MS4 Annual Report Cover Page

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

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

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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.

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OR

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

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

Name of Coalition

1	Nan	ne c	of Si	$_{11516}$	ıtıty													

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.

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MS4 Annual Report Cover Page

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

Provide SPDES ID of each permitted MS4 included in this report.

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

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Name of MS4	NEW YORK CITY TRANSIT		N	Y	R	2	0	А	4	7	9

Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

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

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

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

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

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Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

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

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- Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

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- O Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

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Signature Authorization Form

Permittee Name New York City Transit	SPDES NO. <u>NYR20A479</u>
Facility Name Multiple	Date: 04/19/2021
Name of person described in paragraph (1):	Title: Acting Vice President
Timothy J. Doddo	
Signature of person described in paragraph (1):	Date:
1 They S	April 27, 2021

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 MS4 Annual Report: Lead Specialist, Environmental Protection, Office of System Safety	Phone: (646) 252 -	- 5777	
Signature (if individual named above):			
Mailing Address: 2 Broadway, 27 th Floor	City: New York	State: NY	Zip: 10004

Return To: Bureau of Water Compliance

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-3506

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

SPDES ID

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

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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.



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, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

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Name of MS4/Coalition	NEW YORK CIT	TY TRANSI	Т		N	Y	R	2	0	А	4	7	9

Water Quality Trends							
The information in this section is being reported (check one):							
 On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 							
1. Has this MS4/Coalition produced any reports documenting water question related to stormwater? If not, answer No and proceed to Minimum One.	_	-	Meas		• No		
If Yes, choose one of the following				7 1 63	• 110		
O Report(s) attached to the annual report							
O Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accounted.	essed	l - no	ot hor	ne pag	ge.		
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Name of MS4/Coalition NEW YORK CITY TRANSIT	SPDES ID N Y R 2 0 A 4 7 9
Minimum Control Measure 1. Public Ed	ucation and Outreach
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	
1. Targeted Public Education and Outreach Best Manageme	ent Practices
Check all topics that were included in Education and Outreach de	aring this reporting period:
• Construction Sites	O Dontinido and Fantilizan Application
	O Pesticide and Fertilizer Application
General Stormwater Management Information	O Pet Waste Management
O Household Hazardous Waste Disposal	O Recycling
Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
Infrastructure Maintenance	● Trash Management
○ Smart Growth	• Vehicle Washing
O Storm Drain Marking	O Water Conservation
● Green Infrastructure/Better Site Design/Low Impact Development	O Wetland Protection
• Other:	○ None
E N V I R O N M E N T A L S U S T A I N Other	A B I L I T Y
2. Specific audiences targeted during this reporting period:	
● Public Employees ● Contractors	
○ Residential ○ Developers	
○ Businesses • General Public	
○ Restaurants ○ Industries	
● Other: ○ Agricultural	
S T U D E N T S Other	

