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 repor	ts require only one cover page.

SPDES ID

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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									,			 				 				 	
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OR

O This report is being submitted on behalf of a Single Entity

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

Name of Single En	ity			

OR

O 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.

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MS4 Annual Report Cover Page

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

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, 2 0 2 3

	SPDES ID
Name of MS4 MTA - LONG ISLAND RAIL ROAD	N Y R 2 0 A 4 8 1
Each MS4 must submit an MCC form.	
Section 1 - MCC Identification Page	
Indicate whether this MCC form is being submitted to certify endorsement	t or acceptance of:
 An Annual Report for a single MS4 	
O 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 bi	inding agreements.
If Joint Report, enter coalition name:	

MS4 Municipal Compliance Certification(MCC) Form

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

	SPI	DES	ID						
Name of MS4 MTA - LONG ISLAND RAIL ROAD	N	Y	R	2	0	A	4	8	1

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.

For each contact, select all that apply:

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

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MS4 Municipal Compliance Certification(MCC) Form MCC form for period ending March 9, 2 0 2 3

MCC form for period ending water 3, 2 5 2 5 2 5 SPDES ID
Name of MS4 MTA - LONG ISLAND RAIL ROAD NYR 2 0 A 4 8 1
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
3 The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.6 & Fart VIII.A.2.6
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Depart Property (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.
Depresentative is signing this report, their contact information must be
provided and a signature authorization form, signed by the Filliopar Executive Cartes
Elected Official must be attached.
For each contact, select all that apply:
O Principal Executive Officer/Chief Elected Official
Duly Authorized Representative
O Local Stormwater Public Contact
O Stormwater Management Program (SWMP) Coordinator
O Report Preparer
First Name MI Last Name
PAUL L MANSKE
Title D E P U T Y C H I E F S A F E T Y O F F I C E R
Address
1 4 4 - 4 1 9 4 T H A V E . M C 1 9 4 4 State Zip
City
eMail
PLMANSK@LIRR.ORG
Phone (3 4 7) 4 9 4 - 6 0 2 7
(347)494-6027

MS4 Municipal Compliance Certification(MCC) Form

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

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Name of MS4 MTA - LONG ISLAND RAIL ROAD	N	Y	R	2	0	A	4	8	1

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.

For each contact, select all that apply:

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

First Name	MI Last Name
MAGDALENA	RYCHTECKA
Title	
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eMail	
M R Y C H T E @ L I R R . O R G	
Phone	County
(347)494-6922	QUEENS

MS4 Municipal Compliance Certification (MCC) Form

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

	SPDES ID
Name of MS4 MTA - LONG ISLAND RAIL ROAD	N Y R 2 0 A 4 8 1
Section 3 - Partner Information	
Did your MS4 work with partners/coalition to complete some or all permeriod?	nit requirements during this reporting O 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 s	sheet with the name of the
coalition. It is not necessary to include a separate sheet for each If No, proceed to Section 4 - Certification Statement.	19154 III the Coantion.
Partner/Coalition Name	
	SDDDG D ID. IG. II. II.
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable N Y R 2 0
	N I R Z O
Address	
City	e Zip
eMail	
	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)?
O MM1	
O MM2	
O MM3	
O MM4	
O MM5	
○ MM6	
Additional tasks/responsibilities	
Watershed Improvement Strategy Best Management Practices	required for MS4s in impaired
watershed included in GP-0-08-002 Part IX.	

MS4 Municipal Compliance Certification(MCC) Form

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

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Name of MS4 MTA - LONG ISLAND RAIL ROAD	N	Y	R	2	0	A	4	8	1

Section 4 - Certification Statement

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

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

First Name	MI Last Name
PAUL	L MANSKE
Title (Clearly print title of individual signing report)	
D E P U T Y C H I E F S A	F E T Y O F F I C E R
Signature	
Bet Mal	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. 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

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.

