



### 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.

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--

SPDES ID

N	Y	R	2	0	A		
---	---	---	---	---	---	--	--



### MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2022

Name of MS4

SPDES ID  
N Y R 2 0 A 5 0 4

#### Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name  MI  Last Name

Title

Address

City  State  Zip

eMail

Phone  County



# MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2022

Name of MS4

SPDES ID  
N Y R 2 0 A 5 0 4

## Section 2 - Contact Information

Important Instructions - Please Read

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

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

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

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

For each contact, select all that apply:

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

First Name  MI  Last Name

Title

Address

City  State  Zip

eMail

Phone  County

### MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2022

Name of MS4

SPDES ID  
N Y R 2 0 A 5 0 4

#### Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?  Yes  No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

Partner/Coalition Name (con't.)  SPDES Partner ID - If applicable  
N Y R 2 0

Address

City  State  Zip

eMail

Phone (  )  -

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.?  Yes  No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

- MM1
- MM2
- MM3
- MM4
- MM5
- MM6

Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

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

MCC form for period ending March 9, 

2	0	2	2
---	---	---	---

Name of MS4 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**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 

J	e	f	f	e	r	y													
---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--

 MI 

R
---

 Last Name 

H	a	m	m	e	r														
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Title (Clearly print title of individual signing report)  

D	i	r	e	c	t	o	r	,	E	n	v	.	,	H	e	a	l	t	h	,	a	n	d	S	a	f	e	t	y
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Signature  

--

Date  

		/			/				
--	--	---	--	--	---	--	--	--	--

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator  
Division of Water  
4th Floor  
625 Broadway  
Albany, New York 12233-3505







### MS4 Annual Report Form

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:**

- Construction Site Operators Trained
- Direct Mailings
- Kiosks or Other Displays
- List-Serves
- Mailing List
- Newspaper Ads or Articles
- Public Events/Presentations
- School Program
- TV Spot/Program
- Printed Materials:

# Trained	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>					
# Mailings	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>					
# Locations	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td>3</td></tr></table>					3
				3		
# In List	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>					
# In List	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>					
# Days Run	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td>1</td></tr></table>					1
				1		
# Attendees	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td>3</td><td>0</td></tr></table>				3	0
			3	0		
# Attendees	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td>2</td><td>5</td><td>0</td></tr></table>			2	5	0
		2	5	0		
# Days Run	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>					
Total # Distributed	<table border="1" style="width: 100%;"><tr><td> </td><td> </td><td> </td><td>8</td><td>4</td></tr></table>				8	4
			8	4		

Locations (e.g. libraries, town offices, kiosks)

F	a	c	i	l	i	t	.		O	p	s	.		C	e	n	t	e	r
P	a	r	k	i	n	g		S	e	r	v	.		O	f	f	i	c	e
S	t	u	d	e	n	t		U	n	i	o	n		T	a	b	l	e	

Other:

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

Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.

URL

e	n	v	i	r	o	n	m	e	n	t	a	l	h	e	a	l	t	h	.	b	u	l	f	f	a	l	o	s	t	a	t	e
.	e	d	u	/	m	s	4	h	o	m	e	p	a	g	e																	

URL

e	n	v	i	r	o	n	m	e	n	t	a	l	h	e	a	l	t	h	.	b	u	l	f	f	a	l	o	s	t	a	t	e	
.	e	d	u	/	s	t	o	r	m	-	w	a	t	e	r	-	p	o	l	l	u	t	i	o	n	-	p	r	e	v	e		
n	t	i	o	n	-	p	o	l	i	c	i	e	s	-	a	n	d	-	p	r	o	c	e	d	u	r	e	s					

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2022

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

Name of MS4/Coalition

SPDES ID  
N Y R 2 0 A 5 0 4

3. Web Page cont.: Provide specific web addresses - not home page.

URL  
e n v i r o n m e n t a l h e a l t h . b u f f a l o s t a t e  
. e d u / v o l u n t e e r - a c t i v i t i e s

URL  
e n v i r o n m e n t a l h e a l t h . b u f f a l o s t a t e  
. e d u / s t o r m - w a t e r - m a n a g e m e n t - p l a n  
s

URL  
e n v i r o n m e n t a l h e a l t h . b u f f a l o s t a t e  
. e d u / s t o r m - w a t e r - a n n u a l - r e p o r t - a  
n d - c o m p l i a n c e - c e r t i f i c a t i o n

URL  
s u s t a i n a b i l i t y . b u f f a l o s t a t e . e d u /  
r e c y c l i n g - g u i d e

URL

URL

URL

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID

N	Y	R	2	0	A	5	0	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 Part III.C.1. Submit additional pages as needed.

