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**MS4 Annual Report Cover Page****MCC form for period ending March 9,**

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

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Name of MS4

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

MCC form for period ending March 9,

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Name of MS4 INC VILLAGE OF LLOYD HARBOR

SPDES ID

N Y R 2 0 A 2 9 9

**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

J E A N

MI

M

Last Name

T H A T C H E R

Title

M A Y O R

Address

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City

H U N T I N G T O N

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N Y

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Phone

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County

S U F F O L K

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

MCC form for period ending March 9,

2 0 2 2

Name of MS4 INC VILLAGE OF LLOYD HARBOR

SPDES ID

N Y R 2 0 A 2 9 9

**Section 2 - Contact Information**

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☐ Duly Authorized Representative  
☒ Local Stormwater Public Contact  
☒ Stormwater Management Program (SWMP) Coordinator  
☐ Report Preparer

First Name

R O B E R T

MI

Last Name

S C H W A R Z

Title

S U P E R I N T E N D E N T O F P U B L I C W O R K S

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**MCC form for period ending March 9,**

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Name of MS4

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## **Section 2 - Contact Information**

## Important Instructions - Please Read

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

First Name

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City

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**MS4 Municipal Compliance Certification (MCC) Form**MCC form for period ending March 9, 

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Name of MS4 

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**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

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Partner/Coalition Name (con't.)

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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 

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● MM2 

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● MM3 SOURCE IDENTIFICATION

● MM4 

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● MM5 

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● MM6 

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Additional tasks/responsibilities

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

PUBLIC EDUCATION AND OUTREACH ON PATHOGENS AND NUTRIENTS VIA STORMWATER RUNOFF, GREEN INFRASTRUCTURE AND SEPTIC SYSTEM UPGRADES.
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**MS4 Municipal Compliance Certification(MCC) Form**

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

Name of MS4 INC VILLAGE OF LLOYD HARBOR

SPDES ID

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**Section 4 - Certification Statement**

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

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

First Name

J E A N

MI

M

Last Name

T H A T C H E R

Title (Clearly print title of individual signing report)

M A Y O R

Signature



Date

0 5 / 2 7 / 2 0 2 2

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



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## MS4 Annual Report Form

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

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

Name of MS4/Coalition

INC VILLAGE OF LLOYD HARBOR

SPDES ID

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### Minimum Control Measure 1. Public Education 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?

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#### 1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- |   |   |
|---|---|
| <input checked="" type="radio"/> Construction Sites   | <input checked="" type="radio"/> Pesticide and Fertilizer Application     |
| <input checked="" type="radio"/> General Stormwater Management Information                      | <input checked="" type="radio"/> Pet Waste Management                     |
| <input checked="" type="radio"/> Household Hazardous Waste Disposal                             | <input checked="" type="radio"/> Recycling                                |
| <input checked="" type="radio"/> Illicit Discharge Detection and Elimination                    | <input checked="" type="radio"/> Riparian Corridor Protection/Restoration |
| <input checked="" type="radio"/> Infrastructure Maintenance                                     | <input checked="" type="radio"/> Trash Management                         |
| <input type="radio"/> Smart Growth  | <input type="radio"/> Vehicle Washing                                     |
| <input type="radio"/> Storm Drain Marking   | <input checked="" type="radio"/> Water Conservation                       |
| <input checked="" type="radio"/> Green Infrastructure/Better Site Design/Low Impact Development | <input checked="" type="radio"/> Wetland Protection                       |
| <input checked="" type="radio"/> Other:   | <input type="radio"/> None  |

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Other

#### 2. Specific audiences targeted during this reporting period:

- |   |   |
|---|---|
| <input checked="" type="radio"/> Public Employees | <input type="radio"/> Contractors               |
| <input checked="" type="radio"/> Residential      | <input type="radio"/> Developers                |
| <input type="radio"/> Businesses                  | <input checked="" type="radio"/> General Public |
| <input type="radio"/> Restaurants                 | <input type="radio"/> Industries                |
| <input checked="" type="radio"/> Other:           | <input type="radio"/> Agricultural              |