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

		SPDES ID
Name of MS4/Coalition	MTA - LONG ISLAND RAIL ROAD	N Y R 2 0 A 4 8 1
Mini	imum Control Measure 1. Public Ed	lucation and Outreach
The information in th	is section is being reported (check one):	
On behalf of an incOn behalf of a coa	lividual MS4	
	nany MS4s contributed to this report?	
1 Targeted Publi	a Education and Outure at Dout No.	A.D. add
i. Targeted I upil	c Education and Outreach Best Managem	ent Practices
Check all topics that	at were included in Education and Outreach of	luring this reporting period:
Construction Sites		O Pesticide and Fertilizer Application
General Stormwate	r Management Information	O Pet Waste Management
O Household Hazardo	ous Waste Disposal	Recycling
O Illicit Discharge De	etection and Elimination	O Riparian Corridor Protection/Restoration
O Infrastructure Mair	itenance	Trash Management
○ Smart Growth		O Vehicle Washing
O Storm Drain Marki	ng	O Water Conservation
O Green Infrastructure	e/Better Site Design/Low Impact Development	O Wetland Protection
Other:		O None
Other		
2. Specific audienc	ces targeted during this reporting period:	
O Public Employees	O Contractors	
O Residential	O Developers	
O Businesses	O General Public	
O Restaurants	O Industries	
Other:	O Agricultural	
LONGIS	L A N D R A I L R O A D	EMPLOYEES
Other		

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.

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

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

ATTA LONG ISLAND BAH BOAD	SPDES ID N Y R 2 0 A 4 8 1
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD	
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans towal identified in your Stormwater Management Program Plan (SW III.C.1. Submit additional pages as needed.	ard achieving measurable goals MPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the	e SWMPP in this reporting period.
Track employee participation in our annual stormwater trainin	g classes.
B. Briefly summarize the observations that indicated the or Goal.	verall effectiveness of this Measurable
Three stormwater training classes were held in the current report employees trained. The last training class was held on 7/27/20	orting period, with a total of 25 022.
C. How many times was this observation measured or evaluation	2 5
D. Has your MS4 made progress toward this Measurable G	(ex.: samples/participants/events
	• Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in	n the SWMPP? • Yes O No
F. Briefly summarize the stormwater activities planned to the next reporting cycle (including an implementation so	meet the goals of this MCM during chedule).
Continue to track employee participation in our annual stormw	rater training sessions.
Add and maintain educational materials to the LIRR Stormwat pages, as necessary.	er Management Information web
in the second se	

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.

		SPDES ID			
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD		NYR2	0 .	A 4	8 1
Minimum Control Measure 2. Public Inve	olvemen	t/Particip	atio	n	
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 development, evaluation and improvement of the Stormw (SWMP) Plan during this reporting period? Check all the	vater Man	ementation agement Pi	, rogra	am	
O Cleanup Events		# Events			
O Comments on SWMP Received	ä	#Comments			
○ Community Hotlines Phone # ()	-		
Phone # (Phone # ()			
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Phone # (Phone # ()	- -		
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O Community Meetings	النسباب السنبا	# Attendees			
O Plantings		Sq. Ft.			$\overline{}$
O Storm Drain Markings		# Drains			
O Stakeholder Meetings		# Attendees	=		
O Volunteer Monitoring		# Events	=		
● Other: E M P L O Y E E H O T L I N E			T	77	
2. Was public notice of availability of this annual report and Program (SWMP) Plan provided?	l Stormwa	iter Manag	emei		O No
O List-Serve		# In List		\top	
O Newspaper Advertising		# Days Run		† †	$\exists \exists$
O TV/Radio Notices		# Days Run	+	##	
Other:				77	卄

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

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.

