MS4 Annual Report Cover Page

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

This cover page must be completed by the report preparer.
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

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

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

Name of Coalition

	of S1	e En													

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 2

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 2

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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.

If Jo	oint	Rep	ort,	ent	er c	oali	tion	nar	ne:										
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MCC form for period ending March 9, 2 0 2 2

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

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 2

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- 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 2

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

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- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
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MCC form for period ending March 9, 2 0 2 2

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Name of MS4 NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9											
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 accepted. If your MS4 cooperated with a coalition, submit one scoalition. It is not necessary to include a separate sheet for each	sheet with the name of the											
If No, proceed to Section 4 - Certification Statement.												
Partner/CoalitionName												
Partner/Coalition Name (con't.)	SPDES Partner ID - If applicable											
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Address												
City Stat	te Zip											
eMail												
Phone												
Legally	Binding Agreement in accordance 2-0-08-002 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												
O MM6												
Additional tasks/responsibilities												
Additional tasks/responsibilities **Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.												

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

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

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 DOREENN	MI A	Last N	TT	SV	I A	I	N					
Title (Clearly print title of individual signing report)												
DIRECTOR												
Signature												
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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

Signature Authorization Form

Permittee Name New York City Transit	SPDES NO. NYR20A479
Facility Name Multiple	Date:
Name of person described in paragraph (1):	Title: Vice President
Timothy J. Doddo	
Signature of person described in paragraph (1):	Date:
	4/14/22
	1 777

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: Director, Environmental Protection & Industrial Hygiene, 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

-	_	the reporting period nt report on behalf of a	coalition leave SPDES ID bl	ank.
Name of MS4/Coalition			SPDES ID N Y R 2 0	
	Wat	er Quality Trends	1	
The information in this section	n is being reported	(check one):		
 On behalf of an individual Non behalf of a coalition How many MS4s are 		is report?		
1. Has this MS4/Coalition related to stormwater? One.	-	-	g water quality trends Iinimum Control Measu O Y	
If Yes, choose one of the follow	owing			
O Report(s) attached to the an	nual report			
O Web Page(s) where report(s	· -			
Please provide spe	cific address of p	rage where report(s) ca	an be accessed - not home	page.
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$

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

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Name of MS4/Coalition	NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9
<u>Mini</u>	mum Control Measure 1. Public Edu	<u>ication and Outreach</u>
The information in thi	is section is being reported (check one):	
On behalf of an indOn behalf of a coalHow m		
1. Targeted Public	c Education and Outreach Best Managemen	nt Practices
Check all topics that	t were included in Education and Outreach du	ring this reporting period:
• Construction Sites		O Pesticide and Fertilizer Application
• General Stormwater	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 Main	ntenance	● Trash Management
O Smart Growth		• Vehicle Washing
O Storm Drain Markin	ng	O Water Conservation
Green Infrastructure	re/Better Site Design/Low Impact Development	O Wetland Protection
Other:		○ None
2. Specific audience	ces targeted during this reporting period:	
• Public Employees	Contractors	
O Residential	○ Developers	
O Businesses	• General Public	
○ Restaurants	○ Industries	
Other:	○ Agricultural	
Other		

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

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3. What strategies did your MS4/Coalition use to achieve education and outreach a this reporting period? Check all that apply:														go	als	du	rin	g														
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This report is being submitted for the reporting period ending March 9, 2 0 2 2

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

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Name of MS4/Coalition	NEW YORK CITY TRANSIT	N Y R 2	0 A 4 7 9
4. Evaluating Prog	gress Toward Measurable Goals MC	M 1	
identified in your Sto	ort on your progress and project plans to ormwater Management Program Plan (Stional pages as needed.	_	_
A. Briefly summar	ize the Measurable Goal identified in	the SWMPP in this repor	ting period.
Continue implement employees and audi	ting the educational program. Continue ences.	distributing guidance mater	ials to target
B. Briefly summar Goal.	ize the observations that indicated th	e overall effectiveness of th	nis Measurable
	22 reporting period, 10,360 NYCT empored guidance materials on stormwater r	. •	•
C. How many time	es was this observation measured or e		period? 92 samples/participants/events
D. Has your MS4 n	nade progress toward this Measurab		ng period?
E. Is your MS4 on	schedule to meet the deadline set for	th in the SWMPP?	Yes ○ NoYes ○ No
·	ize the stormwater activities planned ng cycle (including an implementatio	e e	ICM during
Continue offering tr	raining and educational programs.		