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Other

## **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	INC VILLAGE OF LLOYD HARBOR
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SPDES ID

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**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

# Trained					
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● Direct Mailings

# Mailings					1
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## ● Kiosks or Other Displays

# Locations					3
-------------	--	--	--	--	---

- List-Serves

# In List					
-----------	--	--	--	--	--

● Mailing List

# In List	1	8	0	0
-----------	---	---	---	---

● Newspaper Ads or Articles

# Days Run					6
------------	--	--	--	--	---

● Public Events/Presentations

# Attendees			5	0	0
-------------	--	--	---	---	---

○ School Program

# Attendees					
-------------	--	--	--	--	--

○ TV Spot/Program

# Days Run					
------------	--	--	--	--	--

● Printed Materials:

Total # Distributed		5	0	0
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Locations (e.g. libraries, town offices, kiosks)

V	I	L	L	A	G	E		H	A	L	L								
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C	L	E	A	N	U	P	S
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N	O	N	S	E	W	E	R	E	D		H	O	M	E	S				
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L	I	B	R	A	R	Y
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● Other:

[illegible]

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

URL

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URL

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**MS4 Annual Report Form**

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

2	0	2	2
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

I	N	C		V	I	L	L	A	G	E		O	F		L	L	O	Y	D		H	A	R	B	O	R
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**3. Web Page con't.: Provide specific web addresses - not home page.**

URL

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G																														

URL

H	T	T	P	S	:	/	/	M	.	F	A	C	E	B	O	O	K	.	C	O	M	/	O	Y	S	T	E	R	-	B	A
Y	-	C	O	L	D	-	S	P	R	I	N	G	-	H	A	R	B	O	R	-	P	R	O	T	E	C	T	I	O	N	-
C	O	M	M	I	T	T	E	E	-	2	0	9	1	8	4	0	3	5	7	6	7	6	4	1	/						

URL


URL


URL


URL


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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

INC VILLAGE OF LLOYD HARBOR
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SPDES ID

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**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 Village will continue to educate the public about stormwater. The Village will continue to post stormwater information on kiosks, in the Village Hall, in the Village's Newsletter and on the stormwater webpage. The Village will provide information on the Rain Garden App developed by The Center for Land Use Education and Research (CLEAR) at the University of Connecticut on the stormwater page. The app will educate homeowners on basic information about rain gardens and each step of rain garden installation. Notification of the Rain Garden App will be mentioned in the Village newsletter.

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

The Village posted educational stormwater information at kiosks/ displays, in the Village Hall, in the Village's Newsletter and on the Village's stormwater page. The Annual Report was posted on the Village's stormwater page. The Village continued its membership with the Oyster Bay Cold Spring Harbor Protection Committee (OBCSHPC); OBCSHPC expanded Community Shellfish Gardening program, distributed educational materials to the public, and publicized public education and outreach activities through the committee's website, Facebook and via email. The Village provided information on the Rain Garden App on the stormwater page.

**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).**

The Village will continue to educate the public about stormwater. The Village will continue to post stormwater information on kiosks, in the Village Hall, in the Village's Newsletter and on the stormwater webpage. The Village will continue its membership with the OBCSHPC.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

I	N	C		V	I	L	L	A	G	E		O	F		L	L	O	Y	D		H	A	R	B	O	R
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SPDES ID

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**Minimum Control Measure 2. Public Involvement/Participation**

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

☒ On behalf of an individual MS4

☐ On behalf of a coalition

How many MS4s contributed to this report? 