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

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

SPDES ID

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T T P S : / N E W . M T A . I N F O F - E N V I R O N M E B I L I T Y - A N D - C O M P L I A N</td><td>Yeb Page con't.: Provide specific web addresses - not home T T P S : / N E W . M T A . I N F O / N E N V I R O N M E N D - C O M P L I A N C . . I A N D - C O M P L I A N C .</td><td>Ceb Page con't.: Provide specific web addresses - not home page. T T P S : / / N E W . M T A . I N F O / A T M E N T S - O F - E N V I R O N M E N T T A N D - C O M P L I A N C E D A N D - C O M P L I A N C E D A N D - C O M P L I A N D - C D N D - C D N D - C D N</td></td<> <td> New York CITY TRANSIT Provide specific web addresses - not home page. </td> <td> New York City Transit</td> <td> N Y </td> <td>/eb Page con't.: Provide specific web addresses - not home page. T T T P S : / / N E W . M T A . I N F O / A G E N C T M E N T S - O F - E N V I R O N M E N T A L - S B I L I T Y - A N D - C O M P L I A N C E </td> <td> N Y R 2 2 2 2 2 3 3 3 3 3</td> <td> N Y R 2 0 0 0 0 0 0 0 0 0</td> <td> N Y R 2 0 A </td> <td> N Y R 2 0 A 4 4 4 4 4 4 4 4 4</td> <td> N Y R 2 0 A 4 7 7 7 8 7 7 7 8 7 7</td>	Teb Page con't.: Provide specific T T P S S S F O F - E B I L I T T Y - A N D - C D D D D D D D D D D D D D D D D D D D	T T T P S I: / / N E W . M T M E N T S - O F - E N B I L I T T Y - A N D - C	Total Plane Provide specific web Total Plane Signature 1	Teb Page con't.: Provide specific web add T T T P S : / / N E W . M T A T M E N T S - O F - E N V I B I L I T T Y - A N D - C O M	Teb Page con't.: Provide specific web address T T T P S : / / N E W . M T A . 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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period Continue implementing the educational program. Continue distributing guidance materials to targemployees and audiences. N Y R 2 0 A 4 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 PIII.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period Continue implementing the educational program. Continue distributing guidance materials to target employees and audiences.	od.
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 PIII.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period Continue implementing the educational program. Continue distributing guidance materials to targemployees and audiences. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable.	od.
dentified in your Stormwater Management Program Plan (SWMPP), including requirements in PII.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period Continue implementing the educational program. Continue distributing guidance materials to targemployees and audiences. B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Continue in Pinch Planck Plan	od.
Continue implementing the educational program. Continue distributing guidance materials to targemployees and audiences. 3. Briefly summarize the observations that indicated the overall effectiveness of this Measu	
employees and audiences. 3. Briefly summarize the observations that indicated the overall effectiveness of this Measu	get
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	ırable
During the 2020-2021 reporting period, 10,129 NYCT employees and members of the public we trained and/or received instruction and guidance materials on stormwater management and stormwater related topics.	re
C. How many times was this observation measured or evaluated in this reporting period?	
	0 4
(ex.: samples/part. D. Has your MS4 made progress toward this Measurable Goal during this reporting period	1?
YesE. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?Yes	○ No
2. 2. June 12. On Senedate to meet the demand set form in the SWITH I.	○ No
F. Briefly summarize the stormwater activities planned to meet the goals of this MCM duri the next reporting cycle (including an implementation schedule).	

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

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 NEW YORK CITY TRANSIT					N	Y	R	2	0	А	4	7	9
Minimum Control Measure 2.	Public Inv	olv	en	<u>ien</u>	t/P	ar	tic	ipa	<u>ıtic</u>	<u>) n</u>			
The information in this section is being reported (check	k one):												
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this r 	1												
1. What opportunities were provided for public development, evaluation and improvement (SWMP) Plan during this reporting period?	of the Stormy	vat	er I	Mar	ıag					ran	n		
Cleanup Events						# E	ven	its					2
● Comments on SWMP Received					# C	omi	nen	its					0
Community Hotlines	Phone #	6	4	6)	2	5	2	_	5	7	7	7
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O Community Meetings					# 1	Atte	nde	es					
○ Plantings						S	sq. F	₹t.					
O Storm Drain Markings						# D	raiı	ns					
O Stakeholder Meetings					# 1	Atte	nde	es					
O Volunteer Monitoring						# E	ven	ts					
Other: I N T E R N A L M E E T	I N G S												
2. Was public notice of availability of this annu Program (SWMP) Plan provided?	ual report an	d S	Stor	mw	at€	er N	A aı	nag	•	ent Ye		•	No
O List-Serve						# I	n Li	st					
O Newspaper Advertising					#]	Day	s Rı	ın					
○ TV/Radio Notices					#]	Day	s Rı	ın					
Other:													

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

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

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

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SPDES ID

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

	_	SPI	DES	ID						
Name of MS4/Coalition NEW YORK CITY TRANSIT		N	Y	R	2	0	А	4	7	9
4.a. If this report was made available on the internet, what da Leave blank if this report was not posted on the internet.		it p	oste	d?	2	<i> </i> [2	0	2	1
4.b. For how many days was/will this report be posted?	Ľ	0 3] ' [<i> </i>		0	2	0
If submitting a report for single MS4, answer 5.a If submitt	ting a jo	oint r	epo	rt, a	ans	wei	: 5.1	o		
5.a. Was an Annual Report public meeting held in this report If Yes, what was the date of the meeting?	ting per	riod	?] / [) 	Ye	S	•]	No
If No, is one planned?						0	Ye	S	•]	No
5.b. Was an Annual Report public meeting held for all MS4s this reporting period?	contrik	outir	ıg to	o tł	nis 1	-	ort Ye			ı g No
If No, is one planned for each?						0	Ye	S	•]	No
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	Ye	S	•]	No