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

Continue to increase student & public awareness of general concepts & impacts associated with SWP/SWP2 by conducting events or other opportunities, such as Great Lakes Center tours & an environmental information fair/event, to convey information on SWP, POCs, & SWP2 to the public. Note these events/opportunities were expected to be size-limited or canceled due to Covid-19 restrictions/protective measures implemented by the college to reduce gatherings & density.

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

During this reporting period, there were approximately 250 attendees on tours/events provided by the college GLC, which included talking points on storm water pollution, POCs, and SWP2. The college's Sustainability Committee also held a virtual event for the public with approximately 30 attendees on April 30, 2021, where SWP2 information was presented. In-person events were canceled or attendance was limited during this period due to covid-19 related safety restrictions.

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

	2	8	0
--	---	---	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Continue to increase student & public awareness of general concepts & impacts associated with SWP/SWP2 by conducting events or other opportunities, such as GLC tours & environmental information fair or event, to provide information on SWP, POCs, & SWP2 to the public. A public environmental information event is scheduled for April 29, 2022. Holding these public gathering events/activities are contingent upon covid restrictions remaining lifted.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID

N	Y	R	2	0	A	5	0	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 Part III.C.1. Submit additional pages as needed.

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

Increase contractor awareness of campus SWMP and SWP2 policies and procedures by providing SWP2 training/briefing sessions or obtaining SWP2 compliance certifications as new projects arise or new contractor services are procured.

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

Storm water pollution prevention compliance certifications were obtained from 7 new contractors for contractor services/projects initiated during this reporting cycle. A meeting/briefing was also held with contracted entity during this period for a new project.

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

			8
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Continue to obtain SWP2 compliance certifications or provide SWP2 training/briefing sessions as new projects arise or new contractor services are procured. Modify procedures and activities as necessary to align with new/revised requirements of final version of revised MS4 permit, once it is issued.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID

N	Y	R	2	0	A	5	0	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 Part III.C.1. Submit additional pages as needed.

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

Increase public (students and employees) awareness of the potential impacts to storm water and receiving waters from POC sources, including litter, leaks, spill residues and illicit discharges, and storm water pollution prevention prevention (SWP2) measures taken by the college through a SWP2 informational survey solicitation.

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

There were a total of 127 respondents to the SWP2 informational survey questionnaire during this report cycle, which is approximately 74% of the total achieved during the last pre-pandemic year (2019). The decrease is believed due to a reduced on-site population and other ongoing Covid-19 pandemic related impacts. Overall there were 59% correct responses to factual questions in the survey, which is a slight (2%) increase compared to last pre-pandemic (i.e., 2019) reporting year.

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

	1	2	7
--	---	---	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this Measurable Goal during this reporting period?**
 Yes    No
**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**
 Yes    No
**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

A SWP2 informational survey solicitation is planned for the 4th quarter of the next reporting cycle. Modify activities as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.





### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2022

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

Name of MS4/Coalition

SPDES ID

2. URL(s) con't.:

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

URL  
e n v i r o n m e n t a l h e a l t h . b u f f a l o s t a t e  
. e d u / s t o r m - w a t e r - a n n u a l - r e p o r t - a  
n d - c o m p l i a n c e - c e r t i f i c a t i o n

URL

URL

URL

URL

URL

URL



### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2022

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

Name of MS4/Coalition: SUNY Buffalo State College

SPDES ID: N Y R 2 0 A 5 0 4

### 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.

- MS4/Coalition Office
- Annual Report
- SWMP Plan
- Comments

Department: E n v i r o n m e n t a l H e a l t h a n d S a f e t y

Address: C C T R 2 0 9 , 1 3 0 0 E l m w o o d A v e n u e

City: B u f f a l o N Y Zip: 1 4 2 2 2 - 1 0 9 5

Phone: ( 7 1 6 ) 8 7 8 - 6 1 3 6

- Library
- Annual Report
- SWMP Plan
- Comments

Address: [Empty grid]

City: [Empty grid] Zip: [Empty grid]

Phone: ( [Empty grid] ) [Empty grid] - [Empty grid]