--	--	--

**1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:**

☒ Cleanup Events

# Events 

1	2
---	---

☒ Comments on SWMP Received

# Comments 

				0
--	--	--	--	---

☒ Community Hotlines

Phone # ( 

6	3	1
---	---	---

 ) 

5	4	9
---	---	---

 - 

8	8	8	0
---	---	---	---

Phone # ( 

--	--	--

 ) 

--	--	--

 - 

--	--	--	--

 Phone # ( 

6	3	1
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 ) 

5	4	9
---	---	---

 - 

8	8	0	0
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Phone # ( 

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 Phone # ( 

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Phone # ( 

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 Phone # ( 

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Phone # ( 

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 Phone # ( 

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☒ Community Meetings

# Attendees 

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

☐ Plantings

Sq. Ft. 

--	--	--	--	--

☐ Storm Drain Markings

# Drains 

--	--	--	--	--

☒ Stakeholder Meetings

# Attendees 

	5	0	0
--	---	---	---

☒ Volunteer Monitoring

# Events 

	2	0
--	---	---

☒ Other: 

S	H	E	L	F	I	S	H		G	A	R	D	E	N	I	N	G														
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**2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?**

☒ Yes ☐ No

☐ List-Serve

# In List 

--	--	--	--	--

☐ Newspaper Advertising

# Days Run 

--	--	--	--	--

☐ TV/Radio Notices

# Days Run 

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☒ Other: 

V	I	L	L	A	G	E		C	L	E	R	K	S		O	F	F	I	C	E										
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☒ Web Page URL: Enter URL(s) on the following two pages.

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

N	Y	R	2	0	A	2	9	9
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**Please provide specific address(es) where notice(s) can be accessed - not home page.**

[illegible][illegible][illegible][illegible][illegible][illegible][illegible]

SPDES ID  
 NYR20A299

[illegible]





**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

I	N	C		V	I	L	L	A	G	E		O	F		L	L	O	Y	D		H	A	R	B	O	R
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SPDES ID

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**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	5
---	---

 / 

1	8
---	---

 / 

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

**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 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?

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 / 

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 / 

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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, 

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

Name of MS4/Coalition

INC VILLAGE OF LLOYD HARBOR

SPDES ID

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### 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.

The Village will continue to inform residents about stormwater pollution through information at kiosks/ displays, in the Village Hall, in the Village's Newsletter and on the Village's stormwater page. The Village plans to continue its membership with OBCSHPC and participate in the OBSCHPC programs. The Village will provide information on the Rain Garden App on the stormwater page of the website so homeowners can participate in installing rain gardens on residential property. Due to the current gathering restrictions in New York State, the Village will tentatively plan to host events during the reporting period.

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

The Village continued to inform residents about stormwater pollution through information on kiosks, in the Village Hall, in the Village's Newsletter and on the Village's stormwater page. The Village continued its membership with the OBCSHPC. The OBCSHPC expanded their Community Shellfish Gardening program and engaged 100+ families to raise 1,000 oysters each (150,000 total) to increase awareness of and involvement in water quality issues affecting the water body. The program also included public meetings, training days, community cleanings, and a year-end celebration. The Village provided information on the Rain Garden App on the stormwater page so homeowners can participate in installing rain gardens on residential property.

#### 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).

The Village will continue to inform residents about stormwater pollution through information at kiosks/ displays, in the Village Hall, in the Village's Newsletter and on the Village's stormwater page. The Village plans to continue its membership with OBCSHPC and participate in the OBSCHPC programs.

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**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

INC VILLAGE OF LLOYD HARBOR

SPDES ID

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**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.**

The Village will continue to monitor its outfalls on a regular basis, and document findings in accordance with procedure. The Village will consider enhancing record keeping of outfall inspection results. The Village will seek out additional IDDE training opportunities through OBCSHPC if available.

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

The Village conducted inspections on all outfalls within the reporting period. One (1) illicit discharge was detected, confirmed and eliminated within the reporting period. The Village did not participate in IDDE training but will plan to do so in the next reporting period.

**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).**

The Village will continue to monitor its outfalls on a regular basis, and document findings in accordance with procedure. The Village will consider enhancing record keeping of outfall inspection results. The Village will utilize IDDE training opportunities through OBCSHPC.

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

INC VILLAGE OF LLOYD HARBOR

SPDES ID

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**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
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**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?