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

		SPDES ID
Name of MS4/Coalition	NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9
7. Evaluating Pro	gress Toward Measurable Goals MCM 2	
identified in your St	ort on your progress and project plans toward tormwater Management Program Plan (SWM tional pages as needed.	
A. Briefly summar	rize the Measurable Goal identified in the S	SWMPP in this reporting period.
Promote involveme (SWMP).	ent in and commitment to NYCT's Stormwate	r Management Program Plan
B. Briefly summar Goal.	rize the observations that indicated the ove	rall effectiveness of this Measurable
implementation of	ties for the public and employees to participa NYCT's SWMP by posting information on manizing an internal meeting, and making the results of the state of the sta	ta.info, providing a hotline, holding
C. How many time	es was this observation measured or evalua	6
D. Has your MS4	made progress toward this measurable goa	0 1 01
E. Is your MS4 on	schedule to meet the deadline set forth in	● Yes ○ No the SWMPP? ● Yes ○ No
· ·	rize the stormwater activities planned to mo	eet the goals of this MCM during
Continue to encour	age participation and cleanup events.	

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

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

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O Garbage Truck V	Vashou	ıts					0	Sep	otic	M	aint	ena	nce	•										
O Hospitals							0	Sw	imı	nin	g P	ools	S											
O Improper RV Wa	aste Di	spo	sal					Ve	hic	le F	uel	ing												
O Industrial Proces	s Wate	er						Ve	hic	le N	1air	nt./R	Rep	air	Sho	ps								
Other:							0	No	ne												1			
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This report is being submitted for the reporting period ending March 9, 2 0 2 1 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition NEW YORK CITY TRANSIT	N Y R 2	2 0 A 4 7 9
3.b. What types of illicit discharges hav	e been found during this reporting period	?
 Broken Lines From Sanitary Sewer 	Industrial Connections	
O Cross Connections	Inflow/Infiltration	
O Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows	
• Illegal Dumping	O Straight Pipe Sewer Discharges	
Other: 4. How many illicit discharges/notenti	O None	luring this
reporting period?	in megar connections have been detected t	
•	en confirmed during this reporting perio	
7. Has the storm sewershed mapping It No, approximately what percent wa8. Is the above information available i		O Yes ● No 8 7 % O Yes ● No
Is this information available on the	web?	○ Yes • No
If Yes, provide URL(s): Please provide specific address of page URL	where map(s) can be accessed - not home p	page.
URL		

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

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Name of MS4/Coalition NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9
12. Evaluating Progress Toward Measurable Goals MCM 3	3
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.	
A. Briefly summarize the Measurable Goal identified in th	e SWMPP in this reporting period.
Report progress of outfall screening for dry weather discharge	s & track illicit discharges.
B. Briefly summarize the observations that indicated the o	verall effectiveness of this Measurable
23 outfalls were screened for dry weather flow. 0 were observe	ed to have flow.
C. How many times was this observation measured or eval	uated in this reporting period?
·	2 3
D. Has your MS4 made progress toward this measurable g	(ex.: samples/participants/ever
b. Has your Mist made progress toward this measurable g	• Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth i	n the SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to the next reporting cycle (including an implementation so	meet the goals of this MCM during
Continue dry weather monitoring of outfalls.	
<u>-</u>	

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

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Name of MS4/Coalition NE	EW YORK CITY TRANSIT	N	Y	R	2	0	А	4	7	9

Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

	Construction Site and Post-Construction Control	
The	e information in this section is being reported (check one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1a	. Has each MS4 contributing to this report adopted a law, ordinance or other regulator mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?	r
1b	o. Has each Town, City and/or Village contributing to this report documented that the leadure of the analysis Workbook? Village contributing to this report documented that the leadure of the analysis to a NYSDEC Sample Local Law for Stormwater Management and Erosion Sediment Control through either an attorney cerfification or using the NYSDEC Gap Analysis Workbook?	on and
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. \bigcirc 09/2004 \bigcirc 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?	9
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? ○ Yes • No	O 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 log SWPPP process? • Yes	