- Other
- Annual Report
- SWMP Plan
- Comments

Address: F a c i l i t i e s O p e r a t i o n s C e n t e r

City: B u f f a l o N Y Zip: 1 4 2 2 2 - 1 0 9 5

Phone: ( 7 1 6 ) 8 7 8 - 6 1 1 1

- Web Page URL:
- Annual Report
- SWMP Plan
- Comments

e n v i r o n m e n t a l h e a l t h . b u f f a l o s t a t e . e d u / s t o r m - w a t e r - a n n u a l - r e p o r t - a n d - c o m p l i a n c e - c e r t i f i c a t i o n

Please provide specific address of page where report can be accessed - not home page.

- eMail
- Comments

[Empty grid for eMail address]

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2022

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

Name of MS4/Coalition

SPDES ID

### 3. 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.

MS4/Coalition Office  Annual Report  SWMP Plan  Comments

Department

Address

City  Zip  -

Phone (  )  -

Library  Annual Report  SWMP Plan  Comments

Address

City  Zip  -

Phone (  )  -

Other  Annual Report  SWMP Plan  Comments

Address

City  Zip  -

Phone (  )  -

Web Page URL:  Annual Report  SWMP Plan  Comments

Please provide specific address of page where report can be accessed - not home page.

eMail  Comments

### MS4 Annual Report Form

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

0	3
---	---

 / 

3	1
---	---

 / 

2	0	2	2
---	---	---	---

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

6	0
---	---

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

Yes  No

If Yes, what was the date of the meeting?

--	--

 / 

--	--

 / 

--	--	--	--

If No, is one planned?

Yes  No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

Yes  No

If No, is one planned for each?

Yes  No

6. Were comments received during this reporting period?

Yes  No

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition

SUNY Buffalo State College

SPDES ID

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Recruit volunteers and coordinate a community clean up event. Note that holding this public gathering event/activity is contingent on the lifting of Covid-19 pandemic related restrictions on gatherings of this nature.

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

On September 25th a community event was held with 374 participants, including 272 students.

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

			1
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes     No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes     No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Recruit volunteers and coordinate a community clean up event. Note that holding this public gathering event/activity is contingent on the that Covid-19 pandemic related restrictions remain lifted. Modify activities as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**7. Evaluating Progress Toward Measurable Goals MCM 2**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Train any student(s) and have student(s) assist with outfall reconnaissance surveys, updating ARC/GIS storm sewershed maps as necessary, stenciling storm drains, and collection of flow monitoring data.

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

During this reporting cycle, two (2) students were trained and assisted in various storm water management program implementation aspects for the college. The students assisted with storm drain stenciling, public education surveys, ARC/GIS storm sewershed mapping, collection of flow data, and 10 rounds of storm water outfall surveys.

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

			1
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Train any student(s) and have student(s) assist with outfall reconnaissance surveys, updating ARC/GIS storm sewershed maps as necessary, stenciling storm drains, and collection of flow monitoring data. Modify activities as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.









**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**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.**

Perform storm drain system monitoring activities (e.g., flow monitoring, up-the-pipe inspections) as specified by other environmental permits or in response to discovered or public reported conditions.

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

During this period, rainfall & flow data from 1 flow meter installed in storm sewers were assessed for potential illicit discharges. No illicit discharges were identified from the data evaluation.

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

			1
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Perform storm drain system monitoring activities (e.g. up the pipe inspections), as specified by other permits, or in response to discovered or public reported conditions. Modify activities as necessary to align with new/revised requirements in the final version of the revised MS4 permit, once it is issued.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**12. Evaluating Progress Toward Measurable Goals MCM 3**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Conduct at least three (3) rounds of dry weather observation surveys at storm water outfalls, track down any illicit discharges found, and initiate elimination measures. At least one (1) round of surveys to be completed by July 1, 2021 with the remaining rounds to be completed before March 9, 2022.

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

A total of ten (10) rounds of dry weather observation surveys were completed at the storm water outfalls during this reporting cycle with seven (7) rounds completed by July 1, 2021 and the remaining three (3) rounds completed by March 9, 2022. No illicit discharges were detected during these surveys.

