#### **MS4 Annual Report Cover Page**

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

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

SPI	DES	ID						
N	Y	R	2	0	А	5	4	6

#### **Choose one:**

## ● This report is being submitted on behalf of an individual MS4.

Fill in SPDES ID in upper right hand corner.

Na	me o	of M	IS4																			
Т	0	w	n	0	f	С	a	n	a	n	d	a	i	g	u	a						

#### OR

This rot	nort ic	hoing	submitted	on	hoholf	of o	Single	Entity	<b>K</b> 7
Tims rej	port is	being	Subillitteu	OH	Denan	oi a	Sillgle	Lilling	y

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

Na:	me c	of S1	ngie	e En	tity												

### OR

## ○ This is a joint report being submitted on behalf of a coalition.

Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.

Name	of C	oalit	ion												,								 	
SPDES	S ID						SP	DE:	S ID	)							SPI	DES	ID					
NY	R	2	0	A			N	Y	R	2	: C	) <i>I</i>	A				N	Y	R	2	0	А		
SPDES	SID						SP	DE:	SID	)							SPI	DES	ID					
NY	R	2	0	A			N	Y	R	2	: C	)   2	A				N	Y	R	2	0	A		
SPDES	S ID						SP	DE:	S ID	)							SPI	DES	ID					
NY	R	2	0	А			N	Y	R	2	: C	)   2	7				N	Y	R	2	0	A		
SPDES	SID						SP	DE	SID	)							SPI	DES	ID					
NY	R	2	0	A			N	Y	R	2	: C	)   2	A				N	Y	R	2	0	A		
SPDES	SID						SP	DE:	SID	)							SPI	DES	ID					
NY	R	2	0	A			N	Y	R	2	: C	)   2	A				N	Y	R	2	0	A		
SPDES	SID					,	SPDES ID										SPI	PES	ID					
NY	R	2	0	A			N	Y	R	2	: C	)   Z	A				N	Y	R	2	0	A		

## **MS4 Annual Report Cover Page**

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

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

SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 O A	N Y R 2 O A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 O A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A

## MS4 Municipal Compliance Certification(MCC) Form

		SPL	ES	ш					
Name of MS4 TOWN OF CANANDAIGUA		N	Y	R	2	0	А	5 4	6
E 1 MGA 1 ' MGG C									
Each MS4 must submit an MCC form.									
Section 1 - MCC Identification Page									
Indicate whether this MCC form is being submitted to certify endorseme	nt or ac	cep	tanc	e o	f:				
● An Annual Report for a single MS4									
○ A Single Entity (Per Part II.E of GP-0-10-002)									
○ A Joint Report									
Joint reports may be submitted by permittees with legally be	binding	gag	reeı	mei	ıts.				
If Joint Report, enter coalition name:									
· · · · · · · · · · · · · · · · · · ·								_	

Phone

5 8 5

## MS4 Municipal Compliance Certification(MCC) Form

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

													-					O				$\Box$										
N	ame	e of	M	S4	Tow	n of	Cana	ındai	gua															SPD N	ES Y	ID R	2	0	A	5	4	6
	ecti									ma	ıtio	<u>on</u>																				
In	npoi	rtan	t In	str	ucti	ion	s -	Ple	ase	Re	ad																					
C	onta	ict i	nfc	rm	atio	on 1	nus	st b	e p	rov	ide	d f	or <u>e</u>	acl	<u>h</u> o	f th	e fo	ollo	wi	ng p	pos	itio	ns	as ii	ndi	cat	ed ł	belo	ow:	, •		
1.		inci P-0	•							, C	hie	f E	lec	ted	Of	fici	al c	or o	the	r qı	uali	ifie	d ir	div	idu	ıal	(pei	r				
	A	utho	riz	ed	Re	pre	sen	tati	ive	is s	ign	iing	g th	is f	orn	n)								y be							•	
3.	Tł	ne L	oca	al S	Stor	mv	vate	er P	Pub!	ic (	Coı	ntac	et (1	requ	uire	ed p	er	GP	-0-	08-	002	2 Pa	art '	VII.	A.2	2.c	& F	Part	; <b>V</b> ]	III.	<b>A</b> .2	.c).
4.		ne S ord						_				_			VN.	IP)	Co	orc	lina	tor	(Ir	ıdiv	idu	al r	esp	on	sibl	e fo	or			
5.	Re	epoi	t P	rep	are	er (0	Cor	ısul	ltan	ts r	nay	y pr	ovi	de	cor	npa	any	na	me	in t	the	spa	ice	pro	vid	led)	١.					
	fil		by	the	e sa	me	ino	divi	idua	al. l	f o	ne	ind	ivio	dua	l fi	lls	mu	ltip					ss m vide								
	pr		ded	l an	ıd a	sig	gna	ture	e au	ıtho	riz	atio				_	_							ntac								e
Fo	or ea	ich (	con	tact	, se	lect	all	tha	at aj	ply	<b>7:</b>																					
•	Prir	ncip	al E	Exe	cuti	ve	Off	icer	·/Ch	ief	Ele	ecte	d O	ffic	ial																	
0	Dul	у А	uth	oriz	zed	Re	pre	sent	tativ	'e																						
0	Loc	al S	tor	mw	ate	r Pı	ıbli	c C	onta	act																						
0	Sto	rmw	ate	r M	Iana	agei	nen	t P	rogi	am	(S	WN	(P)	Co	ord	linat	tor															
0	Rep	ort	Pre	par	er																											
																		_														
Fir	st Na		Н	Y											]	MI	1	Las	E E	T	I	12	0	Т	7							
T:4		Т	п	1														141	P	IN	1	K		T								
Tit	О	W	N		S	U	Р	Е	R	V	I	S	0	R																		
	dres	S																														
5	4	4	0		R	0	U	Т	E	S		5		А	N	D		2	0		W	Е	S	Т								
Cit	y																			S	tate	;	Zip	)			_				_	_
С		N	Α	N	D	A	Ι	G	U	A											N	Y	1	4	4	2	4	<b>-</b>	L			
eM			ът		17					m	_	T-7	ът		177		7.	n.T	7.	NT.	Ъ	7	_		<sub>TT</sub>	7\				C		
C	M	E	Ν	Ι	K	0	Т	Z	@	Т	0	W	N	0	F		A	N	Α	N	D	A	I	G	U	Α	•	0	R	G		