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

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

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

	SPL)ES	UL						
Name of MS4/Coalition NEW YORK CITY TRANSIT	N	Y	R	2	0	А	4	7	9

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

	William Control Measure 4. Construction Site Stormwater Runoil Control	i
Th	e information in this section is being reported (check one):	
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1.	How many construction projects have been authorized for disturbances of one acre or more during this reporting period?	e 0
2.	How many construction projects disturbing at least one acre were active in your jurisdictio during this reporting period?	0
3.	What percent of active construction sites were inspected during this reporting period? \bigcirc N	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 ONO ON	ΙT
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 ○ No	ЛТ
	If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for	N 1
	public review? ○ Yes • N	No
	If Yes, use the following page to identify location(s) where SWPPPs can be accessed.	

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

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	NEW YOR	K CITY T	RANS	IT									N	Y	R	2	0	А	4	7	9
6. con't.:	no1 n o coc	00 200	dad																		
Submit addition	iai pages	as need	aea.																		
O MS4/Coalition Off	fice																				
Department					T																
Address					T																
C't-											Ш	7.									
City											ĺ	Zip									
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 1 \end{vmatrix}$

		SPDES ID
Name of MS4/Coalition	NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9
7. Evaluating Pro	ogress Toward Measurable Goals MCM 4	
identified in your S	port on your progress and project plans toward tormwater Management Program Plan (SWM) itional pages as needed.	
A. Briefly summa	rize the Measurable Goal identified in the S	SWMPP in this reporting period.
Review plans for costormwater pollution	onstruction to determine if the projects have the on.	ne potential to contribute to
B. Briefly summar Goal.	rize the observations that indicated the over	rall effectiveness of this Measurable
23 projects were re stormwater pollution	eviewed; 23 projects were identified as having on.	the potential to contribute to
C. How many time	es was this observation measured or evalua	2 3
D. Has your MS4	made progress toward this measurable goa	(ex.: samples/participants/events I during this reporting period?
·	1 0	● Yes ○ No
E. Is your MS4 on	schedule to meet the deadline set forth in t	the SWMPP? • Yes • No
	rize the stormwater activities planned to mo	eet the goals of this MCM during
Continue to review	projects to determine the potential impact to	stormwater.

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

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				SPDES ID	
Name of MS4/Coalition	NEW YORK CITY T	RANSIT		N Y R	2 0 A 4 7 9
<u>Minimum</u>	<u>Control Mea</u>	sure 5. Post-	<u>Constructio</u>	n Stormwater I	<u>Management</u>
The information in the	nis section is bein	g reported (chec	k one):		
On behalf of an incOn behalf of a coaHow m		ributed to this r	eport?		
1. How many and MS4/Coalition i	• • •			nagement practices eporting period?	s has your
		# Inventoried	# Inspections	# Times Maintained	
O Alternative Practic	ces				
O Filter Systems					
O Infiltration Basins					
Open Channels					
○ Ponds					
O Wetlands					
Other		3 3 8	7 4 4	5 1 2	
2. Do you use an BMPs, inspecti		` •	base, spreadsl	neet) to track post	-construction ○ Yes ● No
3. What types of a Development/E	non-structural Better Site Desig	-		-	mpact
O Building Codes	O Municipal Co	omprehensive Pl	ans		
Overlay Districts	Open Space	Preservation Pro	gram		
○ Zoning	O Local Law or	r Ordinance			
○ None	O Land Use Re	egulation/Zoning			
O Watershed Plans	Other Compr	rehensive Plan			
• Othor					