MTA - LONG ISLAND RAIL ROAD N V R Z O A 4 8 1		RL(s) con't.: ease provide specific address(es) where notice(s) can be access T T P S : / / N E W . M T A . I N F O / T / S T O R M - W A T E R - R E P O R T S T T P : / / W W W . L I R R . O R G / C C t y / C S D P r O G P 1 a n S P r O C / R																SPI	DES	ID	,											
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This report is being submitted for the reporting period ending March 9, 2 0 2 3

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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. SPDES ID Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD 8 1 YR 2 0 A 4 Ν 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents? Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed. O SWMP Plan O Comments O Annual Report MS4/Coalition Office Department S \mathbf{E} L Α Т Ι ON ERNMEN Т R V G 0 ATM Address 3 2 4 1 BR OAD W A Y D 2 Zip City Y 1 0 0 0 4 N R K W NE 0 Phone 2 8 7 8 0 1 5 6 2 1 O Comments O Library Address O SWMP Plan O Annual Report Zip City Phone O Annual Report O SWMP Plan O Comments Other Address C 1 4 2 8 Ε R A V Ε Μ 0 1 A R C Η 1 4 Zip City 5 1 3 N Y 1 4 Ι C A JAM Α Phone 3 9 4 6 0 3 O SWMP Plan O Comments O Annual Report • Web Page URL: Ρ A Ε TA I N F 0 Т RA Ν S R. Μ E W Η Ρ S Ν RIT S P 0 Т R R E W Α Ε C Y S T ORM Please provide specific address of page where report can be accessed - not home page. O Comments O eMail

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

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Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD		N	Y	R	2	0	A	4	8	1
4.a. If this report was made available on the internet, what dat Leave blank if this report was not posted on the internet.	te was i	t po	ost /	ed?		/[
4.b. For how many days was/will this report be posted?									1	4
If submitting a report for single MS4, answer 5.a If submitting	ng a joi	nt re	epc	ort,	ans	wer	5.b	٠		
5.a. Was an Annual Report public meeting held in this reporting If Yes, what was the date of the meeting?							Yes		•]	No
If No, is one planned?						0	Yes		• 1	Vo
5.b. Was an Annual Report public meeting held for all MS4s contains reporting period?	ontribu	tin	g t	o th	is r		ort (Yes		rin • 1	
If No, is one planned for each?						0	Yes		9 1	٧o
6. Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.						0	Yes	. (01	ЛO

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

II sustained the second of	SPDES ID
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD	N Y R 2 0 A 4 8 1
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP) III.C.1. Submit additional pages as needed.	achieving measurable goals P), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
Check if comments were received at the stormwater hotline.	
Continue to update the SWMP as its measurable goals evolve each	h year.
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
No comments were received at the stormwater hotline during this	reporting period.
The LIRR SWMP was updated in April 2022.	
C. How many times was this observation measured or evaluate	
and the management of the mana	(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal	€ 162 ○ 140
E. Is your MS4 on schedule to meet the deadline set forth in the	ne SWMPP? • Yes • No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation schee	et the goals of this MCM during dule).
Continue to monitor the stormwater hotline for comments. Continue assurable goals evolve.	nue to update the SWMP as its

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

	SPDES ID
Name of MS4/Coalition MTA - LONG ISLAND RAIL	
Minimum Control Measure	3. Illicit Discharge Detection and Elimination
The information in this section is being repor	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed 	
1. Enter the number and approx. perce	70
reporting period (outrait reconnaissa	0
3.a. What types of generating sites/sewer reporting period?	rsheds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	○ Marinas
○ Churches	Metal Plateing Operations
O Commercial Carwashes	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	O Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	○ Septic Maintenance
O Hospitals	O Swimming Pools
O Improper RV Waste Disposal	● Vehicle Fueling
O Industrial Process Water	Vehicle Maint./Repair Shops
Other:	O None
O Sewersheds:	

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

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Name of MS4/Coalition MTA - LONG ISLAND RAIL R	SPDES ID ROAD N Y R 2 0 A 4 8 1
	e been found during this reporting period?
O Broken Lines From Sanitary Sewer	O Industrial Connections
O Cross Connections	O Inflow/Infiltration
O Failing Septic Systems	O Pump Station Failure
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows
O Illegal Dumping	O Straight Pipe Sewer Discharges
Other:	● None
reporting period?	en confirmed during this reporting period?
6. How many illicit discharges/illegal coperiod?	onnections have been eliminated during this reporting
7. Has the storm sewershed mapping be If No, approximately what percent was	een completed in this reporting period? Secompleted in this reporting period? Yes O No Secompleted in this reporting period?
8. Is the above information available in Is this information available on the walf Yes, provide URL(s): Please provide specific address of page	
URL	
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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. SPDES ID Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD NYR20A481 8. URL(s) con't.: Please provide specific address of page where map(s) can be accessed - not home page URL URL URL 9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? Yes O No 10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law? O Yes O No ● NT 11. What percent of staff in relevant positions and departments has received IDDE training? 1 0 0 %