County

O N T A R I O

## MS4 Municipal Compliance Certification (MCC) Form

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

																						SPE	DES	ID						
Name of	MS	34 <sup>1</sup>	ow	n of (	Cana	ndai	gua															N	Y	R	2	0	А	5	4	6
Section	ı 3	- P	ar	tn	er	Inf	for	ma	atio	on																				
Did your											to c	com	ple	te s	om	e or	all	per	mit	rec	luir	eme	ents	du	ring	g th	is re	poı	ting	3
period?																											) Ye	s	0	No
If Yes, co	-									ort	nor	In	for	ma	tiot	nn	ovi	daa	ı in	ot1	or	for	ma	ta v	.;:11	no	t ha			
accep		_							_							_												;		
coalit			-				_																							
If No, pro	oce	ed t	o S	Sect	tion	4 ·	- C	erti	fica	atio	n S	Stat	eme	ent																
Partner/Co	aliti	on N	lam	ie																										
C A N	A	N	D	A	I	G	U	A		L	А	K	Ε		W	А	Т	Ε	R	S	Н	Ε	D		С	0	U	N	C	I
Partner/Co	aliti	on N	Jan	ne (c	on't	.)							1									SPI	ES	Par	tne	r ID	- If	app	lica	ble
L -		K	Ε	V	I	N		0	L	V	A	N	Y									Ν	Y	R	2	0				
Address																														_
2 5 0		S	Α	L	Т	0	N	S	Т	A	L	L		S	Т	R	Ε	Ε	Т											
City				1	1														ate		Zip							$\overline{}$		$\overline{}$
CAN	A	N	D	A	I	G	U	А										N	1 7	-	1	4	4	2	4	-				
eMail				I				_				l _			l		_					_						$\neg$		$\neg$
K L O	@	С	Α	N	А	N	D	A	Ι	G	U	А	N	Ε	W	Y	0	R	K	•	G	0	V							
Phone		<b>\</b>			_	]		_			1							_	-		-	_					danc			
( 5 8	5	)	3	9	6	-	3	5	3	0							wit	h G	P-0	-08	-002	2 Pa	rt IV	/.G	.?		Ye	S	0	No
What tas	ks/r	esp	on	sib	iliti	es	are	sha	irec	l w	ith	this	s pa	rtn	er (	(e.g	. M	M.	1 S	cho	ol I	Pro	gra	ms	or	Μu	ltip	ole '	Гas	ks)'
• MM1	М	U	L	Т	I	Р	L	Е		Т	А	S	K	S																
<ul><li>MM2</li></ul>	М	U	L	Т	I	Р	L	E		Т	А	S	K	S																
				L																							$\overline{}$	$\exists$		_
• MM3	М	U	L	Т	I	Р	L	Ε		Т	A	S	K	S													=	$\exists$		
• MM4	М	U	L	Т	I	Р	L	E		Т	А	S	K	S																
• MM5	М	U	L	Т	I	Р	L	E		Т	А	S	K	S																
<ul><li>MM6</li></ul>	М	U	L	Т	I	Р	L	E		Т	А	S	K	S														$\Box$		
Addition	al te	ack	c/r	een	one	ihi	litic	) C									'												'	
O Wate				•					am	, <b>D</b> .	a st	Ma	na	7.014	1011	+ D1	. a o t	tion	g r	NO II	iroc	1 fo	r 1/	rc /	c i1	, in	<b>an</b> o	irod	ı	
wate														;ell	icil	. 1 /	ші	ice	s 10	-qu	11 50	ı 10	1 1V.	194	o II	1 111	ıpa.	ıı CC		

### MS4 Municipal Compliance Certification(MCC) Form

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

		_	SPI	DES	S ID						
Name of MS4 Town of Ca	anandaigua		N	Y	R	2	0	A	5	4	6
Section 1 Contific	ootion Statement										
Section 4 - Certific	cauon Statement										

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

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

First Name	MI	Last Name
C A T H Y		M E N I K O T Z
Title (Clearly print title of individual <u>signing</u> report)		
T O W N S U P E R V I S O R		
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

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

_		SPL	DES	ID						
Name of MS4/Coalition	Town of Canandaigua	N	Y	R	2	0	А	5	4	6
Traine of Mist Coantion	Town of Canandaigua	N	Y	R	2	0	A		4	6

Water Quality Trends													
On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report?													
On behalf of a coalition													
1. Has this MS4/Coalition produced any reports documenting water quality trends													
related to stormwater? If not, answer No and proceed to Minimum Control Measure One.  • Yes	○ No												
Yes, choose one of the following  Report(s) attached to the annual report													
Report(s) attached to the annual report  Web Page(s) where report(s) is/are provided below													
Report(s) attached to the annual report													
Web Page(s) where report(s) is/are provided below													
Web Page(s) where report(s) is/are provided below  Please provide specific address of page where report(s) can be accessed - not home page.  URL													
Web Page(s) where report(s) is/are provided below Please provide specific address of page where report(s) can be accessed - not home page.													
canandaigualake.org/publicat	io												
URL													
URL													
	_												

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

Name of MS4/Coalition Town of Canandaigua	SPDES ID   N   Y   R   2   0   A   5   4   6
Minimum Control Measure 1. Public Ed	ucation and Outreach
The information in this section is being reported (check one):  On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?	
1. Targeted Public Education and Outreach Best Manageme	ent Practices
Check all topics that were included in Education and Outreach de	uring this reporting period:
<ul><li>Construction Sites</li></ul>	• Pesticide and Fertilizer Application
● General Stormwater Management Information	Pet Waste Management
<ul> <li>Household Hazardous Waste Disposal</li> </ul>	<ul><li>Recycling</li></ul>
O Illicit Discharge Detection and Elimination	Riparian Corridor Protection/Restoration
● Infrastructure Maintenance	<ul><li>Trash Management</li></ul>
○ Smart Growth	O Vehicle Washing
○ Storm Drain Marking	<ul><li>Water Conservation</li></ul>
● Green Infrastructure/Better Site Design/Low Impact Development	• Wetland Protection
• Other:	○ None
<ul><li>Other</li><li>2. Specific audiences targeted during this reporting period:</li></ul>	
● Public Employees   ● Contractors	
● Residential ● Developers	
● Businesses ● General Public	
○ Restaurants ○ Industries	
● Other: ● Agricultural	
S c h o o l s Other	