		0
--	--	---

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

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

INC VILLAGE OF LLOYD HARBOR

SPDES ID

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**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? 

		0
--	--	---

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

1	0	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, 

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

Name of MS4/Coalition 

INC VILLAGE OF LLOYD HARBOR
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SPDES ID

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**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.**

The Village will continue to monitor development applications and when disturbance exceeds 1.0 acre, will ensure a SWPPP is prepared by the applicant which will subsequently be reviewed for conformance by the Village Engineer.

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

There was one (1) active SWPPP within the reporting period. The Village conducted frequent inspections on the active SWPPP site to ensure proper erosion and sediment controls were installed and maintained.

**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).**

The Village will continue to monitor development applications and when disturbance exceeds 1.0 acre, will ensure a SWPPP is prepared by the applicant which will subsequently be reviewed for conformance by the Village Engineer.



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	2	9

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition

INC VILLAGE OF LLOYD HARBOR

SPDES ID

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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?

N	/	A
---	---	---

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	0	0
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 %

**MS4 Annual Report Form**

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

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

Name of MS4/Coalition 

INC VILLAGE OF LLOYD HARBOR
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SPDES ID

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**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.**

The Village will continue to monitor and maintain post-construction stormwater devices. The Village will consider the construction of a raingarden on Village property.

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

The Village inspected and maintained green infrastructure and post-construction practices within the Village such as perforated piping along the causeway, a stormwater treatment device on West Neck Road, drywells in the DPW parking lot, riprap/ native stabilizing plantings and a rain garden.

**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).**

The Village will continue to monitor projects which result in land disturbance activities to assure that they meet Village Code and submission of SWPPPs. The Village will continue to monitor and maintain post-construction stormwater devices and other green infrastructure practices on Village property.

## MS4 Annual Report Form

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

2	0	2	2
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition 

INC VILLAGE OF LLOYD HARBOR
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SPDES ID

N	Y	R	2	0	A	2	9	9
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### 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>
Street Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Bridge Maintenance.....	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Winter Road Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Salt Storage.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Solid Waste Management.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Right of Way Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Marine Operations.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Parks and Open Space.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Municipal Building.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Stormwater System Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Other.....	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No



**MS4 Annual Report Form**

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

2	0	2	2
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

INC VILLAGE OF LLOYD HARBOR

SPDES ID

N	Y	R	2	0	A	2	9	9
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**2. Provide the following information about municipal operations good housekeeping programs:**

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

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

		7	0	0
--	--	---	---	---
- ☒ Catch Basins Inspected and Cleaned Where Necessary # 

		1	4	9
--	--	---	---	---
- ☒ Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary # 

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

				0
--	--	--	--	---
- ☐ Nitrogen Applied In Chemical Fertilizer # Lbs. 

				0
--	--	--	--	---
- ☒ Pesticide/Herbicide Applied [Natural alternatives (cedar oil) to control bee populations.] # Acres 

			6	.	0
--	--	--	---	---	---

  
 (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

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

				0
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**4. What was the date of the last training?**

1	1	/			/	2	0	1	8
---	---	---	--	--	---	---	---	---	---

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

		0
--	--	---

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

1	0	0	%
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**MS4 Annual Report Form**

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

2	0	2	2
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

INC VILLAGE OF LLOYD HARBOR

SPDES ID

N	Y	R	2	0	A	2	9	9
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**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.**

The Village will continue monitoring municipal operation for stormwater pollution prevention opportunities. The Village will continue annual inspections, removal of materials from structures, use of natural alternatives to control bee populations, and prohibit the use of fertilizers and pesticides on public property. As a long term goal, the Village will evaluate the feasibility of constructing a new building for the storage and washing of maintenance vehicles and equipment.