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

3. Where can the public access copies of this annual report, Stormwater Management

Name of MS4/Coalition NEW YORK CITY TRANSIT

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 NEW YORK CITY TRANSIT

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Name of MS4/Coalition NEW YORK CITY TRANSIT

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3. Where can the public access copies of this annual report, Stormwater Management

Name of MS4/Coalition NEW YORK CITY TRANSIT

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Name of MS4/Coalition NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9
4.a. If this report was made available on the internet, what date	e was it posted?
Leave blank if this report was not posted on the internet.	
4.b. For how many days was/will this report be posted?	
If submitting a report for single MS4, answer 5.a If submitting	ng a joint report, answer 5.b
5.a. Was an Annual Report public meeting held in this reportin If Yes, what was the date of the meeting?	ng period? ○ Yes ● No
If No, is one planned?	○ Yes • No
5.b. Was an Annual Report public meeting held for all MS4s co	ontributing 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? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.	○ Yes ○ No

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

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

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Name of MS4/Coalition	NEW YORK CITY TRANSIT	N Y R 2 0) A 4 7 9
7. Evaluating Prog	ress Toward Measurable Goals MCN	1 2	
identified in your Sto	rt on your progress and project plans to rmwater Management Program Plan (S ional pages as needed.		
A. Briefly summari	ze the Measurable Goal identified in	the SWMPP in this reporting	ng period.
Promote involvement	at and commitment to NYCT's SWMP.		
B. Briefly summari Goal.	ze the observations that indicated the	e overall effectiveness of this	s Measurable
implementation of N	tes for the public and employees to part YCT's SWMP by posting information nizing an internal meeting, and making	on mta.info, providing a hotli	ine, holding
C. How many times	s was this observation measured or e	valuated in this reporting pe	eriod?
			5
D. Has your MS4 m	nade progress toward this measurabl		mples/participants/events, period?
E L MC4			● Yes ○ No
E. Is your MIS4 on S	schedule to meet the deadline set fort		● Yes ○ No
•	ze the stormwater activities planned ag cycle (including an implementation	S	CM during
Continue to encourage	ge public participation & cleanup even	S.	

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

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Minimum Control Measur	<u>e 3</u>	. I	llic	cit_	<u>Dis</u>	ch _a	ar	ge]	Dete	ecti	ion	ar	ıd İ	Eli	imi	ina	tio	<u>n</u>	
The information in this section is being rep ● On behalf of an individual MS4 ○ On behalf of a coalition How many MS4s contribute		Ì			ĺ														
1. Enter the number and approx. pe	rcei	nt (of o	utf	alls	ma	pp	ed:				3	0	#		1	0	0	%
2. How many of these outfalls have reporting period (outfall reconnation)							y	wea	ıtheı	di	sch	arg	ges (dur	ing	g th	nis	2 3	3
3.a. What types of generating sites/ser reporting period?	wers	she	ds v	wei	re ta	rge	ete	d fo	r in	spe	ctio	n d	luri	ing	thi	is			
O Auto Recyclers			0	Laı	ndsca	apin	g ([Irri	gatio	n)									
O Building Maintenance			0	Ma	rinas	5													
○ Churches			0	Me	tal F	late	eing	g Op	perati	ons									
O Commercial Carwashes				Ou	tdoo	r Fl	uid	Sto	orage										
O Commercial Laundry/Dry Cleaners				Par	king	Lo	t N	1ain	itenai	nce									
O Construction Vehicle Washouts			0	Pri	nting	5													
O Cross-Connections			0	Res	siden	tial	C	arwa	ashin	g									
O Distribution Centers			0	Res	staur	ants	5												
○ Food Processing Facilities			0	Scł	nools	an	d I	Jniv	ersiti	es									
○ Garbage Truck Washouts			0	Sep	otic 1	Mai	nte	nan	ce										
O Hospitals			0	Sw	imm	ing	Po	ols											
O Improper RV Waste Disposal				Vel	hicle	Fu	eli	ng											
O Industrial Process Water				Vel	hicle	Ma	int	./Re	epair	Sho	ops								
Other:			0	No	ne														_
O Sewersheds:													1						_

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Name of MS4/Coalition NEW YORK CITY TRANSIT		N Y R 2	0 A 4 7 9
3.b. What types of illicit discharges have	been found during th	nis reporting period?	•
Broken Lines From Sanitary Sewer	O Industrial Connection	ns	
O Cross Connections	Inflow/Infiltration		
O Failing Septic Systems	O Pump Station Failure		
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Over	flows	
O Illegal Dumping	O Straight Pipe Sewer	Discharges	
Other:	O None		
4. How many illicit discharges/potentia	l illegal connections h	ave been detected d	
reporting period?			3
5. How many illicit discharges have been	en confirmed during t	his reporting period	!? 3
6. How many illicit discharges/illegal coperiod?7. Has the storm sewershed mapping b If No, approximately what percent was	een completed in this	reporting period?	Yes No
8. Is the above information available in Is this information available on the value of Yes, provide URL(s): Please provide specific address of page URL	veb?	ccessed - not home pa	○ Yes○ Yes○ No
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This report is being submitted for the reporting period ending March 9, 2 0 2 2