S

L E E D

STANDARD

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

	SPI	DES II)				
Name of MS4/Coalition NEW YORK CITY TRANSIT	N	YR	. 2	0 7	A 4	7	9
4a. Are the MS4s contributing to this report involved in a regional/waters	shed w	vide p	lann	_			
				0 \	Yes		No
4b. Does the MS4 have a banking and credit system for stormwater mana	gemei	nt pra	ctic	es?			
				\circ	Yes		No
4c. Do the SWMP Plans for each MS4 contributing to this report include and approval of banking and credit of alternative siting of a stormwater.	_			t pra		?	No
4d. How many stormwater management practices have been implemented	l as pa	art of	this	syste	em in	thi	S
reporting period?	•				3 9	1	
5. What percent of municipal officials/MS4 staff responsible for program	_				tend	ed	
training on Low Impace Development (LID), Better Site Design (BSD) Infrastructure principles in this reporting period?	anu (other	Gre		2	5	%

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

	SPDES ID
Name of MS4/Coalition NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9
Jse this page to report on your progress and project plans toward dentified in your Stormwater Management Program Plan (SWN II.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the	SWMPP in this reporting period.
Track post-construction practices inventoried, inspected & main	ntained.
B. Briefly summarize the observations that indicated the ov Goal.	rerall effectiveness of this Measurable
338 post-construction practices were inspected 744 times & mainserts changed/installed.	nintained 512 times, including 391
C. How many times was this observation measured or evalu	nated in this reporting period?
C. How many times was this observation measured or evalu	nated in this reporting period?
·	1 2 5 6 (ex.: samples/participants
D. Has your MS4 made progress toward this measurable go	1 2 5 6
C. How many times was this observation measured or evaluable. Has your MS4 made progress toward this measurable go E. Is your MS4 on schedule to meet the deadline set forth in F. Briefly summarize the stormwater activities planned to a the next reporting cycle (including an implementation schedule)	1 2 5 6

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

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	SPDES ID
Name of MS4/Coalition NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9

Minimum Control Measure 6. Stormwater Management for Municipal Operations

On behalf of an individual MS4On behalf of a coalition	The information in this section is being reported (check one):
	• On behalf of an individual MS4

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

No

● No ○ Yes

performed within the past 3 **Operation/Activity/Facility** Addressed in SWMP? Street Maintenance..... O Yes ● No ○ Yes No ● No ○ Yes Bridge Maintenance.... O Yes No Winter Road Maintenance.... O Yes ● No ○ Yes No Salt Storage..... 9 Yes ○ No • Yes \bigcirc No Solid Waste Management..... • Yes ○ No • Yes \bigcirc No ○ No • Yes New Municipal Construction and Land Disturbance.. • Yes \bigcirc No Right of Way Maintenance....

Yes \bigcirc No ● No ○ Yes No Marine Operations.... O Yes Hydrologic Habitat Modification..... O Yes ● No ○ Yes No Parks and Open Space.... O Yes ● No ○ Yes No Municipal Building.... O Yes ● No ○ Yes No ○ No ○ Yes \bigcirc No Stormwater System Maintenance..... • Yes ○ No ○ Yes \bigcirc No Vehicle and Fleet Maintenance..... • Yes

Other..... O Yes

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

	SPDES ID						
Name of MS4/Coalition NEW YORK CITY TRANSIT	N Y R 2	0 A 4	7	9			
2. Provide the following information about municipal operation	ions good housekeep	oing pro	gram	ıs:			
• Parking Lots Swept (Number of acres X Number of times swep	t) # Acres	1 2 7	7 9	2			
O Streets Swept (Number of miles X Number of times swept)	# Miles						
• Catch Basins Inspected and Cleaned Where Necessary	#		7 0	3			
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#	-	6	8			
O Phosphorus Applied In Chemical Fertilizer	# Lbs.						
O 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 p during this reporting period?	rovided to municipa	al emplo		0			
4. What was the date of the last training?	0 3 / 0 4] / [2 0	2	1			
5. How many municipal employees have been trained in this	reporting period?	9	9	9			
6. What percent of municipal employees in relevant positions stormwater management training?	s and departments r	eceive	0	%			