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

Approximately 35 cubic yards of material were removed from catch basins. The street sweeper traveled approximately 700 street miles and 4 acres of parking lots during the reporting period. With the exception of the application of natural alternatives to control bee populations, all Village parks are pesticide free. The Village provides road-side refuse and recycling collection for all residences. Salt is stored at the Village's permitted salt storage facility until it is needed for de-icing of road, at which time it is mixed with sand and spread on an as-needed basis. The OBCSHPC implemented comprehensive Pet Waste and Geese Management Programs.

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

			1
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(ex.: samples/participants/events)

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

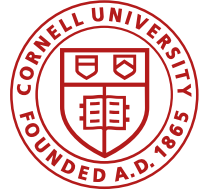
☒ Yes ☐ No

**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).**

The Village will continue monitoring municipal operation for stormwater pollution prevention opportunities. The Village will continue annual inspections, removal of materials from structures, use of natural alternatives to control bee populations, and prohibit the use of fertilizers and pesticides on public property. As a long term goal, the Village will evaluate the feasibility of constructing a new building for the storage and washing of maintenance vehicles and equipment.



**FINAL REPORT**  
**Cold Spring Harbor Watershed**

**Initial Characterization and Management  
of Pathogens Affecting Sanitary Condition of Shellfish Lands  
(Spring Street, Laurel Hollow,  
and Cold Spring Brook Subwatersheds)**

**Phase II – Microbial Source Tracking**

*Prepared for*

Nassau County Soil and Water Conservation District  
&  
Oyster Bay - Cold Spring Harbor Protection Committee

Submitted by:  
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Riverhead, NY 11901-3071

Contact:  
Carolyn Sukowski, Water Quality Program Coordinator  
E-mail: [cs424@cornell.edu](mailto:cs424@cornell.edu)  
Phone: 631-239-1800 ex.6

## **PURPOSE**

Surface water impairment by fecal coliform bacteria is a water quality issue of national scope and importance. Cold Spring Harbor currently has a year-round shellfish land closure for the area including tributaries south and east of a line extending southerly from the seaward end of the dock serving the Cold Spring Harbor Beach Club to the western extremity of the 'Gale House' located on the shoreline immediately west of Cold Spring Beach, on the campus of Cold Spring Harbor Laboratory. Additionally, the area including tributaries south and east of a line extending westerly from the seaward end of the dock serving the Cold Spring Harbor Beach Club to the flag pole situated near the village hall of the Village of Laurel Hollow is closed to shellfishing seasonally.

The purpose of this project is to characterize and manage fecal coliform contamination in the Cold Spring Harbor Watershed as a first step towards identifying and reducing the sources of bacterial contamination that are causing shellfish closures in southern Cold Spring Harbor with the ultimate goal of opening these shellfish lands. The Oyster Bay – Cold Spring Harbor Protection Committee (OBCSHPC) has committed to pursuing this effort in the Spring Street subwatershed which lies within the Town of Huntington boundary. The Nassau County Soil and Water Conservation District (NCSWCD) has additionally committed to pursuing this effort in the Laurel Hollow and Cold Spring Brook Subwatersheds. This project aligns with the recommended actions identified in the Friends of the Bay Watershed Action Plan and Phase I involved identifying preliminary fecal coliform loads during dry weather and storm events for three significant subwatersheds to Cold Spring Harbor in 2020. Phase II was completed in 2021 and involved processing a prioritized selection of twenty (20) of the preserved dry and wet samples collected in 2020 for microbial source tracking (MST). Additionally, a review of existing fecal coliform data as it compares to the U.S. Food and Drug Administration's National Shellfish Sanitary Program has been conducted incorporating the most up-to-date data collected in 2020 in order to demonstrate current trends.

## FINDINGS

### **TASK I (NCSWCD): Review of Existing Water Quality Data**

Existing fecal coliform data from inner Cold Spring Harbor has been compiled and analyzed as it relates to the U.S. Food and Drug Administration's National Shellfish Sanitary Program recommendations. Data review included New York State Department of Environmental Conservation (NYS DEC) Division of Marine Resources Shellfish Harvest Area Classification Unit Report on Cold Spring Harbor Shellfish Growing Area #48 (Triennial Evaluation 2021 (2020 Data), Annual Evaluation 2020 and 2019) as well as data collected by Friends of the Bay (FOB).

