13, 4/13, 5/19	0.43
WELCH ROAD (GOLF COURSE)		
WHITE PINE PATH		
WHITKEY FARM LAKE	16-Jun	0.55
WILD LEMON LAKE		
WINDING CREEK ROAD		
WINDY HILL LAKE	19-Jul	0.27
WINDSBURY	1-Sep	0.2
WOODARD ROAD		
YELLOW BIRCH CIRCLE		
	43.35	Does not include purcell road

**APPENDIX D**  
**Catch Basin Cleaning**  
**Report**

	A	B	C	D	E	F
1	<b>CATCH BASINS</b>					
2						
3	<b>How many:</b>	<b>Found in the following subd.</b>		<b>Date</b>	<b>How many</b>	
4						
5	25	Arbutus Park				
6	2	Gibbs Road Ext				
7	12	Hartsfield				
8	4	Hirondelle				
9	4	Lamp Post Village (1 manhole)				
10	6	Mallards Landing		22-Aug	6	
11	7	Long Meadow (swissvale)		22-Aug	7	
12	75	Pompey Pines				
13	1	Sagebrush		22-Aug	1	
14	36	Spruce Ridge				
15	8	Spruce Ridge South				
16	56	The Preserve		22-May	20	
17	19	Windsbury Hills		22-Apr	19	
18	15	Yellow Birch Estates				
19						
20						
21						
22	<b><u>NONE in the following subd:</u></b>					
23	Anna Acres					
24	City Lights					
25	Saddle Ridge Heights					
26	Whitney Farm Estates					
27	Clear Water					

**APPENDIX E**  
**Highway Garage**  
**Self-Assessment**

**Town of Pompey  
Stormwater Pollution Prevention Facility Self Audit**

Review each question and check the appropriate box to determine if your facility is incorporating stormwater pollution prevention in daily operations. This checklist may be used to identify opportunities for improvement in pollution prevention as well as to document practices that the facility uses to prevent stormwater pollution.

Facility Operation: Town of Pompey Highway Garage

	Yes	No	Not Applicable	Can't Determine
Are vehicles parked indoors or under a roof when not in use?	✓			
Are operations such as vehicle washing, vehicle maintenance, draining of fluids, storage of fluids and waste performed under a roof or inside?	✓			
Are vehicles washed regularly to remove contamination and prevent it from polluting stormwater?	✓			
Is wash water treated in an oil-water separator prior to discharge?		✓		
Is process water diverted to a trench drain system to collect contaminated run-off inside work areas?				✓
Is process water from the trench drain system treated in an oil-water separator prior to discharge?				✓
Are solids cleaned out of the oil-water separator and trench drain system regularly?				✓
When working outdoors, is contaminated process water and sediment collected to prevent it from mingling with and contaminating stormwater?	✓			
Are drains inside the facility connected to a sanitary sewer?	✓			



**Town of Pompey  
Stormwater Pollution Prevention Facility Self Audit**

**Fluids Management**

	Yes	No	Not Applicable	Can't Determine
Are fluids in tanks or drums stored with an appropriate amount of secondary containment?	/			
Are drum-top pads used for leaks and spills that occur during transfer of fluids?	/			
Are fluids drained over a drip pan or pad?	/			
Are funnels or pumps used when transferring fluids?	/			
Are drip pans placed under leaks?	/			
Are containers maintained in good condition, closed, covered and away from equipment that	/			
Are containers stored inside or under a roof?	/			
Are containers inspected regularly?	/			
Are all containers labeled in a manner that describes the contents adequately?	/			
Are absorbent pads used on drum tops to catch spills?	/			
Is a closed-loop parts washer system used (contains solvent)?	/			
Is the parts-washer lid kept closed when not in use?	/			
Is a contract in place with a parts washer service company to change out spent solvent?	/			
Has the possibility of using an aqueous-based parts washer been explored?		/		
Are fluids stored in appropriate containers and/or storage cabinets?	/			