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. What percent of staff in relevant positions and departments has received IDDE training?	VX /L -	·+	orc	on4	. c	'a4-	cc :	in -	مام	***	n+ -		4: ~	m.c	or:	1.1	0 10 0		nor	4~	haa	***	ac : -	u a d	I TT	יחו	T 4	.a:-		₋ 0
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Report progress of outfall screening for dry weather discharges & track illi B. Briefly summarize the observations that indicated the overall effect Goal.	n this reporting period. cit discharges. iveness of this Measurable
dentified in your Stormwater Management Program Plan (SWMPP), includI.C.1. Submit additional pages as needed. A. Briefly summarize the Measurable Goal identified in the SWMPP in Report progress of outfall screening for dry weather discharges & track illies. B. Briefly summarize the observations that indicated the overall effect Goal.	n this reporting period. cit discharges. iveness of this Measurable
A. Briefly summarize the Measurable Goal identified in the SWMPP in Report progress of outfall screening for dry weather discharges & track illing. Briefly summarize the observations that indicated the overall effect Goal. Outfalls were screened for dry weather flow. O were observed to have flow.	iveness of this Measurable
3. Briefly summarize the observations that indicated the overall effect	iveness of this Measurable
Goal.	
23 outfalls were screened for dry weather flow. 0 were observed to have fl	OW
	ow.
C. How many times was this observation measured or evaluated in this	
	(ex.: samples/participants/e
O. Has your MS4 made progress toward this measurable goal during t	his reporting period?
E. Is your MS4 on schedule to meet the deadline set forth in the SWM	
F. Briefly summarize the stormwater activities planned to meet the gother next reporting cycle (including an implementation schedule).	● Yes ○ No als of this MCM during
	S

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

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

Minimum Control Measures 4 and 5.

	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 regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for	
	Stormwater Discharges from Construction Activities? • Yes	○ No
	equivalent 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? O Yes O No If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law. O 09/2004 O 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	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 loca SWPPP process? • Yes	ol O 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:

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

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

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Minimum Control Measure 4. Construction Site Stormwater Runoff 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?			
1.	How many construction projects have been authorized for disturbated during this reporting period?	nces of one a	acre or 1	more 0
2.	How many construction projects disturbing at least one acre were a	ctive in vou	r iurisd	iction
	during this reporting period?	, e c 2		0
3.	What percent of active construction sites were inspected during this	s reporting _l	period?	
4.	What percent of active construction sites were inspected more than	once?		● NT
_			41 NIX	<u></u> %
5.	Do all inspectors working on behalf of the MS4s contributing to this Construction Stormwater Inspection Manual?	s report use O Yes	O No	
6.	Does your MS4/Coalition provide public access to Stormwater Pollu (SWPPPs) of construction projects that are subject to MS4 review a			ans
		○ Yes	\bigcirc No	• NT
	If your MS4 is Non-Traditional, are SWPPPs of construction project public review?	cts made av	ailable f ○ Yes	f or ● No
	If Yes, use the following page to identify location(s) where SWPPPs can	n be accessed	d.	

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

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SPDES ID

Name of MS4/Coalition	NEW YO	RK CITY	TRANS	SIT										Ν	Y	R	2	0	A	4	7	9
Coomit																						
6. con't.: Submit addition	nal nages	s as ne	eded																			
		3 as 110	caca.																			
O MS4/Coalition Off	fice																					
Department																						_
Address						Ш																
Address																						
City													Zip									
												Ī	- P					_				
Phone												L										
)	_																				
○ Library																						
Address																						
City													Zip									
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Phone																						
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Address																						
City													Zip									
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○ Web Page URL(s):	: Pleas	se prov	ide sp	ecific	addr	ess '	whe	ere S	SW.	PPF	s ca	an b	oe a	ıcce	sse	d - 1	not	hoı	ne 1	pag	e.	
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This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$