#### Ambient Water Quality Monitoring (FOB, NYS DEC)

A review of ambient water quality monitoring data was conducted in order to highlight most recent conditions. The analysis provided below presents the most recent data available including NYS DEC data from 2009 through 2020 as well as data provided by Friends of the Bay (FOB) from 2011 through 2019.

The NYS DEC conducts an annual sanitary survey and evaluation of Cold Spring Harbor Shellfish Growing Area #48. Systematic random sampling is conducted throughout the growing area. This field sampling and data analysis design presumes that if intermittent, unfavorable changes in water quality occur, they will be revealed in the bacteriological sampling results. These unfavorable sampling results will then contribute to the variation of the data set. Data sets displaying greater levels of variation will consequently exhibit an elevated estimated 90th percentile. The estimated 90th percentile serves as the statistic to measure the variance of a data set. This statistic, along with the geometric mean, is used when evaluating each sampling station for compliance with the National Shellfish Sanitation Program (NSSP) growing area criteria. For fecal coliform, a geomean threshold of 14 MPN/100mL and a 90<sup>th</sup> percentile of 49 MPN/100mL are used as standards to determine an area as approved.

The approved, or 'open', classification for a growing area requires that the sanitary survey has determined that there are no unacceptable concentrations of fecal material, pathogenic microorganisms, or poisonous and deleterious substances. There are no NSSP limitations on the harvest of shellstock from growing areas placed in this classification.

The conditional, or 'seasonal', classifications are designed to address growing areas that are subject to intermittent microbiological pollution. This classification applies

when during certain times of the year or under certain conditions, the shellstock from the growing area may be safely harvested. For example, during periods of low runoff and/or cooler temperatures, these areas may be below thresholds.

The restricted, prohibited, or 'uncertified/closed' area classifications are designed to address growing areas that do not meet approved area criteria and which may be subject to administrative closures such as areas in proximity to waste water treatment plant outfalls. This classification is commonly used for areas affected by non-point pollution from either urban or rural sources that cause the water quality to fluctuate unpredictably or of sufficient frequency that a conditionally approved area is not feasible.

The following map includes NYS DEC and Friends of the Bay (FOB) data going back enough full years to be able to highlight the geomeans and 90<sup>th</sup> percentiles for at least 30 data points. The extent of the map focuses on inner-Cold Spring Harbor stations only, specifically out to NYS DEC station 48-8 located off of Jennings Beach. One NYS DEC monitoring station, 48-24, was only recently added in December of 2019 so there are only 8 data points. NYS DEC stations located in the year-round closed area (48-11, 48-13, 48-13.1, 48-14, and 48-15) have been marked by NYS DEC as 'inactive' and were not monitored in 2020 nor included in the State's most recent Triennial Evaluation 2021. Additionally, as of 2020 NYSDEC has ceased sampling stations within the seasonally closed areas during closed periods. However, data was collected at these stations in 2019 and prior and is included in our analyses.

*Figure 1* represents a seasonally closed (5/1-10/15) NYS DEC and FOB data summary going back to 2010 for NYS DEC data and 2017 for FOB data. This seasonal closed analysis includes the most recent year of data available (2020) whereas the State's most recent Triennial Evaluation 2021 leaves 2019 and 2020 data out for the closed areas as these stations have been marked as inactive. With the inclusion of the most recent year of data (2020), when compared to the NYS DEC Triennial Evaluation, there is still no improvement seen in these stations. All NYS DEC stations and FOB stations, FB-1 and FB-2, in areas closed year-round are failing both the geomean and 90<sup>th</sup> percentile standards for this period. Seasonal stations, including FOB station FB-3, are also failing both the geomean and 90<sup>th</sup> percentile standards for this period.