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

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

SPDES ID

Name	of M	IS4/	Coa	litio	on_T	own	of C	anar	ıdaigı	ua													N	Y	R	2	0	А	5	4	6
3. V	Vha his 1														e to	ac	chie	eve	edı	uca	tio	n a	nd	ou	tre	ach	go	als	du	rin	ıg
O Co	nstr	ucti	on S	Site	Op	era	tors	s Tı	rain	ed													i	# Tr	ain	ed					
• Di	rect	Ma	ilinį	gs																			#	Ma	ilin	gs		3	0	5	5
• Ki	osks	or	Oth	er I	Disp	olay	/S																#]	Loca	atio	ns					6
• Lis	st-Se	rve	s																					# I	n Li	ist		1	2	9	5
• Ma	ailing	g Li	ist																					# I	n Li	ist			9	7	5
<ul><li>Ne</li></ul>	wsp	ape	r Ao	ds c	or A	rtic	eles																#]	Day	s Rı	ın				2	4
• Pu	blic	Ev	ents	/Pr	esei	ntat	ions	S															# /	Atte	nde	es			8	9	0
• Sc	hool	Pro	ogra	ım																			# /	Atte	nde	es		2	4	0	0
● TV	/ Sp	ot/P	rog	ran	1																		#]	Day	s Rı	ın				3	0
• Pri	inted	M	ater	ials	:																To	otal	# D	istri	bute	ed			5	0	0
	Loca	tion	s (e.	.g. li n		ries, H	tow	n of	ices	, kio	sks)																				
	L	i	_	r		r	У	_																							
	S	0	i	1		a	n	d		W	a	t	е	r		0	f	f	i	c											
				_				_						_			_		=												
• Ot	L her:																														
	W	a	t	е	r	s	h	е	d		В	n	d		S	i	g	n	s												
• Wo		age			ovid edec		peci	ific	wel	b ac	ldre	esse	S - 1	not	hor	ne p	oage	e. (	Con	tinu	ie o	n ne	ext	pag	e if	ado	litio	onal	l sp	ace	is
UF		n	a	n	d	a	i	g	u	а	n	е	w	У	0	r	k		g	0	v	/	v	е	r	t	i	С	а	1	/
s	3 i	t	е	s	/	%	7	В	А	3	8	8	F	0	5	2	-	Е	1	В	1	_	4	С	A	4	-	8	5	2	7
-	- A	8	В	В	4	6	3	2	0	В	В	9	%	7	D	/	u	р	1	0	a	d	s	/	W	a	t	е	r	R	е
UF	RL																														
Ċ	l o	С	s		W	i	х	s	t	a	t	i	С		С	0	m	/	u	g	d	/	a	5	С	0	С	d		a	3
ē	b	4	b	а	С	f	8	8	f	4	f	1	8	9	8	d	d	3	8	4	3	5	С	6	0	е	5	0	С	•	р
Ċ	l f																														

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

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

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

		SPL	)ES	Ш						
Name of MS4/Coalition	Town of Canandaigua	N	Y	R	2	0	А	5	4	6

#### 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.

The goals of the Public Education and Outreach are to continue to provide public presentations to local community groups, to continue the Watershed Education Program to educate school children, to update educational materials in print and on websites, and to maintain educational kiosks with information on stormwater.

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

The Town and City of Canandaigua are partnering on a new lawn care education initiative. For the first phase, the initiative is targeting large land owners for education. The Watershed Education Program reached approximately 1950 students and distributed the WEP Mini Newsletter. The educational kiosks were maintained, and the Town and the Watershed Council put more stormwater content on their websites. Multiple presentations were given on water quality. The Association

C. How many times was this observation measured or evaluated in this reporting period			_		_	_		_		_	
C. HOW many unles was this observation measured of evaluated in this reporting period	"	How mony	times w	ac thic abo	arvation	mangurad	OF	avaluatad	in thi	roporting	noriod?
	v.	many many	umes wa	ลร นมร บบร	ei vauoii	measureu	UI (	evaruateu	III UIII	չ է Երսէ այլջ	periou:

			1	2	
samp	les/	'part	ici	pant	s/events

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

• Yes O No

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

● Yes ○ No

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

The Town plans to continue working on the lawn care education initiative with their partners. The Town will use its list serve to get information out to the public. The Town and Watershed Council's websites will be enhanced with more MS4 related material. Presentations will be given to the public. The school education program will continue.

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

																	_			SPI	DES	ID						
Name of MS4/C	oaliti	on	Town	ı of (	Canar	ndaig	gua													N	Y	R	2	0	А	5	4	6
]	Min	in	<u>nur</u>	n (	Cor	<u>ıtr</u>	ol I	M	eas	ur	e 2	2. I	Pu	bli	c Iı	1V(	olv	en	en	t/F	ar	<u>tic</u>	ip2	<u>itic</u>	<u>)n</u>			
The informati	on in	th	iis so	ecti	on i	s be	eing	re	por	ted	(ch	eck	on	e):														
<ul><li>On behalf of</li><li>On behalf of</li></ul>					MS	54																						
	How				S4s	co	ntri	ibu	ted	to	this	s rej	poı	rt?														
1. What op developr (SWMP)	nent	, e	evalı	uat	ion	an	d iı	mp	rov	en	nen	t of	th	ie S	tor	mw	at	er I	Mai	nag					ran	n		
O Cleanup Ev	vents																				# E	even	ıts					
Comments	on S	W]	MP	Rec	eive	ed														# C	Comi	men	ıts					0
<ul><li>Community</li></ul>	Hot	lin	ies										P	hon	e#	(	5	8	5	)	3	1	5	-	3	0	8	8
Phone #	5	8	5	)	3	9	4	-	1	1	2	0	P	hon	e#	(	5	8	5	)	3	9	6	-	3	6	3	0
Phone #				)				- [					P	hon	e#	(				)				_				
Phone #				)				-					P	hon	e#	(				)				-				
Phone #				)				-					P	hon	e#	(				)				-				
Phone #				)				-					P	hon	e#	(				)				-				
<ul><li>Community</li></ul>	Me	etii	ngs					•												# .	Atte	nde	es			2	1	2
O Plantings																					S	Sq. F	₹t.					
O Storm Drai	n Ma	ırk	ings																		# D	Orai	ns					
<ul><li>Stakeholder</li></ul>	Me	eti	ngs																	# .	Atte	nde	es			1	8	0
• Volunteer	Moni	tor	ring																		# E	Even	ıts				4	6
Other: E	СВ		,	brack	D	r	a	i	n	а	g	е		С	0	m	m	,		В	0	a	r	d				
2. Was pub Program								•		his	s an	nua	al 1	rep	ort	and	d S	tor	mv	vate	er N	Лa	nag	•	ent Ye		0	No
O List-Serve																					# I	n Li	ist					
O Newspaper	Adv	ert	tisinş	g																#	Day	s Rı	ın					
○ TV/Radio 1	Notic	es																		#	Day	s Rı	ın					
• Other: D	e v	6	e   1	0	р	m	е	n	t		0	f	f	i	С	е												

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

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

SPDES ID

ame	of M	S4/	Coa	litio	n T	own	of C	anan	daig	ua													N	Y	R	2	0	А	5	4	6
. U																															
	leas					eci	fic	ad	dre	ess(	es)	wh	ier	e ne	otic	e(s	) ca	an l	be a	acc	ess	ed	- ne	ot h	on	ie p	oag	e.			
UR	L																														
t	0	W	n	0	f	С	a	n	a	n	d	a	i	g	u	a	٠	0	r	g	/	р	a	g	е	٠	a	s	р	?	i
d	=	1	0	4																											
UR	L			ı																				ı							
UR	L			I				1						1				ı					1	I	ı						ı
UR	L																														
UR	L																														
UR	L																														
UR	L								-																						