Name of MS4/Coalition	NEW YORK CITY TRANSIT		SPDES ID N Y R 2 0 A	4 7 9
7. Evaluating Pro	ogress Toward Measurable G	oals MCM 4		
identified in your S	port on your progress and projectormwater Management Progrational pages as needed.	-		in Part
A. Briefly summa	rize the Measurable Goal ide	ntified in the SWM	1PP in this reporting p	eriod.
Review plans for c stormwater pollution	construction to determine if the on.	projects have the po	otential to contribute to	
B. Briefly summa Goal.	rize the observations that ind	icated the overall e	effectiveness of this Me	asurable
31 projects were id reviewed and accep	lentified as having a potential in pted.	mpact on stormwate	er and 5 SWPPP plans w	ere
C. How many tim	es was this observation measi	ıred or evaluated i		1? 3 6
D. Has your MS4	made progress toward this m	easurable goal dui	ring this reporting peri	od?
E. Is your MS4 or	schedule to meet the deadlin	e set forth in the S		s O No
•	rize the stormwater activities ing cycle (including an imple	-	_	luring
Continue to review	projects to determine the pote	ntial impact to storn	nwater.	

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

SPDES ID

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Name of MS4/Coalition	n NEW YORK CITY	TRANSIT		N Y R	2 0 A 4 7 9
<u>Minimum</u>	Control Mea	asure 5. Post	-Constructio	on Stormwater M	<u>[anagement</u>
The information in the	nis section is bei	ng reported (chec	ck one):		
On behalf of an incomeOn behalf of a coa	dividual MS4 llition				
	•	tributed to this 1			
•	• • •			nagement practices leporting period?	ias your
		# Inventoried	# Inspections	# Times Maintained	
○ Alternative Practic	ces		Inspections		
O Filter Systems					
Infiltration Basins					
Open Channels					
○ Ponds					
○ Wetlands					
Other		6 5 2	9 1 6	1 1 4	
2. Do you use an BMPs, inspect			abase, spreads	heet) to track post-o	construction ○ Yes • No
3. What types of Development/I				implement Low Imnciples?	pact
O Building Codes	O Municipal C	Comprehensive P	lans		
Overlay Districts	Open Space	Preservation Pro	ogram		
○ Zoning	O Local Law	or Ordinance			
○ None	O Land Use R	egulation/Zoning	5		
O Watershed Plans	Other Comp	orehensive Plan			
Other:					

S

L E E D

STANDARD

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

	SPDES ID							
Name of MS4/Coalition NEW YORK CITY TRANSIT	N	Y	R 2	2	0 A	4	7	9
4a. Are the MS4s contributing to this report involved in a regional/w	atershed	wide	plan	ıni	ng efi ○ Ye			NI.
4b. Does the MS4 have a banking and credit system for stormwater n	nanagem	ent p	acti	ces	0 1			No
4c. Do the SWMP Plans for each MS4 contributing to this report incland approval of banking and credit of alternative siting of a storm	_				valuat	tion tice:	?	
4d. How many stormwater management practices have been implement reporting period?	ented as p	art o	f thi	S S	systen	n in	thi	s
5. What percent of municipal officials/MS4 staff responsible for protraining on Low Impace Development (LID), Better Site Design (Infrastructure principles in this reporting period?	_ ,					2 2	ed 5	%

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

	SPDES ID
Name of MS4/Coalition NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9
6. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward identified in your Stormwater Management Program Plan (SWMI III.C.1. Submit additional pages as needed.	5
A. Briefly summarize the Measurable Goal identified in the S	WMPP in this reporting period.
Track post-construction practices inventoried, inspected & maint	ained.
B. Briefly summarize the observations that indicated the over Goal.	rall effectiveness of this Measurable
652 post-construction practices were inspected 916 times and mainserts installed.	intained 114 times, including 153
C. How many times was this observation measured or evaluate	ted in this reporting period?
	1 6 8 2
D. Has your MS4 made progress toward this measurable goal	
E. Is your MS4 on schedule to meet the deadline set forth in t	he SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to me the next reporting cycle (including an implementation sche	eet the goals of this MCM during
Continue evaluating post-construction BMPs, continue inspecting stormwater controls as necessary.	g & maintaining post-construction

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

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 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.