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

SPDES ID
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD N Y R 2 0 A 4 8 1
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.
Report the quantity and type of illicit discharges detected, confirmed and eliminated.
Continue to identify any new storm drain structures with GIS coordinates and place these into the GIS stormwater map.
B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.
No illicit discharges were identified.
No new strorm drain structures were identified.
C. How many times was this observation measured or evaluated in this reporting period?
(ex.: samples/participants/event.
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).
We have made progress in that no illicit discharges were detected. Continue to monitor our MS4 for illicit discharges.
If any stormwater drains are identified, enter them into the GIS map.

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

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Na	ame of MS4/Coalition MTA - LONG ISLAND RAIL ROAD	[V	Y	R 2	0	A 4	8	1
	Minimum Control Measures 4 a	nd 5						
	Construction Site and Post-Construction	ion Co	ntro	ηİ				
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	he information in this section is being reported (check one):							
0	On behalf of an individual MS4 On behalf of a coalition							
	How many MS4s contributed to this report?							
1;	a. Has each MS4 contributing to this report adopted a law, ordin mechanism that provides equivalent protection to the NYS SP	nance o	r otl ener	ier re al Pe	gul rmi	atory t for	,	
	Stormwater Discharges from Construction Activities?					Yes		No
	o. Has each Town, City and/or Village contributing to this report equivalent to a NYSDEC Sample Local Law for Stormwater In Sediment Control through either an attorney cerfification or a Analysis Workbook? If Yes, Towns, Cities and Villages provide date of equivalent NYS	Manage using th	men e NY C e Lo	t and YSDE Yes	Er C (osion Gap No	an •	d NT NT
2.	Does your MS4/Coalition have a SWPPP review procedure in	place?			(3)	Yes	0	No
3.	How many Construction Stormwater Pollution Prevention Pla reviewed in this reporting period?	ns (SW	PPP	s) hav	ve l	een		0
4.	Does your MS4/Coalition have a mechanism for receipt and cocomments related to construction SWPPPs?	nsidera		of pu		c No	• 1	
	If Yes, how many public comments were received during this repo	rting pe) J	140	T.	NI
5.	Does your MS4/Coalition provide education and training for co SWPPP process?	ontract	ors a	bout			l	_
					0.	Yes	1	Vo

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:

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

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 MTA - LONG ISLAND RAIL ROAD	SPDES ID N Y R 2 0 A 4 8 1
Minimum Control Measure 4. Construction Site Storn	nwater 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 disturduring this reporting period?	bances of one acre or more
2. How many construction projects disturbing at least one acre wer during this reporting period?	e active in your jurisdiction
3. What percent of active construction sites were inspected during t	his reporting period? • 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?

O'Yes O'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.

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

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.

6. con't.: Submit additional pages as needed. O MS4/Coalition Office Department Address City Phone (Name of MS4/Coalition 6. con't.: Submit additional pages as needed. City Phone (()) O Library Address City Phone (()) O Other Address City Phone (()) O Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page. URL		31 11.0 11	
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This report is being submitted for the reporting period ending March 9, 2 0 2 3

	SPDES ID
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD	N Y R 2 0 A 4 8 1
7. Evaluating Progress Toward Measurable Goals MCM 4	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SW III.C.1. Submit additional pages as needed.	ard achieving measurable goals MPP), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the	e SWMPP in this reporting period.
Review construction projects to determine if they will disturb	
R Briefly summoving the A	
B. Briefly summarize the observations that indicated the over Goal.	verall effectiveness of this Measurable
Six construction projects were reviewed to determine if they w land. One project was determined to disturb one or more acres	ould disturb one or more acres of of land.
C. How many times was this observation measured or evalu	nated in this reporting period?
	6
D. Has your MS4 made progress toward this measurable go	(ex.: samples/participants/event
	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in	
F. Briefly summarize the stormwater activities planned to n the next reporting cycle (including an implementation sc	● Yes ○ No neet the goals of this MCM during hedule).
Continue to evaluate the mechanisms assuring compliance with Stormwater Discharges from Construction Activities.	