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

		1	0
--	--	---	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Conduct at least three (3) rounds of dry weather observation surveys at storm water outfalls, track down any illicit discharges found, and initiate elimination measures. At least one (1) round of surveys to be completed by July 1, 2022 with the remaining rounds to be completed before March 9, 2023. Modify survey activities as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

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

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?  Yes  No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?  Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  09/2004  03/2006  NT

2. Does your MS4/Coalition have a SWPPP review procedure in place?  Yes  No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period? 

		0
--	--	---

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?  Yes  No  NT

If Yes, how many public comments were received during this reporting period? 

--	--	--

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?  Yes  No

**6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:**

- |   |   |   |  |   |  |  |   |   |
|---|---|---|--|---|--|--|---|---|
| <input type="radio"/> Notices of Violation                        | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |  |   |  |  |   | <input checked="" type="radio"/> No Authority |
|   |   |   |  |   |  |  |   |   |
| <input checked="" type="radio"/> Stop Work Orders                 | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> |  |   |  |  | 0 | <input type="radio"/> No Authority            |
|   |   |   |  | 0 |  |  |   |   |
| <input type="radio"/> Criminal Actions                            | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |  |   |  |  |   | <input checked="" type="radio"/> No Authority |
|   |   |   |  |   |  |  |   |   |
| <input checked="" type="radio"/> Termination of Contracts         | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> |  |   |  |  | 0 | <input type="radio"/> No Authority            |
|   |   |   |  | 0 |  |  |   |   |
| <input type="radio"/> Administrative Fines                        | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |  |   |  |  |   | <input checked="" type="radio"/> No Authority |
|   |   |   |  |   |  |  |   |   |
| <input type="radio"/> Civil Penalties                             | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |  |   |  |  |   | <input checked="" type="radio"/> No Authority |
|   |   |   |  |   |  |  |   |   |
| <input checked="" type="radio"/> Administrative Orders            | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> |  |   |  |  | 0 | <input type="radio"/> No Authority            |
|   |   |   |  | 0 |  |  |   |   |
| <input checked="" type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td>0</td></tr></table> |  |   |  |  | 0 |   |
|   |   |   |  | 0 |  |  |   |   |
| <input type="radio"/> Other                                       | # | <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> |  |   |  |  |   | <input checked="" type="radio"/> No Authority |
|   |   |   |  |   |  |  |   |   |

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID 

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period? 

		1
--	--	---
  2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period? 

		1
--	--	---
  3. What percent of active construction sites were inspected during this reporting period?  NT 

1	0	0
---	---	---

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

		0
--	--	---

 %
  5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual?  Yes  No  NT
  6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval?  Yes  No  NT
- If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review?  Yes  No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

### MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2022

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

SPDES ID

N Y R 2 0 A 5 0 4

Name of MS4/Coalition SUNY Buffalo State College

6. con't.:

Submit additional pages as needed.

● MS4/Coalition Office

Department

E n v i r o n m e n t a l H e a l t h & S a f e t y

Address

C C T R 2 0 9 , 1 3 0 0 E l m w o o d A v e n u e

City

B u f f a l o

N Y

Zip

1 4 2 2 2 - 1 0 9 5

Phone

( 7 1 6 ) 8 7 8 - 6 1 3 6

○ Library

Address

[Empty address grid]

City

[Empty city grid]

[Empty state grid]

Zip

[Empty zip grid]

Phone

( [ ] [ ] [ ] ) [ ] [ ] - [ ] [ ] [ ] [ ]

○ Other

Address

[Empty address grid]

City

[Empty city grid]

[Empty state grid]

Zip

[Empty zip grid]

Phone

( [ ] [ ] [ ] ) [ ] [ ] - [ ] [ ] [ ] [ ]

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

URL

[Empty URL grid]

URL

[Empty URL grid]



**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

College EH&S and Planning offices to perform oversight monitoring/field inspections of each active construction project during report cycle to ensure contractor and Qualified Inspector implementation of SWP2 Plan requirements as specified by the DEC General Permit for storm water discharges from construction activity. Also, EH&S performs oversight inspections to address any concerns reported by the public.

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

Oversight inspection was performed at one (1) construction project with one (1) acre or more disturbance that were active during this reporting cycle. This was the only site within the MS4 having one (1) acre or more soil disturbance during this period. Deficiencies identified during the inspection were immediately reported to the cognizant agency (State University Construction Fund) and it's contractor representatives, who initiated corrections.