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

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

SPDES ID

ne of MS	1/Coa	litio	n To	own	of C	anan	daig	ua													N	Y	R	2	0	A	5	4
URL(s) Please	) con	ı't.:							es)	wł	iero	e no	otic	es	can	ı be	ac	cces	sed	<b>l</b> - 1	not	ho	me	pa	ige.			
JRL						1							1										_			_	_	1
																										Т		
JRL	-	<b>  </b>			ļ	L		<b>!</b>	ļ		-		ļ	ļ				I										<u> </u>
																										Т	П	
JRL																												
																												$\vdash$
JRL																												
																												<u> </u>
	+																							H		$\vdash$	H	_
JRL																										П	$\overline{}$	
																										L	H	_
																								L		L		_
JRL										1																_		
																										<u> </u>		
JRL																												
																								L				

Name of MS4/Coalition Town of Canandaigua

## **MS4 Annual Report Form**

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

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 4

3. W	/ ne: rog				-													•						M	ana	age	me	nt			
	nter hetl																													d	
• MS	4/C	oali	itio	n O			•													Rep			•	. •		Plar			Con	nme	ents
	Dep T	artr 0	nen W	t n		D	е	v	е	1	0	р	m	е	n	t		0	f	f	i	С	е								
	Ado			11		טו		V	_			Р	111	_	11	L							C								ш
	5	4	4	0		R	0	u	t	е	s		5		а	n	d		2	0		W	е	s	t						
	City																	Г.				Zip									
	C	a	n	a	n	d	а	i	g	u	a							Ŀ	N	Y		1	4	4	2	4	-				
	Pho	пе 5	8	5	)	3	1	5	_	3	0	8	8																		
○ Lib	rary				,				J		<u> </u>			ļ			) <b>A</b>	nnu	ıal ]	Rep	ort	(	) S'	WN	1P 1	Plar	1	0 (	Con	nme	ents
	Ado	lres	S																												
	L City	7																				 Zip									
																											_				
	Pho	ne															J	L													
	(				)				_																						
○ Oth	er																) <b>A</b>	nnu	ıal l	Rep	ort		) S	WN	1P l	Plar	ı	$\circ$	Con	nme	ents
	Add	lres	S																												
	L City	7																				Zip									
																											_				
	Pho	ne															J	_													
	(				)				-																						
• We	b Pa	ige	UR	L:													A	nnu	ıal 1	Rep	ort		S	WN	1P 1	Plar	1	• (	Con	nme	ents
	t	0	W	n	0	f	С	а	n	a	n	d	a	i	g	u	a		0	r	g	/	р	a	g	е		a	s	р	?
	i	d	=	1	0	4																									
	Ple	ase	pr	ovi	de	spe	cif	ic a	ddı	ress	of	pa	ge v	whe	ere	rep	ort	cai	ı be	e ac	ces	sec	l - r	ot	hor	ne	pag	je.			
○ eM																													Con	nme	ents

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

	_	SPL	DES	ID						
Name of MS4/Coalition Town of Canandaigua		N	Y	R	2	0	Α	5	4	6
4.a. If this report was made available on the internet, what da	ate was it	po	ste	ed?						
Leave blank if this report was not posted on the internet.		5	/	0	3	/	2	0	1	9
4.b. For how many days was/will this report be posted?								3	6	5
If submitting a report for single MS4, answer 5.a If submitt	ing a join	ıt re	epo	ort,	ans	we	r 5.	b		
5.a. Was an Annual Report public meeting held in this report	ing perio	d?					Ye	es	0	No
If Yes, what was the date of the meeting?	0	6	/	0	5	/	2	0	2	0
If No, is one planned?						С	Ye	es	0	No
5.b. Was an Annual Report public meeting held for all MS4s	contribu	tin	g t	o tl	nis	rep	ort	dı	ırir	ıg
this reporting period?						С	Ye	es	0	No
If No, is one planned for each?						С	Ye	es	0	No
<b>6.</b> Were comments received during this reporting period? If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.						С	Ye	es	•	No

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

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

		SPL	<u>DES</u>	ID						
Name of MS4/Coalition	Town of Canandaigua	N	Y	R	2	0	А	5	4	6

#### 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.

One goal is to maintain public involvement through various Town Boards, Committees and stakeholder groups. Additional goals were to maintain Local Stormwater Public Contacts and Coordinator, continue updating the Town website, and to continue community involvement in drain marking and clean up events.

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

The public stayed involved in stormwater management through discussions at public meetings and presentations. The Drainage Committee, consisting of residents and Town staff, continues to meet bimonthly to discuss stormwater issues. Volunteers monitored water clarity and water quality. The Watershed Program acted as a key contact for stormwater for the public. The Town website was updated.

C. How many times was this observation measured or evaluated in this reporting p	eriod?
--	--------

			1	0	
gamn	100/	'nart	ici	nant	c/events

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

• Yes O 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).

Storm drain marking will be completed in sections of the MS4. In addition, stakeholders will continue to be encouraged to discuss stormwater at Town Board meetings and to continue work in the Town Environmental Conservation Board and on the Drainage Committee. Community Hotlines will be maintained. Partnerships with the Watershed Council and Association to engage the public in volunteer events and monitoring will continue.

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

		SPDES	ID				
Name of MS4/Coalition Town of Canandaigua		N Y	R 2	0 A	5	4	6
Minimum Control Measure 3.	Illicit Discharge Detecti	ion an	d El	imina	atio	<u>n</u>	
The information in this section is being reported (	check one):						
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition</li> <li>How many MS4s contributed to the</li> </ul>							
1. Enter the number and approx. percent	of outfalls mapped:	6	2 #	! 1	. 0	0	]%
2. How many of these outfalls have been so reporting period (outfall reconnaissance	_	scharg	es du	ring t	his	2	2
3.a. What types of generating sites/sewershe reporting period?	eds were targeted for inspec	ction d	uring	g this			
O Auto Recyclers	• Landscaping (Irrigation)						
O Building Maintenance	<ul><li>Marinas</li></ul>						
○ Churches	O Metal Plateing Operations						
<ul> <li>Commercial Carwashes</li> </ul>	Outdoor Fluid Storage						
O Commercial Laundry/Dry Cleaners	<ul><li>Parking Lot Maintenance</li></ul>						
<ul><li>Construction Vehicle Washouts</li></ul>	O Printing						
O Cross-Connections	O Residential Carwashing						
O Distribution Centers	<ul><li>Restaurants</li></ul>						
O Food Processing Facilities	O Schools and Universities						
<ul> <li>Garbage Truck Washouts</li> </ul>	• Septic Maintenance						
O Hospitals	<ul><li>Swimming Pools</li></ul>						
O Improper RV Waste Disposal	<ul><li>Vehicle Fueling</li></ul>						
O Industrial Process Water	• Vehicle Maint./Repair Sho	ops					
• Other:	○ None						
Stormwater Ma	n a g e m e n t	Fa	c i	1 i	t	i	е
O Sewersheds:							$\overline{}$
					1		