**Town of Pompey  
Stormwater Pollution Prevention Facility Self Audit**

	Yes	No	Not Applicable	Can't Determine
Are storage areas kept clean and well organized?	/			
Are storage areas labeled clearly?	/			

**Leak and Spill Prevention and Control**

	Yes	No	Not Applicable	Can't Determine
Are vehicles inspected daily for leaks?	/			
Is spill control equipment and absorbents readily available?	/			
Are emergency phone numbers posted in the area?	/			
Are material safety data sheets (MSDS's) readily available?	/			
Are spills cleaned up immediately?	/			
Are employees trained annually on spill prevention?	/			

**Oil Management**

	Yes	No	Not Applicable	Can't Determine
Is oil changed indoors over concrete, sloped to a drain or curbed surface?	/			
Is oil changed over a drip pan or pad?	/			
Are funnels or pumps used when transferring oil?	/			

**Town of Pompey  
Stormwater Pollution Prevention Facility Self Audit**

	Yes	No	Not Applicable	Can't Determine
Are drip pans placed immediately under any oil leak?	/			
Is waste oil stored indoors when possible and with secondary containment?	/			
Are waste oil containers in good condition, closed, labeled and inspected regularly?	/			
Is anything else mixed with waste oil?		/		
Is waste oil recycled?	/			

**Antifreeze**

	Yes	No	Not Applicable	Can't Determine
Is antifreeze changed indoors over concrete that is sloped to drain or curbed surface?	/			
Is antifreeze drained over a drip pan or pad?	/			
Are funnels or pumps used when transferring antifreeze?	/			
Are drip pans placed immediately under any leak?	/			
Is waste antifreeze stored indoors when possible with secondary containment?	/			
Are containers kept in good condition, closed, labeled and inspected regularly?	/			
Is antifreeze mixed with any other wastes?		/		
Is waste antifreeze recycled?	/			

**Town of Pompey  
Stormwater Pollution Prevention Facility Self Audit**

**Lead-Acid Batteries**

	Yes	No	Not Applicable	Can't Determine
Are lead-acid batteries stored indoors over a curbed impermeable surface?			✓	
Are intact batteries stored on an acid resistant rack or tub?				
Are cracked or leaking batteries stored in closed leak-proof and labeled containers?				
Is the date each battery was placed into storage recorded?				
Are batteries stacked more than 5 high?				
Are batteries inspected regularly for leaks?				
Are acid neutralizing agents, such as baking soda, available in case of leaks?				
Are batteries recycled?				
Are batteries stored longer than 6 months before recycling?				
Are lead cable ends left on the batteries to be recycled?				

**Tires**

	Yes	No	Not Applicable	Can't Determine
Are tires stored indoors?		/		
If tires are stored outdoors, is the tire pile covered?		/		
Are tires recycled frequently to keep the number of tires stored on site low?	/			

**Town of Pompey  
Stormwater Pollution Prevention Facility Self Audit**

**Fueling Areas**

	Yes	No	Not Applicable	Can't Determine
Is fueling performed under a canopy?		/		
Are spill cleanup materials available at the fueling area?	/			
Is the fueling handle lock disconnected so the person fueling must attend the fueling process?	/			
Are breakaway valves used on fueling hoses?	/			
Is fueling area stormwater runoff treated in an oil-water separator?		/		
Are all fuel deliveries monitored?	/			
Is the fueling automatic stop inspected regularly to ensure proper function?	/			

**Rags, Oil-Absorbing Pads, Towels and Clothing**

	Yes	No	Not Applicable	Can't Determine
Are oil rags and absorbent pads stored in appropriate containers and disposed of properly?	/			
Are reusable oily materials such as towels and clothing maintained through a commercial laundering service or an in-house washing machine that discharges to a sanitary system through and oil-water separator?	/			

**Salt Storage**

	Yes	No	Not Applicable	Can't Determine
Are salt piles stored in a salt storage building or under a roof?	/			

**Town of Pompey  
Stormwater Pollution Prevention Facility Self Audit**

	Yes	No	Not Applicable	Can't Determine
Are salt spills at a facility cleaned up promptly?	/			
Does stormwater drain away from the salt pile?	/			