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.

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Name of MS4/Coalition	MTA - LONG ISLA	ND RAIL ROAD		NYR	2 0 A 4 8 1
Minimum	Control Mea	sure 5. Post-	-Constructio	n Stormwater I	Management
The information in th	nis section is bei	ng reported (chec	ek one):		
On behalf of an inc On behalf of a coa How m	lition	tributed to this 1	report?		
1. How many and MS4/Coalition i	what type of po nventoried, insp	st-construction pected and main	stormwater ma tained in this re	nagement practices eporting period?	has your
		# Inventoried	# Inspections	# Times Maintained	
		Inventoried	Inspections		
O Alternative Practic	ees				
O Filter Systems					
O Infiltration Basins					
O Open Channels					
O Ponds					
O Wetlands					
Other		9 9	9 9	7 0	
2. Do you use an BMPs, inspecti	electronic tool ions and maint	(e.g. GIS, data	ibase, spreadsl	heet) to track post	-construction Yes O No
3. What types of Development/E	non-structural Better Site Des	practices have ign/Green Infr	e been used to astructure pri	implement Low Inciples?	mpact
O Building Codes	O Municipal C	Comprehensive P	lans		
O Overlay Districts	O Open Space	Preservation Pro	ogram		
O Zoning	O Local Law o	or Ordinance			
None	O Land Use R	egulation/Zoning	5		
O Watershed Plans	O Other Comp	rehensive Plan			
Other:					

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.

		SPDES ID
Name of MS4/Coalition M	MTA - LONG ISLAND RAIL ROAD	N Y R 2 0 A 4 8 1
4a. Are the MS4s con	tributing to this report involved in a region	onal/watershed wide planning effort?
		O Yes ● No
4b. Does the MS4 hav	e a banking and credit system for stormwa	ater management practices?
		O Yes • No
4c. Do the SWMP Pla and approval of ba	ns for each MS4 contributing to this report Inking and credit of alternative siting of a	rt include a protocol for evaluation a stormwater management practice?
		○ Yes ● No
4d. How many stormwreporting period?	ater management practices have been im	plemented as part of this system in this
training on LOW In	unicipal officials/MS4 staff responsible for apace Development (LID), Better Site Desi	or program implementation attended sign (BSD) and other Green
Infrastructure prir	ciples in this reporting period?	3 3 %

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

Name of N	1S4/Coalition MTA - LONG ISLAND R.	AIL ROAD	N Y R	2 0 A 4 8 1
6. Eval	uating Progress Toward Mea	asurable Goals MCM 5		
identifie	page to report on your progres d in your Stormwater Manager Submit additional pages as nee	nent Program Plan (SWMI	achieving measurab PP), including requir	le goals ements in Part
A. Brief	ly summarize the Measurabl	le Goal identified in the S	WMPP in this repo	orting period.
Number period.	of post construction practices	inventoried, inspected and	maintained during t	he reporting
B. Brief Goal.	ly summarize the observation	ns that indicated the over	all effectiveness of	this Measurable
During t	his reporting period, 99 of the d at least once and maintenanc	99 post construction struct e was performed 70 times.	ural mechanisms inv	entoried were
C. How	many times was this observa	tion measured or evaluat	ed in this reporting	g period?
			•	9 9
D. Has y	our MS4 made progress tow	ard this measurable goal		samples/participant ing period? • Yes O No
E. Is you	ar MS4 on schedule to meet t	he deadline set forth in the	he SWMPP?	● Yes ○ No
F. Brief the n	y summarize the stormwater ext reporting cycle (including	r activities planned to me g an implementation sche	et the goals of this l dule).	MCM during
	to track the number of post coluring the next reporting period		re inspected, maintai	ined and