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

																						SPL	JES	ID						
Name o	f MS	4/Coa	litic	on T	own	of C	anan	daigı	ıa													N	Y	R	2	0	А	5	4	6
3.b.V	Vhat	t type	es o	f ill	lici	t di	iscł	ıar	ges	ha	ve	bee	en f	ou	nd	du	rin	g tl	nis I	rep	ort	ting	g pe	erio	od?					
O Bro	ken 1	Lines	Fro	om S	San	itar	y S	ewe	r			0	Ind	ustr	ial	Co	nne	ctio	ns	-			-							
O Cro	ss C	onne	ction	ns								0	Infl	OW/	/Inf	iltra	itio	n												
• Fail	ing S	Septio	Sy	ster	ns							0	Pun	np :	Stat	ion	Fai	ilur	e											
O Floo	or D	rains	Cor	nnec	ted	То	Sto	orm	Se	wer	s	0	San	itar	y S	ewe	er C	)ve	rflo	ws										
O Illeg	gal I	Dump	ing									0	Stra	aigh	nt P	ipe	Sev	ver	Dis	cha	rge	s								
Oth	er:											0	Noi	ne																
4. H	ow 1	many	v ill	icit	di	sch	arg	es/	' <b>n</b> o1	ten	tial	ill	ega	ıl c	onr	nec1	tior	ıs k	av	e b	een	de	etec	ted	l dı	ıriı	าฮ 1	this	<b>:</b>	
		ting						<b>5</b> 00,	P				-8-					-0 -									8			1
																													_	
5. H	ow 1	many	y ill	icit	di	sch	arg	ges	ha	ve l	oee	n c	onf	irn	ned	l dı	ıriı	ng t	his	re	poi	tin	gr	eri	od	?				1
6. H	OW 1	many	7 <b>ill</b>	icit	di	sch	aro	56S/	'ille	ิซลไ	l co	nn	ecti	ion	c h	ave	he	en	eliı	mir	nate	ad a	dur	inc	s th	is 1	ren	ort	ino	ī
	erio	•	, 111	ıcı	, ui	JCII	E	5001	1110	Sui		,1111	ccu		.5 11				CIII		ıuv	·u·	uui	1116	, 111	115	·cp			1
7. H	as t	he st	orn	1 Se	we	rsh	ed	ma	nn	ino	, he	en	വ	nn	let <i>e</i>	i h	n f	his	rer	or	tine	σn	eri	od?	,	0	Ye		•	No
		appr								_				_					_			_		ou.				2	0	9
0 1	41	,		c		4•			••				CO.													_	•			J
8. Is		abov s info																									Ye Ye		0	
		, pro																										,5		110
Pl€ URL		prov	ide	spe	cif	ic a	ıddı	ess	of	paş	ge v	whe	ere	ma	p(s)	) ca	n b	e a	cce	sse	d -	not	ho	me	pa	ge.				
t		wn	0	f	С	а	n	a	n	d	a	i	g	u	a		0	r	g	/	р	a	g	е		a	s	р	?	i
d	=	1 2	8																											
URL																														

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

																	1			SPI	DES	ID					
ne of MS	4/Coa	litior	Tow	n of C	Canan	daigu	ıa													N	Y	R	2	0	А	5	4
URL(																											
Please	e pro	vide	spe	cifi	c ad	ldre	ess	of	paş	ge v	vhe	ere	ma	p(s	s) c	an	be	acc	ess	ed	- n	ot l	hon	ne j	pag	ţe	
URL					1																						
JRL						1 1												ı									
											<u> </u>					<u> </u>	<u> </u>			<u> </u>	<u> </u>	_			$\vdash$	H	
JRL												ı															
																											ì
			T																				Ī				
				+	+																	H	<u> </u>		_		_
JRL																											
																											il.
					T																						
					1								<u> </u>									_	<u> </u>		$\vdash$		
URL																											
					i																	_	<u> </u>				
					<u> </u>																	_	<u> </u>		$\vdash$	$\sqsubseteq$	
																											1
Has a	n ID	DE 1	law	hoo	n o	lan	tad	f o	ro	ack	tr	adi	itio	nal	M	21	on,	1/aı	r h	0.170	ID	n	7 m	roc	Alı	ıraı	a h
appro																					11)		ı Pı		Υe		C
PF-										-				6				r								,,,	Ŭ
If Yes	. has	eve	rv t	radi	itio	nal	MS	<b>S4</b> (	con	tri	but	ting	2 to	thi	is r	epo	ort	cer	tifi	ied	tha	at t	his	lav	v is	;	
equiva			-									•	<i>.</i>			1						O Y			) <b>N</b>		0
-																											
What	perc	ent	of st	aff	in 1	·ele	var	nt r	osi	itio	ns	and	d de	epa	rtn	ner	nts	has	re	cei	ved	IJ	DI	E tr	air	ning	<u>.</u> ?
	r C		J_ 51					L	- 551			·		· I	•					1				_ •1	1		Ť
																									L		(

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

n suomitti	ing time form as part of	a joint report on	ochan or a co	Jantion Icave 5	I DES ID GIAIIN	
				SPDES		
Name of MS4/Coalition	Town of Canandaigua			N Y	R 2 0 A 5	5 4 6
12. Evaluating Pro	gress Toward Meas	surable Goals N	MCM 3			
identified in your St	oort on your progress tormwater Managem itional pages as need	ent Program Pla		-	_	ı Part
A. Briefly summar	rize the Measurable	e Goal identifie	d in the SW	MPP in this	reporting per	riod.
Majority of outfalls	incil continues to mas s have been inspected ities should be mapp	d during spring	of 2020. Ad			
B. Briefly summar Goal.	rize the observation	s that indicated	d the overal	l effectivenes	s of this Mea	surable
parcel owners. Con	law adopted in 2018 mpliance and inspect routinely inspects sy	tion reports are	routinely red	eived at the d	levelopment o	ffice.
C. How many time	es was this observat	tion measured (	or evaluate	d in this repo	rting period?	
C. 110 W many time	es was this object var	non measured	or evariates	и пт спів теро	rung periou.	1 2
					(ex.: samples/pa	
D. Has your MS4	made progress towa	ard this measu	rable goal d	luring this re		
_ ·			<b>6</b>	···	• Yes	
E. Is your MS4 on	schedule to meet t	he deadline set	forth in the	SWMPP?		
J					Yes	$\bigcirc$ No
•	rize the stormwater ing cycle (including	-		_	this MCM du	ıring
2020-2021. Counci	nunicipalities and entil will expand mapping will send out more	ng of watershed	s along the	ake. Wastewa		