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

			SPDES ID	
Name of MS4/Coalition NEW YO	PRK CITY TRANSIT		N Y R 2 0 A 4	7 9
7. Evaluating Progress T	oward Measurable Goals Mo	CM 6		
1 0 1	your progress and project plans ter Management Program Plan pages as needed.			Part
A. Briefly summarize the	Measurable Goal identified	in the SWMPP	in this reporting peri	od.
Track and report all spills to benchmark exceedances.	that have the potential to contri	bute pollutants t	to the MS4 system. Rev	view
B. Briefly summarize the Goal.	observations that indicated	the overall effec	tiveness of this Measu	ırable
During the reporting period Benchmark exceedances of	d, 100% of the spills that were ccured at 7 of 23 outfalls.	reported to NYS	SDEC were closed.	
C. How many times was t	this observation measured or	evaluated in th	is reporting period? (ex.: samples/part	4 5
D. Has your MS4 made p	rogress toward this measura	ble goal during		? ○ No
E. Is your MS4 on schedu	le to meet the deadline set fo	rth in the SWM	IPP?	○ No
•	stormwater activities planne le (including an implementat	U	oals of this MCM dur	ing
1 1 1	er NYSDEC's spill reporting proceedances following permit re			ng.

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

		SPI	DES	ID						
Name of MS4/Coalition	NEW YORK CITY TRANSIT	N	Y	R	2	0	А	4	7	9

e information in this section On behalf of an individual Mon behalf of a coalition How many MS ON MON MON MON MON MON MON MON MON MON M	MS4 4s contributed to this re	eport?	below.		
MS4 Description	Answer	Check NA	(POC)		
NYC EOH Watershed	- 1224567 10 01 0	- 10.11.12	- DI 1		
raditional Land Use raditional Non-Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus		
Von-Traditional	1,2,3,4,7a-d,8a,8b,9 1,2,77a-d,8a,8b,9	5,10,11,12 3,4,5,10,11,12	Phosphorus Phosphorus		
Onondaga Lake Watershed	1,2,//a-u,0a,00,7	3,7,3,10,11,12	1 nospnorus		
raditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus		
raditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus		
Jon-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus		
Greenwood Lake Watershed	-	-,-,-,-,,,	-		
raditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
raditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Ion-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Oyster Bay	-	-	-		
raditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens		
raditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens		
Ion-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens		
Peconic Estuary	-	-	-		
raditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen		
raditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen		
Ion-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen		
Oscawana Lake Watershed	-	-	-		
raditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
raditional 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	-	-	-		
raditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens		
raditional Non-Land Use Jon-Traditional	1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9	5,6,8a,8b 5,6,8a,8b,10,11,12	Pathogens Pathogens		
Does your MS4/Coality phosphorus/nitrogen/p Has 100% of the MS4/	athogens on waterboo	dies?	○ Yes ○ No ●		

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

	SPDES ID
Name of MS4/Coalition NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9
3. Does your MS4/Coalition have a Stormwater Conveyand and Maintenance Plan Program?	ce System (infrastructure) Inspection ○ Yes ○ No ● N/A
4. Estimate the percentage of on-site wastewater treatment and maintained or rehabilitated as necessary in this repo	· · · · · · · · · · · · · · · · · · ·
5. Has your MS4/Coalition developed a program that prov NYSDEC SPDES General Permit for Stormwater Disch (GP-0-08-001) to reduce pollutants in stormwater runoff disturb five thousand square feet or more?	arges from Construction Activities
6. Has your MS4/Coalition developed a program to address runoff from new development and redevelopment project equal to one acre that provides equivalent protection to Permit for Stormwater Discharges from Construction At the New York State Stormwater Design Manual Enhance Standards?	cts that disturb greater than or the NYS DEC SPDES General activities (GP-0-08-001), including
7a. Does your MS4/Coalition have a retrofitting program to phosphorus/nitrogen/pathogen loading?	o reduce erosion or ○ Yes ○ No ● N/A
7b. How many projects have been sited in this reporting per	riod?
7c. What percent of the projects included in 7b have been co	%
7d. What percent of projects planned in previous years have	/0
8a. Has your MS4/Coalition developed and implemented a t procedures policy that addresses proper fertilizer applic lands?	2 •
8b.Has your MS4/Coalition developed and implemented a t procedures policy that addresses proper disposal of gras municipally owned lands?	

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	SPDES ID N Y R 2	0 A 4	1 7 9
9. Has your MS4/Coalition developed and implemented a program of	-	0	• N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste o prohibiting goose feeding?	-		rties and • 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