Self-Assessment

No

● No ○ Yes

Operation/Activity/Facility 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 \bigcirc 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 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, $\begin{vmatrix} 2 & 0 \end{vmatrix} \begin{vmatrix} 2 & 2 \end{vmatrix}$

	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 operat	ions good housekee	oing pr	ograr	ns:				
• Parking Lots Swept (Number of acres X Number of times swep	t) # Acres	2 6	2 2	8				
O Streets Swept (Number of miles X Number of times swept)	# Miles							
• Catch Basins Inspected and Cleaned Where Necessary	#		2 7	0				
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#		3	7				
O Phosphorus Applied In Chemical Fertilizer	# Lbs.							
O Nitrogen Applied In Chemical Fertilizer	# Lbs.							
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 1 4 6 3.								
3. How many stormwater management trainings have been p during this reporting period?	provided to municip	al empl	oyees	5				
4. What was the date of the last training?	1 1 / 3 0] / [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 0]%				

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

	SPDES ID
Name of MS4/Coalition NEW YORK CITY TRANSIT	N Y R 2 0 A 4 7 9
7. Evaluating Progress Toward Measurable Goals MCM 6 Use this page to report on your progress and project plans toward a	e e
identified in your Stormwater Management Program Plan (SWMPF III.C.1. Submit additional pages as needed.	P), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the SV	VMPP in this reporting period.
Track and report all spills that have the potential to contribute pollubenchmark exceedances.	utants to the MS4 system. Review
B. Briefly summarize the observations that indicated the overa Goal.	all effectiveness of this Measurable
During the reporting period, 97% of the spills that were reported to Benchmark exceedances occured at 15 of 23 outfalls.	o NYSDEC were closed.
C. How many times was this observation measured or evaluate	ed in this reporting period? 4 5 (ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable goal of	during this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to mee the next reporting cycle (including an implementation sched	9
Continue to report spills per NYSDEC's spill reporting protocol. E investigate the causes of exceedances following permit requirement	

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

o is must unswer the qu	estions or check NA a	s indicated in the table	below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	-	-	-
raditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
raditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
on-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	1670 480 0	2 2 4 5 9h 10 11 12	Dhambanya
aditional Land Use aditional Non-Land Use	1,6,7a-d,8a,9 1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12 2,3,4,5,8b,10,11,12	Phosphorus Phosphorus
on-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12 2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	1,0,7a-u,8a,9	2,3,4,3,60,10,11,12	- I nosphorus
aditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
aditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
on-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay	-	-	-
aditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
aditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
on-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary	-	-	-
aditional 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
on-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed	-	-	-
aditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
aditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
on-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
	1 2 2 4 7 2 4 0 10 11 12	5 6 0 a 0 h	
			-
LI 27 Embayments raditional Land Use raditional Non-Land Use fon-Traditional Does your MS4/Coality phosphorus/nitrogen/p	1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9 ion have an education	5,6,8a,8b 5,6,8a,8b 5,6,8a,8b,10,11,12 program addressing in	Pathogens Pathogens Pathogens

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			SPDES ID		
Name of MS4/Coal	lition NEW YORK CITY TRANSIT		N Y R 2	0 A 4 7	9
•	MS4/Coalition have a Stormwat nance Plan Program?	er Conveyance S	ystem (infrastructu ○ Yes	, <u>-</u>	on N/A
	e percentage of on-site wastewa ined or rehabilitated as necessa	•			%
NYSDEC S: (GP-0-08-00	IS4/Coalition developed a progr PDES General Permit for Storn D1) to reduce pollutants in storn thousand square feet or more?	nwater Discharg nwater runoff fro	es from Construction	n Activities vities that	N/A
runoff from equal to one Permit for S	IS4/Coalition developed a programent and redevelopment and redevelopment and redevelope acre that provides equivalent postormwater Discharges from Cork State Stormwater Design Ma	opment projects to protection to the construction Active	that disturb greater NYS DEC SPDES (vities (GP-0-08-001),	than or General including al	N/A
•	MS4/Coalition have a retrofittin s/nitrogen/pathogen loading?	g program to red	duce erosion or	○ No ● N	N/A
7b.How many	projects have been sited in this	reporting period	?		
•	ent of the projects included in 7b	-	•	ng period?]%
7d.What perce	nt of projects planned in previo	ous years have be	-	D : 4 DI]%
v	S4/Coalition developed and impolicy that addresses proper features.		management practi	vned	N/A
procedures	S4/Coalition developed and impolicy that addresses proper discounted by owned lands?	<u>-</u>	0	rom	N/A

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	SPDES ID											
Name of MS4/Coalition NEW YORK CITY TRANSIT	N	Y	R	2	0	A	4	7	9			
		. •				0						
9. Has your MS4/Coalition developed and implemented a program of	na		_		_	? No		D N	/A			
10. Has your MS4/Coalition enacted a local law prohibiting pet waste of prohibiting goose feeding?	n r			-	-	ope No						
11. Does your MS4/Coalition have a pet waste bag program?		С	Υe	es	0	No		D N	/A			
12. Does your MS4/Coalition have a program to manage goose populations?		С	Ye	es	0	No	(D N	/A			