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

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

_		SPL	)ES	Ш						
Name of MS4/Coalition	Town of Canandaigua	N	Y	R	2	0	А	5	4	6

### <u>Minimum Control Measures 4 and 5.</u> Construction Site and Post-Construction Control

	<b>Construction Site and Post-Construction Control</b>		
Th	e information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
1a	. Has each MS4 contributing to this report adopted a law, ordinance or other remechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?	•	
1b	o. Has each Town, City and/or Village contributing to this report documented the equivalent to a NYSDEC Sample Local Law for Stormwater Management and Sediment Control through either an attorney cerfification or using the NYSDE Analysis Workbook?	Erosion	
	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local La © 09/2004 • 0	aw. 03/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	○ No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) ha reviewed in this reporting period?	ve been	5
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of procomments related to construction SWPPPs?  • Yes	ublic ○ No	O NT
	If Yes, how many public comments were received during this reporting period?		0
5.	Does your MS4/Coalition provide education and training for contractors about SWPPP process?	t the loca • Yes	al ○ 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:

<ul><li>Notices of Violation</li></ul>	#			1	O No Authority
• Stop Work Orders	#			1	O No Authority
O Criminal Actions	#				O No Authority
○ Termination of Contracts	#				O No Authority
O Administrative Fines	#				O No Authority
O Civil Penalties	#				O No Authority
O Administrative Orders	#				O No Authority
O Enforcement Actions or Sanctions	#				
Other	#				O No Authority

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

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

SPDES ID

Nar	ne of MS4/Coalition	n To	ov	W	vr	1 01	î Ca	nan	daig	ţua ——														N		Y	R	2	0	A	5	4	4	6
	Minimum C	Coı	n	1	t	<u>r(</u>	<u>əl</u>	<u>M</u>	ea	ıSU	ıre	<u>4.</u>	. (	<u>Co</u>	ns	tr	<u>uct</u>	ion	ı Si	<u>ite</u>	St	orı	my	wa	<u>ite</u>	<u>er</u>	Rı	un	<u>off</u>	<u>C</u>	<u>on</u>	tr	ol	Į.
The	e information in th	nis	S	se	e	cti	on	is	be	ing	; rep	por	rted	d (c	chec	ck (	one)	:																
	On behalf of an ind On behalf of a coal How m	ıliti	io	Ol	n					ntri	but	ted	l to	o th	iis 1	rep	ort'	? [																
1.	How many cons	ıstı	rı	ı	u	ct	ioı	n p	ro	jec						•			ed 1	for	· di	stu	rb	an	ce	s (	of (	ne	ac	re	<b>or</b> !	m	ore	е_
	during this rep	or	t	ti	ii	ıg	p	eri	od	l <b>?</b>																								8
2.	How many cons during this repo							-		•	ets (	dis	stu	ırbi	ing	g at	t lea	ast (	one	a	cre	we	re	ac	:tiv	ve	in	yo	ur,	jur	isd			<b>n</b> 9
3.	What percent of										ıcti	ion	ı si	ites	s w	erc	e in	spe	cte	d d	luri	ing	th	is	re	pc	orti	ng	pe	rio	∟ d?		<u>-</u>   1 C	
	•																	•				0				•		0	•	1	0	_		%
4.	What percent of	of	a	a	c	ti	ve	co	ns	tru	ıcti	ion	ı si	ites	s w	ere	e in	spe	cte	d n	nor	e tl	ha	n o	)n(	ce'	?			_		(		T۱
																														1	0		0	%
5.	Do all inspector Construction S							_	•									con	tril	but	ting	g to	th	is	re	-	ort • Y			he I O N			1 C	νT
6.	Does your MS4 (SWPPs) of co								-			-																			Pla	an	ıs	
	T0 3.504	<b>.</b> .	,				_		••				a		<b>.</b>		•										Y			O N			1 C	١T
	If your MS4 is public review?		0	)]	n	[ <b>-</b> ]	ľr	adi	ıtı(	)na	ıl, a	are	e S	W	ΥY	<b>'P</b> S	of	con	str	uct	ion	pr	oj:	ect	SI	ma	ade	e av		lab Y			r () ]	No

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

														1			SPI	DES	ID						_
e of MS4/Coali	tion	wn of C	ananda	nigua													N	Y	R	2	0	A	5	4	6
con't.: Submit addit	ional	pages	s as r	neede	ed.																				
IS4/Coalition	Office	•																							
Department																									_
	a n c	d a	i	g u	a		Т	0	W	n		Η	a	1	1										
Address	\ \ \ \ \ \ \	D a			_		_				d		2			T.T		_	_						Τ
5   4   4   0 City		R o	u t	е	s		5		а	n	a		2	0		W Zip	е	S	t						L
Cana	a n c	da	i	y u	а							N	I Y			2.ip	4	4	2	4	_				Γ
Phone												_													_
( 5 8 5	5)	3 9	4	- 1	1	2	0																		
ibrary																									
Address																									Т
																7.									
City												Г	Τ			Zip					_				Τ
Phone																									_
(	<b>)</b> [			<b>-</b> [																					
other	_																								
Address																									
City													_	7		Zip									
																					-				
Phone																									
				• L_																					
Veb Page URL	(s):	Pleas	e pro	ovide	spe	ecifi	c a	ddre	ess	whe	ere :	SW	PPI	Ps c	an	be a	acce	esse	d -	not	hoı	ne j	pag	e.	
URL																									Г
	+	$\frac{1}{1}$	<u> </u>	+																			_		_
																							_		
URL																									1
		$\dashv \dashv$		+																					Ħ