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

Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD SPDES ID N Y R 2 0 A 4 8 1
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD N Y R 2 0 A 4 8 1
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?
riow many wis4s 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? years?
Street Maintenance O Yes No No No
Bridge Maintenance

Street Maintenance	O Voc	A No		AN NT
But a set in the second	Ores	No		No
Bridge Maintenance	Yes	○ No	Yes	O No
Winter Road Maintenance	O Yes	● No		No
Salt Storage	Yes	O No		O No
C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Yes	O No		O No
New Municipal Construction and Land Disturbance	O Yes	● No		No
Right of Way Maintenance	Yes	O No	Yes	O No
Marine Operations	O Yes	• No		No
	O Yes	• No		No
	O Yes	_		No
	O Yes		○ Yes	No
Stormwater System Maintenance	Yes	O No	● Yes	O No
	Yes	_		O No
Other	Yes	O No	Yes	O No

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

	SPDES ID
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD	N Y R 2 0 A 4 8 1
2. Provide the following information about municipal operati	ons good housekeeping programs:
Parking Lots Swept (Number of acres X Number of times swept	# Acres 1 2 6
O Streets Swept (Number of miles X Number of times swept)	# Miles
O Catch Basins Inspected and Cleaned Where Necessary	#
O Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary	#
O Phosphorus Applied In Chemical Fertilizer	# Lbs.
O Nitrogen Applied In Chemical Fertilizer	# Lbs.
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number 	# Acres 1 5 7 3 . 5
times applied to the nearest tenth.)	
3. How many stormwater management trainings have been pr	
during this reporting period?	
4. What was the date of the last training?	07/27/2022
5. How many municipal employees have been trained in this r	eporting period? 2 5
6. What percent of municipal employees in relevant positions stormwater management training?	and departments receive

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

and total of a joint report on behalf of a	coantion leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD	N Y R 2 0 A 4 8 1
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMP III.C.1. Submit additional pages as needed.	achieving measurable goals P), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the SV	WMPP in this reporting period.
Report on number of acres to which pesticides/herbicides were ap Calculate the number of pounds of pesticides/herbicides applied. Record petroleum spills reported to NYSDEC and closed to the sa reporting period.	
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
Pesticides/herbicides were machine applied to 1,475 acres and har The number of pounds of pesticides/herbicides was calculated. Nine petroleum spills were reported to NYSDEC and Six were clo NYSDEC. The remaining open spills will require long-term reme	osed to the satisfaction of the
C. How many times was this observation measured or evaluate	ed in this reporting period?
	7
	(ex.: samples/participants/event
D. Has your MS4 made progress toward this measurable goal of	
	• Yes O No
E. Is your MS4 on schedule to meet the deadline set forth in th	e SWMPP?
	• Yes O No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	t the goals of this MCM during
Continue to calculate the acreage that pesticides/herbicides are app Continue to calculate the pounds of pure pesticide/herbicide produ the application of pesticides/herbicides. Continue to record petroleum spills reported to NYSDEC and close	ct applied to determine trends in

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

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	SPDES ID	
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD	N Y R 2 0 A 4 8 1	.]

On behalf of a coalition	/IS4			
How many MS ²	Is contributed to this re	eport?		
S4s must answer the que	ortions or chook NA a	s indicated in the table	helow.	
54s must answer the que	estibils of effect that a	3 maicated in the table	, o. o. o. o. o. o. o. o. o. o. o. o. o.	
MS4 Description	Answer	Check NA	(POC)	
NYC EOH Watershed	-	-		
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 Phosphorus	
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Priospriorus	
Onondaga Lake Watershed	-	2,3,4,5,8b,10,11,12	Phosphorus	
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus	
Traditional Non-Land Use	1,6,7a-d,8a,9 1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus	
Non-Traditional Greenwood Lake Watershed	1,6,7a-0,8a,9	2,5,4,5,60,10,11,12	-	
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	
Traditional Land Use 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	
Oyster Bay		-	•	
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	
Peconic Estuary		2.2.5.6.Ph	Pathogens and Nitrogen	
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b 2,3,5,6,8b	Pathogens and Nitrogen	
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen	
Non-Traditional	1,4,7a-d,8a,9	2,5,7,5,00,10,11,12	-	
Oscawana Lake Watershed	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	
Traditional Land Use 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	
LI 27 Embayments	<u> </u>	-	-	
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	