It should be noted that in the 2020 NYS DEC Annual Evaluation, which uses station data from 5/1-10/31 despite the closed period being from 5/1-10/15, station 48-10 is identified as approaching threshold values with a geomean of 8.8 MPN/100mL and 90<sup>th</sup> percentile of 42.8 MPN/100mL (N=31). As of the NYS DEC Triennial Evaluation

2021, which includes 2020 data, station 48-10 has a geomean of 7.9 MPN/100mL and 90<sup>th</sup> percentile of 36.1 MPN/100mL (N=36). Our review, which includes data from the seasonally closed window of 5/1-10/15 produced a geomean of 8.6 MPN/100mL and 90<sup>th</sup> percentile of 40.1 MPN/100mL (N=35). The difference is not significant, but is worth mentioning considering the importance of this year-round open station. This additional analysis of this station was considered as it is the year-round open station closest to the seasonally closed area and therefore could be used to consider potential future extensions of closed areas. As of the NYS DEC Triennial Evaluation 2021, the seasonally closed area has been proposed for extension beyond station 48-10. The changes are effective 11/22/2021 and are expected to be published in the Dec. 8, 2021, edition of the New York State Register. This proposed extension is due to poor water quality being detected at the newly added station 48-24 located on the existing seasonal closure line which showed a geomean of 14.7 MPN/100mL and a 90<sup>th</sup> percentile of 216.7 MPN/100mL (N=4) in our analysis and a geomean of 14.7 MPN/100mL and a 90<sup>th</sup> percentile of 151.7 MPN/100mL (N=5) in the NYS DEC Triennial Evaluation 2021.