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

n saonnan	ing tims form as part of a	joint report on benar	i oi a coantioi	I ICAVE SI DE	) ID blank.	•
				SPDES ID		
Name of MS4/Coalition	Town of Canandaigua			N Y R 2	2 0 A 5	4 6
7. Evaluating Pro	gress Toward Measu	rable Goals MCM	14			
identified in your St	oort on your progress as tormwater Managemer itional pages as needed	nt Program Plan (S		-	-	Part
A. Briefly summar	rize the Measurable (	Goal identified in	the SWMPP	in this repo	rting per	iod.
Engineering, Water prior to approval. T	mprehensive plan reviews the Council, Town Earlie Town maintains a seement routinely inspec	Boards, Environme thorough database	ntal Boards, a or SWPPPs a	and Develop	ment Staff	f,
B. Briefly summar Goal.	rize the observations	that indicated the	overall effe	ctiveness of	this Meas	surable
received and review	aining a database of in wed during this reporting sites. More effort will	ng period. The Tov	vn completes	weekly insp	ections of	all
C. How many time	es was this observation	on measured or ev	aluated in th	nis reporting	g period?	
						1 2
<b>D T T T C C C C C C C C C C</b>	•				samples/par	
D. Has your MS4	made progress towar	d this measurable	goal during	this report	0 1	
<b>.</b>			~	<b>5</b> DD0	• Yes	○ No
E. Is your MS4 on	schedule to meet the	e deadline set fortl	n in the SWN	MPP?	<b>A V</b>	O N -
•	rize the stormwater a ing cycle (including a	-	_	oals of this	• Yes  MCM du	○ No ring
	tinue to partner with the Project review by all a improved.		_	•	· .	

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

								SPI	DES ID			
Jame of MS4/Coalition Town of Canandaigue								N	Y R	2 0	) A !	5 4 6
<u>Minimum</u>	Control Meas	<u>ure 5.</u>	Pos	st-Con	<u>strı</u>	<u>ıcti</u>	on Sto	rmw:	ater N	<u>⁄Ian</u>	agem	<u>ient</u>
The information in th	is section is being	reporte	d (ch	eck one	):							
● On behalf of an inc ○ On behalf of a coal How m		outed t	o this	s report	?							
1. How many and w MS4/Coalition in	what type of post- nventoried, inspec						_	_		has y	your	
	]	# Invento	ried	Insp	# ectio	ns		'imes itained				
O Alternative Practic	es											
● Filter Systems			1			1						
• Infiltration Basins			7			7						
Open Channels												
Ponds		7	2		1	7						
O Wetlands												
Other												
, •	ons and maintai	nance?	,	·	-				-		• Yes	
3. What types of a Development/B	non-structural p setter Site Design						_		Low In	npac	et	
<ul><li>Building Codes</li></ul>	<ul><li>Municipal Cor</li></ul>	nprehei	nsive	Plans								
<ul><li>Overlay Districts</li></ul>	Open Space Pr	reservat	ion P	rogram								
● Zoning	• Local Law or	Ordinaı	nce									
○ None	• Land Use Reg	ulation	/Zoniı	ng								
<ul><li>Watershed Plans</li></ul>	• Other Compre	hensive	Plan									
Other:												

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

		SPI	DES II	)					
Nar	me of MS4/Coalition Town of Canandaigua	N	YR	2	0	А	5	4	6
4a.	. Are the MS4s contributing to this report involved in a regional/w	atershed v	vide p	lanr	ning	eff	ort	?	
						Ye	es	0	No
4b.	. Does the MS4 have a banking and credit system for stormwater n	manageme	nt pra	ctic	es?				
					С	Ye	es		No
4c.	Do the SWMP Plans for each MS4 contributing to this report included and approval of banking and credit of alternative siting of a storm	-							
			Ü		-	Ye			No
4d.	. How many stormwater management practices have been implement of the reporting period?	ented as p	art of	this	sys	ten	ı in	thi	s
5.	What percent of municipal officials/MS4 staff responsible for protraining on Low Impace Development (LID), Better Site Design (1)	_				atte	nde	ed	
	Infrastructure principles in this reporting period?	_~_ / ******						0	%

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

Name of MS4/Coalition Town of Canandaigua N Y	IC ID
Name of MS4/Coalition Town of Canandaigua	
	R 2 0 A 5 4 6
5. Evaluating Progress Toward Measurable Goals MCM 5	
Use this page to report on your progress and project plans toward achieving meadentified in your Stormwater Management Program Plan (SWMPP), including II.C.1. Submit additional pages as needed.	_
A. Briefly summarize the Measurable Goal identified in the SWMPP in thi	is reporting period.
New and existing stormwater management facilities have been added to databa standardized on project close-out documents and stormwater management agre parcel/project owners. Drainage easements have been recorded to permit Town existing facilities. Funding sources have been established to maintain existing facilities.	ements with inspections on
B. Briefly summarize the observations that indicated the overall effectiven Goal.	ess of this Measurable
Highway department routinely monitors and cleans Town ponds and stormwater facilities. Several SPDES permits have been terminated during this reporting product documentation is in place. Maintenance agreements have been filed with Country	period, and all
C. How many times was this observation measured or evaluated in this rep	porting period?
	1 2
	(ex.: samples/participants/ev
N TT N/C/4 1 4 1410 11 17 4 47 4	reporting period?
J. Has your MS4 made progress toward this measurable goal during this i	. 0.
	• Yes O No
	• Yes O No
<ul><li>D. Has your MS4 made progress toward this measurable goal during this remainder.</li><li>E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?</li><li>F. Briefly summarize the stormwater activities planned to meet the goals of the next reporting cycle (including an implementation schedule).</li></ul>	● Yes ○ No  • Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?  F. Briefly summarize the stormwater activities planned to meet the goals of	● Yes ○ No  • Yes ○ No  • f this MCM during

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

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

	SPD	ES	ID						
Name of MS4/Coalition Town of Canandaigua	N	Y	R	2	0	A	5	4	6

#### 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
Operation/Activity/Facility
performed within the past 3

Addressed i	n SWMP?	veare?	
Auul esseu 1	<u>.</u>		
• Yes	○ No	• Yes	$\bigcirc$ No
○ Yes	● No	○ Yes	$\bigcirc$ No
• Yes	○ No	● Yes	$\bigcirc$ No
• Yes	○ No	• Yes	$\bigcirc$ No
● Yes	○ No	• Yes	$\bigcirc$ No
nce • Yes	○ No	• Yes	$\bigcirc$ No
• Yes	○ No	• Yes	$\bigcirc$ No
○ Yes	● No	○ Yes	$\bigcirc$ No
O Yes	• No	○ Yes	$\bigcirc$ No
Yes	○ No	• Yes	$\bigcirc$ No
• Yes	○ No	• Yes	$\bigcirc$ No
	○ No	• Yes	$\bigcirc$ No
• Yes	○ No	• Yes	$\bigcirc$ No
O Yes	○ No	○ Yes	$\bigcirc$ No
	<ul> <li>Yes</li> </ul>	● Yes         ○ No           ○ Yes         ● No           ● Yes         ○ No           ● Yes         ○ No           ■ Yes         ○ No           □ Yes         ○ No           ○ Yes         ○ No	○ Yes         ○ No         ○ Yes           ○ Yes         ○ No         ○ Yes