**Miscellaneous Storage Piles**

	Yes	No	Not Applicable	Can't Determine
Are piles of spoils, asphalt, street cuts, etc. stored at the facility under a roof or cover?		-		
Are spills of miscellaneous debris on facility grounds cleaned up promptly?	/			

**Facility Stormwater Runoff**

	Yes	No	Not Applicable	Can't Determine
Is uncontaminated stormwater prevented from mixing with process areas?	/			

**Comments/Action Items**

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Inspected By: John Dunde, PE - Town Engineer

Date: 3/22/23

**APPENDIX F**  
**Stormwater Facility**  
**Inspection/Maintenance**  
**Reports**

# TOWN OF POMPEY SMP INSPECTION FORM

<b>LOCATION:</b> HARTSFIELD - UPPER			
<b>TYPE(S) OF SMP'S:</b> DETENTION			
<b>DATE OF INSPECTION:</b> _____ <b>PERFORMED BY:</b> _____			
ITEM	CONDITION		DATE MAINTENANCE/ REPAIR PERFORMED
	SATISFACTORY ✓	TYPE OF MAINTENANCE/ REPAIR NEEDED	
<b>A. ACCESS</b>			
Stable/Clear:			
<b>B. EMBANKMENT</b>			
Vegetation Management:	✓	Mowed	10/26/22
No Animal Damage:			
Top Level and Above E-spillway:			
<b>C. E-SPILLWAY</b>			
Stable/Reinforced:	✓		10/26/22
Below Top of Berm:			
Free of obstructions:			
<b>D. OUTLET STRUCTURE and OUTLET PIPE</b>			
Structure intact:			
Inlets and Outlets Free of Obstructions:		All good	2/21/23
Stable Discharge Area/No Erosion:			
<b>E. INLET PIPES</b>			
Free of Obstructions:	✓		10/26/22
Stable Discharge Area/No Erosion:			
<b>F. DETENTION AREA</b>			
Vegetation Management:		Mowed 12/22/22 Could be mowed 2/21/23	
No Sedimentation:			





# TOWN OF POMPEY SMP INSPECTION FORM

<b>LOCATION:</b>		HARTSFIELD - LOWER	
<b>TYPE(S) OF SMP'S:</b>		DETENTION	
<b>DATE OF INSPECTION:</b>		<b>PERFORMED BY:</b>	
ITEM	CONDITION		DATE MAINTENANCE/ REPAIR PERFORMED
	SATISFACTORY ✓	TYPE OF MAINTENANCE/ REPAIR NEEDED	
<b>A. ACCESS</b>			
Stable/Clear:	✓		10/26/22
<b>B. EMBANKMENT</b>			
Vegetation Management:	✓	<i>Mowed</i>	10/26/22
No Animal Damage:			
Top Level and Above E-spillway:			
<b>C. E-SPILLWAY</b>			
Stable/Reinforced:			
Below Top of Berm:			
Free of obstructions:			
<b>D. OUTLET STRUCTURE and OUTLET PIPE</b>			
Structure intact:	✓		10/26/22
Inlets and Outlets Free of Obstructions:	✓	✓ <i>2/21/23</i>	" "
Stable Discharge Area/No Erosion:	✓		" "
<b>E. INLET PIPES</b>			
Free of Obstructions:	✓		" "
Stable Discharge Area/No Erosion:	✓		" "
<b>F. DETENTION AREA</b>			
Vegetation Management:	✓	<del>could be mowed status</del>	" "
No Sedimentation:	✓		" "