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

			1
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

College EH&S and Planning offices to perform oversight monitoring/field inspections of each active construction project during report cycle to ensure contractor and Qualified Inspector implementation of SWP2 Plan requirements. Oversight inspections will also be performed in response to concerns reported by the public. Modify inspection activities and frequencies as necessary to align with new/revised requirements that may be contained in final version of revised MS4 permit, once issued.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**7. Evaluating Progress Toward Measurable Goals MCM 4**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Increase construction contractor and BSC cognizant staff awareness of construction project run-off control and SWP2 obligations for projects through meetings or other forms of communication to review and discuss construction run-off control and SWP2 expectations and requirements.

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

During this reporting cycle, there were no new projects and therefore no kick-off meetings held with contractors and Buffalo State College cognizant staff to discuss roles and expectations for storm water pollution prevention.

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

			0
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Increase construction contractor and BSC cognizant staff awareness of construction project run-off control and SWP2 obligations for projects through meetings or other forms of communication to review and discuss construction run-off control and SWP2 expectations and requirements. Modify activities as necessary to align with new/revised requirements, that may be contained in the final version of the revised MS4 permit, once it is issued.

**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2022

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

Name of MS4/Coalition: SUNY Buffalo State College

SPDES ID: NYR20A504

**Minimum Control Measure 5. Post-Construction Stormwater Management**

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 and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

	# Inventoried	# Inspections	# Times Maintained
<input type="radio"/> Alternative Practices	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input checked="" type="radio"/> Filter Systems	<input type="text"/> 6	<input type="text"/> 5 <input type="text"/> 5	<input type="text"/> 3
<input type="radio"/> Infiltration Basins	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Open Channels	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Ponds	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="radio"/> Wetlands	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input checked="" type="radio"/> Other	<input type="text"/> 4	<input type="text"/> 9	<input type="text"/> 2

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?  Yes  No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes
- Overlay Districts
- Zoning
- None
- Watershed Plans
- Municipal Comprehensive Plans
- Open Space Preservation Program
- Local Law or Ordinance
- Land Use Regulation/Zoning
- Other Comprehensive Plan

Other: SUNY Energy & Sustain. Policy

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?  
 Yes  No

4b. Does the MS4 have a banking and credit system for stormwater management practices?  
 Yes  No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?  
 Yes  No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period? 

		0
--	--	---

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period? 

		0
--	--	---

 %

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**6. Evaluating Progress Toward Measurable Goals MCM 5**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (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.**

Inspect post construction storm water management structures/systems and perform maintenance as necessary.

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

During this reporting cycle, one (1) new structure/system was added to inventory and all 10 post construction systems were inspected at least once. Level 1 and 2 inspections were performed per DEC SMP Maintenance Guide. Surface systems (bioretention, etc.) were Level 1 inspected several times. Maintenance/cleaning of systems was performed as needed. Housekeeping (mechanical sweeping) is performed in the drainage catch areas, which helps reduce the need for system cleaning.

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

		1	0
--	--	---	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes    No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes    No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Inspect post construction management structures and perform maintenance as necessary. Modify activities as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID 

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**Minimum Control Measure 6. Stormwater Management for Municipal Operations**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment Operation/Activity/Facility performed within the past 3 years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Bridge Maintenance.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Winter Road Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Salt Storage.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Solid Waste Management.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Right of Way Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Marine Operations.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hydrologic Habitat Modification.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Parks and Open Space.....	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Municipal Building.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stormwater System Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other.....	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**2. Provide the following information about municipal operations good housekeeping programs:**

- Parking Lots Swept (Number of acres X Number of times swept) # Acres 

		1	7	4
--	--	---	---	---
- Streets Swept (Number of miles X Number of times swept) # Miles 

		1	6	7
--	--	---	---	---
- Catch Basins Inspected and Cleaned Where Necessary # 

			9	6
--	--	--	---	---
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

			1	0
--	--	--	---	---
- Phosphorus Applied In Chemical Fertilizer # Lbs. 

				9
--	--	--	--	---
- Nitrogen Applied In Chemical Fertilizer # Lbs. 

	2	0	5	6
--	---	---	---	---
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres 

		2	5	.	2
--	--	---	---	---	---

3. How many stormwater management trainings have been provided to municipal employees during this reporting period? 

				1
--	--	--	--	---

4. What was the date of the last training? 

1	2
---	---

 / 

2	3
---	---

 / 

2	0	2	1
---	---	---	---

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

1	2	8
---	---	---

6. What percent of municipal employees in relevant positions and departments receive stormwater management training? 

	9	5
--	---	---

 %

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Continue current drain cleaning inspection and maintenance practices.