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

	SPI	DES	ID						
Name of MS4/Coalition Town of Canandaigua	N	Y	R	2	0	A	5	4	6
2. Provide the following information about municipal operations good	od h	ous	ek	eep	ing	g pi	rog	ran	as:
<ul><li>Parking Lots Swept (Number of acres X Number of times swept)</li></ul>		# 1	4cr	es				3	3
• Streets Swept (Number of miles X Number of times swept)		# ]	Mil	les			6	6	4
<ul> <li>Catch Basins Inspected and Cleaned Where Necessary</li> </ul>				#				1	8
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>				#					0
O Phosphorus Applied In Chemical Fertilizer		#	Łt	os.					
O Nitrogen Applied In Chemical Fertilizer		#	Łt	os.					
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)		# Ac	cres	s				]•[	
3. How many stormwater management trainings have been provided	l to	mu	nic	cipa	al e	mp	loy	ees	
during this reporting period?									0
4. What was the date of the last training?		]/			/				
5. How many municipal employees have been trained in this reporting	ng p	eri	oď	?					0
6. What percent of municipal employees in relevant positions and destormwater management training?	par	tme	ent	s r	ecei	ive		0	%

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

_			SPDES ID		
Name of MS4/Coalition	Town of Canandaigua		N Y R 2	0 A 5 4	6
7. Evaluating Prog	ress Toward Measurable	Goals MCM 6			
identified in your Sto	ort on your progress and progremwater Management Progremal pages as needed.	-	-	-	t
A. Briefly summari	ze the Measurable Goal ic	dentified in the SWM	MPP in this report	ing period.	
	maintains roadways, parkir ity site have been completed			odifications	
B. Briefly summari Goal.	ze the observations that in	ndicated the overall	effectiveness of th	is Measura	ble
lawn care and mainte maintained stormwa	mical fertilizers have been a enance have been implementer facilities. Signage has be osal stations have been adde	nted to maintain ripar een added to facilities	rian areas around To s to protect 'no-mov	own	
C. How many times	s was this observation mea	asured or evaluated	in this reporting p	eriod?	
				1	2
D. Has your MS4 m	nade progress toward this	measurable goal du			pants/events
E. Is your MS4 on s	schedule to meet the dead	line set forth in the S		• Yes •	No
•	ze the stormwater activiting cycle (including an imp	-	the goals of this M		
Routine maintenance	e and inspections will conti	nue.			

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

		SPI	DES	ID						
Name of MS4/Coalition	Town of Canandaigua	N	Y	R	2	0	А	5	4	6

Answer - 1,2,3,4,5,6,7a-d,8a,8b,9	Check NA	(POC)	
1 2 2 4 5 6 70 4 90 95 0		_	
1.4.3.4.3.0.74-0.88.80.9	10,11,12	Phosphorus	
1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus	
1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus	
-	-	-	
1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus	
1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus	
1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus	
-	-	-	
1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	
1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	
1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus	
-	-	-	
		Pathogens	
		Pathogens	
1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens	
	-		
		Pathogens and Nitrogen	
		Pathogens and Nitrogen	
1,4,/a-d,8a,9	2,3,4,5,86,10,11,12	Pathogens and Nitrogen	
1467-19-0	2 2 5 91 10 11 12	- Di i	
		Phosphorus	
		Phosphorus Phosphorus	
1,4,0,7a-u,0a,9	2,3,3,80,10,11,12	- Filosphorus	
1 2 3 4 79-4 9 10 11 12	5 6 8a 8b	Pathogens	
1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens Pathogens	
	1,6,7a-d,8a,9 1,6,7a-d,8a,9 1,6,7a-d,8a,9 1,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,7a-d,9,10,11,12 1,4,7a-d,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,4,6,7a-d,8a,9 1,2,3,4,7a-d,9,10,11,12 1,2,3,4,7a-d,9,10,11,12	1,6,7a-d,8a,9 1,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,6,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,7a-d,9,10,11,12 2,3,5,6,8a,8b 1,4,7a-d,9,10,11,12 2,3,4,5,8a,8b,10,11,12 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b 1,4,7a-d,8a,9,10,11,12 2,3,5,6,8b 1,4,7a-d,8a,9 2,3,4,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,4,6,7a-d,8a,9 2,3,5,8b,10,11,12 1,2,3,4,7a-d,9,10,11,12 1,6,7a-d,8a,9 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,9,10,11,12 1,2,3,4,7a-d,9,10,11,12 1,6,7a-d,8a,9 1,2,3,4,7a-d,9,10,11,12	

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

		SPDES ID			
Name of MS4/Coalition Town of Canandaigua		N Y R 2	2 0 A	5	4 6
<ul><li>3. Does your MS4/Coalition have a Stormwater Conveyance S and Maintenance Plan Program?</li><li>4. Estimate the percentage of on-site wastewater treatment sy</li></ul>	stems th	• Yes at have be	O No	ecte	○ N/A d
and maintained or rehabilitated as necessary in this report	ing perio	od?			5 %
5. Has your MS4/Coalition developed a program that provide NYSDEC SPDES General Permit for Stormwater Discharg (GP-0-08-001) to reduce pollutants in stormwater runoff fredisturb five thousand square feet or more?	ges from	Constructi	ion Act	iviti tha	ies
6. Has your MS4/Coalition developed a program to address p runoff from new development and redevelopment projects equal to one acre that provides equivalent protection to the Permit for Stormwater Discharges from Construction Active New York State Stormwater Design Manual Enhanced Standards?	that dist NYS DI vities (G	urb greate EC SPDES P-0-08-001	r than Gener ), inclu	or al ding	g O N/A
7a. Does your MS4/Coalition have a retrofitting program to rephosphorus/nitrogen/pathogen loading?	educe ero	sion or ○ Yes	• No	) (	) <b>N</b> /A
7b. How many projects have been sited in this reporting period	d?				
7c. What percent of the projects included in 7b have been compared of projects planned in previous years have be		-	ting pe	riod	%
7d. what percent of projects planned in previous years have be	een comp				%
8a.Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper fertilizer application lands?	0	ment prac		ıd	lanned  N/A
8b.Has your MS4/Coalition developed and implemented a turf procedures policy that addresses proper disposal of grass c municipally owned lands?		-			○ <b>N</b> /A

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

	SPDES ID		
Name of MS4/Coalition Town of Canandaigua	N Y R 2	0 A !	5 4 6
9. Has your MS4/Coalition developed and implemented a program of	of notive plan	ting?	
9. Has your Wis4/Coantion developed and implemented a program of		ung: ● No	O N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste prohibiting goose feeding?	-		rties and ○ N/A
11. Does your MS4/Coalition have a pet waste bag program?	• Yes	○ No	O N/A
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	• No	O N/A