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		SPDES ID		
Na	me of MS4/Coalition MTA - LONG ISLAND RAIL ROAD	N Y R	A 0 A	4 8 1
3.	Does your MS4/Coalition have a Stormwater Conveyance Sy and Maintenance Plan Program?	stem (infrastruct ○ Yes		
4.	Estimate the percentage of on-site wastewater treatment syste and maintained or rehabilitated as necessary in this reporting	ems that have be g period?	n inspe	ected %
5,	Has your MS4/Coalition developed a program that provides polySDEC SPDES General Permit for Stormwater Discharges (GP-0-08-001) to reduce pollutants in stormwater runoff from disturb five thousand square feet or more?	from Constructi	on Acti	vities
	Has your MS4/Coalition developed a program to address possible runoff from new development and redevelopment projects the equal to one acre that provides equivalent protection to the N Permit for Stormwater Discharges from Construction Activity the New York State Stormwater Design Manual Enhanced Ph Standards?	at disturb greate: YS DEC SPDES ies (GP-0-08-001)	r than o Genera	r
7a.	Does your MS4/Coalition have a retrofitting program to reduphosphorus/nitrogen/pathogen loading?	ce erosion or O Yes	O 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 comple	ted in this report	ing per	iod?
7d.	What percent of projects planned in previous years have been	completed?		% %
		O No	Projects	Planned
ł	Has your MS4/Coalition developed and implemented a turf maprocedures policy that addresses proper fertilizer application ands?	anagement practi on municipally o O Yes	wned	• N/A
ŀ	Has your MS4/Coalition developed and implemented a turf ma procedures policy that addresses proper disposal of grass clipp nunicipally owned lands?	oings and leaves i	rom	
	The state of the s	O Yes	O No	N/A

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	SPDES ID		
Name of MS4/Coalition MTA - LONG ISLAND RAIL ROAD	N Y R 2	0 A	4 8 1
9. Has your MS4/Coalition developed and implemented a program			- > * ()
	O Yes	O No	N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet was prohibiting goose feeding?	te on municipa		rties and • N/A
11. Does your MS4/Coalition have a pet waste bag program?	O Yes	O No	• N/A
12. Does your MS4/Coalition have a program to manage goose populations?	O Yes	O No	• N/A

Signature Authorization Form

Permittee Name: MTA - Long Island Rail Road

SPDES NO. NYR20A481 Date: 06/14/2021

Name of person described in paragraph (1):	Title:		
Loretta Ebbighausen	Vice President - Corporate Safety		
Signature of person described in paragraph (1):	Date:		
Lori Ebbighausen	gitally signed by Lori Ebbighausen		
	ate: 2021.06.14 09:18:47 -04'00'		

THE PERMITTEE MUST NOTIFY THE DEPARTMENT OF ANY CHANGE IN THIS INFORMATION. THIS FORM SHOULD ONLY BE SENT IN WITH THE ANNUAL REPORT.

Name and/or title of person responsible for signing and submitting official documents including reports, certifications or information required by the NYS Small MS4 General Permit:	Phone:			
Paul Manske	(347) 494-6027			
Signature (if individual named above):				
Mailing Address:	City:	State:	Zip:	
144-41 94th Avenue, MC 1944	Jamaica	NY	11435	

Return to:

MS4 Coordinator

Bureau of Water Permits

New York State Department of Environmental Conservation 625

Broadway

Albany, NY 12233-3505

^{*} Note: Notices of Intent (NOI) associated with permit coverage under the NYS Small MS4 General Permit must be signed by a principal executive officer or ranking elected official. See paragraph (1) for definition of a principal executive officer.