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

During this period, the number of catch basins with sumps that were inspected or cleaned as part of routine operations was 90 which is approximately 26% of the total inventory of catch basins that have sumps on the campus.

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

			1
--	--	--	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Continue current drain cleaning inspection and maintenance practices or modify procedures and practices, as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.



### MS4 Annual Report Form

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

#### 7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Require any new storm drain inspection/cleaning contractors complete SWP2 compliance certifications.

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

During this reporting cycle, the inspections and cleaning of the storm drain system. were performed by 2 contractor entities, who completed the SWP2 compliance certifications.

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

			2
--	--	--	---

(ex.: samples/participants/events)

##### D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes  No

##### E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes  No

##### F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Require any new contractors performing storm drain inspection/cleaning complete SWP2 compliance certification. Modify procedures and practices as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Inspect/assess at least 10 material handling or other areas for potential POCs and SWP2 good housekeeping measures.

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

During this reporting cycle, eleven (11) material handling and other areas were assessed for POCs/SWP2 good housekeeping measures within the scheduled time frames. Areas for improvement were immediately brought to the attention of the cognizant supervisor for correction.

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

		1	1
--	--	---	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Inspect/assess at least ten (10) material handling or other areas for potential POCs and SWP2 good housekeeping measures. Modify procedures and assessment activities as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Perform monthly visual inspections of oil storage tanks as specified by the college oil Spill Prevention Control and Countermeasures (SPCC) plan.

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

During this reporting cycle, visual inspection of each storage tank, specified by the SPCC plan, for oil leaks, condition, and maintenance needs was completed on a monthly basis and recorded.

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

		1	2
--	--	---	---

*(ex.: samples/participants/events)*

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Perform monthly visual inspections of oil storage tanks, as specified by the college SPCC plan. Modify procedures and activities as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

**7. Evaluating Progress Toward Measurable Goals MCM 6**

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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

Increase staff awareness of POCs (floatables, oxygen demanders, pathogens, and phosphorus) and SWP2 practices, including housekeeping through SWP2 training of designated staff.

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

During this reporting cycle, a total of 128 employees received training on POCs and SWP2 practices, including good housekeeping. The cumulative (multi-year) total of relevant staff receiving SWP2 training is approximately 95%.

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

1	2	8
---	---	---

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?**

Yes  No

**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?**

Yes  No

**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Increase staff awareness of POCs and SWP2 practices, including good housekeeping, through SWP2 training of designated staff. Modify procedures and training activities as necessary to align with new/revised requirements that may be contained in the final version of the revised MS4 permit, once it is issued.

### MS4 Annual Report Form

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

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

SPDES ID

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

Name of MS4/Coalition SUNY Buffalo State College

### Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(POC)
<b>NYC EOH Watershed</b>			
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
<b>Onondaga Lake Watershed</b>			
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
<b>Greenwood Lake Watershed</b>			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
<b>Oyster Bay</b>			
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
<b>Peconic Estuary</b>			
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
<b>Oscawana Lake Watershed</b>			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
<b>LI 27 Embayments</b>			
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?  Yes  No  N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?  Yes  No  N/A

If N/A, go to question 3.

If No; estimate what percentage of the conveyance system has been mapped so far.  %

Estimate what percentage was mapped in this reporting period.  %

### MS4 Annual Report Form

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID  

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program?  Yes  No  N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period? 

		0
--	--	---

 %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more?  Yes  No  N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards?  Yes  No  N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading?  Yes  No  N/A

7b. How many projects have been sited in this reporting period? 

--	--	--

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

--	--	--

 %

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

--	--	--

 %

No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands?  Yes  No  N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands?  Yes  No  N/A

**MS4 Annual Report Form**

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

2	0	2	2
---	---	---	---

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

Name of MS4/Coalition 

SUNY Buffalo State College
----------------------------

SPDES ID

N	Y	R	2	0	A	5	0	4
---	---	---	---	---	---	---	---	---

9. Has your MS4/Coalition developed and implemented a program of native planting?  
 Yes    No    N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?  
 Yes    No    N/A
11. Does your MS4/Coalition have a pet waste bag program?  
 Yes    No    N/A
12. Does your MS4/Coalition have a program to manage goose populations?  
 Yes    No    N/A