# TOWN OF POMPEY SMP INSPECTION FORM

<b>LOCATION:</b>		SPRUCE RIDGE SOUTH – LOWER	
<b>TYPE(S) OF SMP'S:</b>		DETENTION, WET POND, FOREBAY	
<b>DATE OF INSPECTION:</b> 12/22/22		<b>PERFORMED BY:</b> Pat, Wyatt	
ITEM	CONDITION		DATE MAINTENANCE/ REPAIR PERFORMED
	SATISFACTORY ✓	TYPE OF MAINTENANCE/ REPAIR NEEDED	
<b>A. ACCESS</b>			
Stable/Clear:	✓		
<b>B. EMBANKMENT</b>			
Vegetation Management:	✓		
No Animal Damage:	✓		
Top Level and Above E-spillway:	✓		
<b>C. E-SPILLWAY</b>			
Stable/Reinforced:	✓		
Below Top of Berm:	✓		
Free of obstructions:	✓		
<b>D. OUTLET STRUCTURE and OUTLET PIPE</b>			
Structure intact:	✓		
Inlets and Outlets Free of Obstructions:	✓	Cleaned Grate	2/21/23
Stable Discharge Area/No Erosion:	✓		
<b>E. INLET PIPES</b>			
Free of Obstructions:	✓	Cleaned Grate	12/22/22
Stable Discharge Area/No Erosion:	✓		
<b>F. DETENTION AREA</b>			
Vegetation Management:	✓		
No Sedimentation:	✓	some sediments	

# TOWN OF POMPEY SMP INSPECTION FORM

<b>LOCATION:</b>		ARBUTUS	
<b>TYPE(S) OF SMP'S:</b>		Wet Pond	
<b>DATE OF INSPECTION:</b> 12/22/22		<b>PERFORMED BY:</b> Pat, Wyatt	
ITEM	CONDITION		DATE MAINTENANCE/ REPAIR PERFORMED
	SATISFACTORY ✓	TYPE OF MAINTENANCE/ REPAIR NEEDED	
<b>A. ACCESS</b>			
Stable/Clear:	✓		
<b>B. EMBANKMENT</b>			
Vegetation Management:	✓		
No Animal Damage:	✓		
Top Level and Above E-spillway:	✓		
<b>C. E-SPILLWAY</b>			
Stable/Reinforced:	✓		
Below Top of Berm:	✓		
Free of obstructions:	✓		
<b>D. OUTLET STRUCTURE and OUTLET PIPE</b>			
Structure intact:	✓		
Inlets and Outlets Free of Obstructions:	✓	Cleaned and Clear	2/21/23
Stable Discharge Area/No Erosion:	✓		
<b>E. INLET PIPES</b>			
Free of Obstructions:	✓		
Stable Discharge Area/No Erosion:	✓		
<b>F. DETENTION AREA</b>			
Vegetation Management:		Mowing	
No Sedimentation:		Partial Sedimentation	

# TOWN OF POMPEY SMP INSPECTION FORM

<b>LOCATION:</b> THE PRESERVE			
<b>TYPE(S) OF SMP'S:</b> DETENTION WITH FOREBAY			
<b>DATE OF INSPECTION:</b> _____ <b>PERFORMED BY:</b> _____			
ITEM	CONDITION		DATE MAINTENANCE/ REPAIR PERFORMED
	SATISFACTORY ✓	TYPE OF MAINTENANCE/ REPAIR NEEDED	
<b>A. ACCESS</b>			
Stable/Clear:	✓		
<b>B. EMBANKMENT</b>			
Vegetation Management:	✓	<i>Mowed</i>	<i>10/26/22</i>
No Animal Damage:			
Top Level and Above E-spillway:			
<b>C. E-SPILLWAY</b>			
Stable/Reinforced:			
Below Top of Berm:			
Free of obstructions:			
<b>D. OUTLET STRUCTURE and OUTLET PIPE</b>			
Structure intact:	✓		
Inlets and Outlets Free of Obstructions:	✓	<i>Cleaned Grate</i>	<i>2/21/23</i>
Stable Discharge Area/No Erosion:	✓		
<b>E. INLET PIPES</b>			
Free of Obstructions:	✓		
Stable Discharge Area/No Erosion:	✓		
<b>F. DETENTION AREA</b>			
Vegetation Management:	✓	<i>Mowed pond and around the banks</i>	<i>10/26/22</i>
No Sedimentation:	✓		