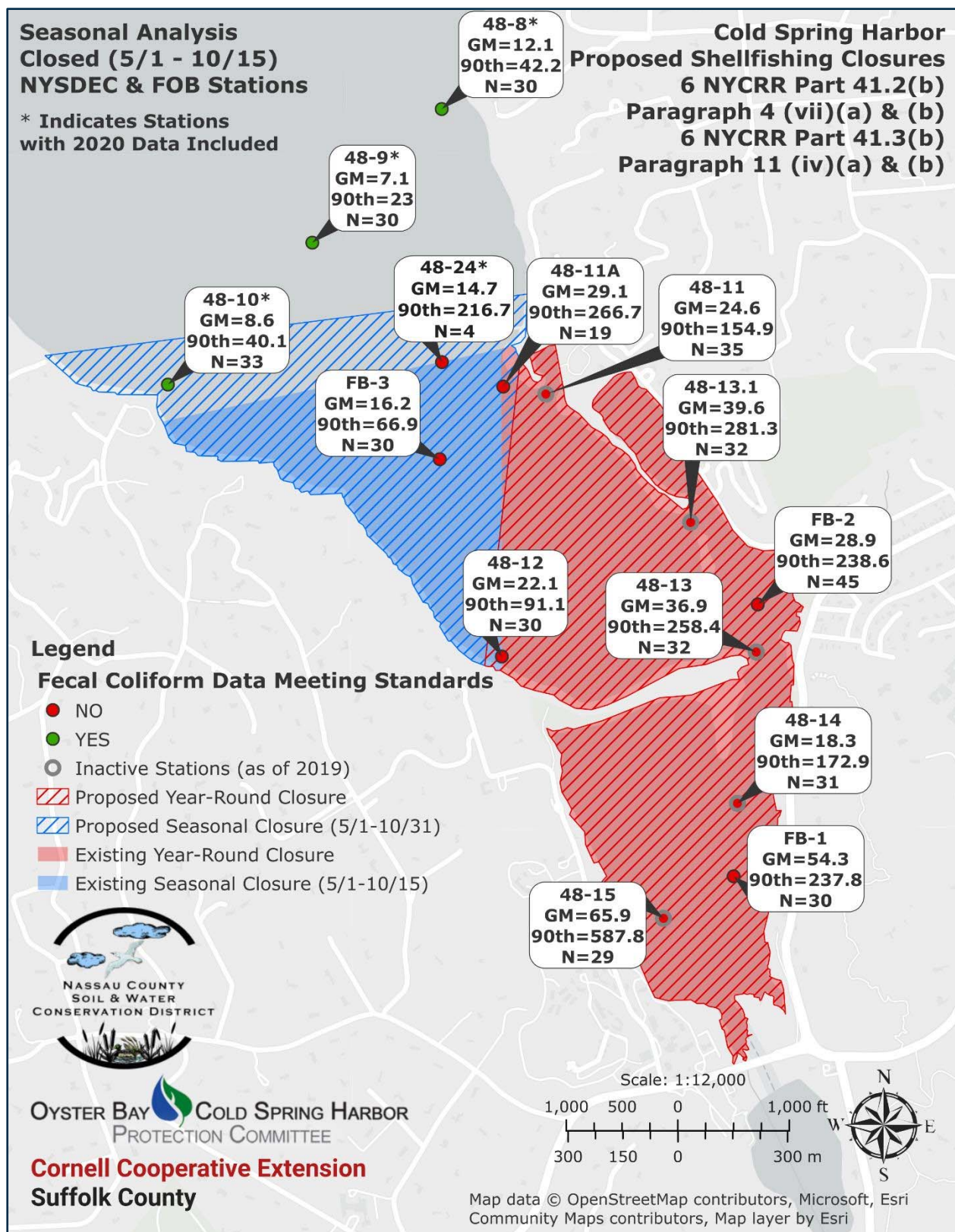


Figure 1. Seasonally Closed Period (5/1–10/15) Analysis:  
NYSDEC & FOB Fecal Coliform Data in Inner Cold Spring Harbor



## **TASK II (OBCSHPC & NCSWCD): Microbial Source Tracking (MST) of Preserved Samples Collected from the Major Subwatershed Catchment Areas Prioritized by Fecal Coliform Contribution During Baseflow and Storm Events**

Fecal coliform and hydrological data were used to rank tributary contributions of fecal coliform to Cold Spring Harbor in Phase I of this project conducted in 2020. The Cold Spring Harbor Watershed has three major subwatersheds contributing to the impaired segments of Cold Spring Harbor. The Spring Street, Laurel Hollow, and Cold Spring Brook subwatersheds were sampled at significant branches for fecal coliform concentrations. The Spring Street, Laurel Hollow, and Cold Spring Brook subwatersheds, which align with Friends of the Bay's Watershed Action Plan, will be included in this study and can be seen in *Figure 2*. Sampling was conducted during four (4) distinct baseflow events (72 hours of no rainfall) and during four (4) distinct storm events from August through September 2020. CCE sampling procedure involves preservation of all samples for potential future microbial source tracking (MST). CCE in partnership with the OBCSHPC have reviewed the results of the sampling conducted for the purpose of selecting certain samples for potential microbial source tracking (MST). As part of the second phase of the project, a selection of twenty (20) samples collected during dry weather events and wet weather events and subsequently preserved were processed for (MST) based on fecal coliform enumeration results. Selected samples were processed for presence of 3 different potential pathogen sources (human, canine (dogs), Canada goose). It should be noted that while MST is a powerful tool that may lead to actionable results and guide stormwater management, samples are being collected as a snapshot in time. These snapshot samples may not be wholly representative of sources of pathogens being discharged from the system. Data will allow for identification of problem areas and aid in future management planning. This task aligns with the following recommended actions in the Friends of the Bay Watershed Action Plan under section 3.2-Water Quality: Objective 1: Improve Understanding of Estuary and Watershed Conditions; Action 1-2: Continue and Expand Stream and Outfall Monitoring Program

Catchment areas were delineated for each of these significant branches within each subwatershed and can be seen in *Figure 2* along with sampling stations. Flow estimates and fecal coliform enumeration results were used to evaluate fecal coliform loading for each sampling station located in the study watersheds. Catchment areas were delineated in Esri ArcGIS Pro desktop software for each of the 11 sampling stations included in the study using the USGS National Hydrography Dataset High Resolution data.

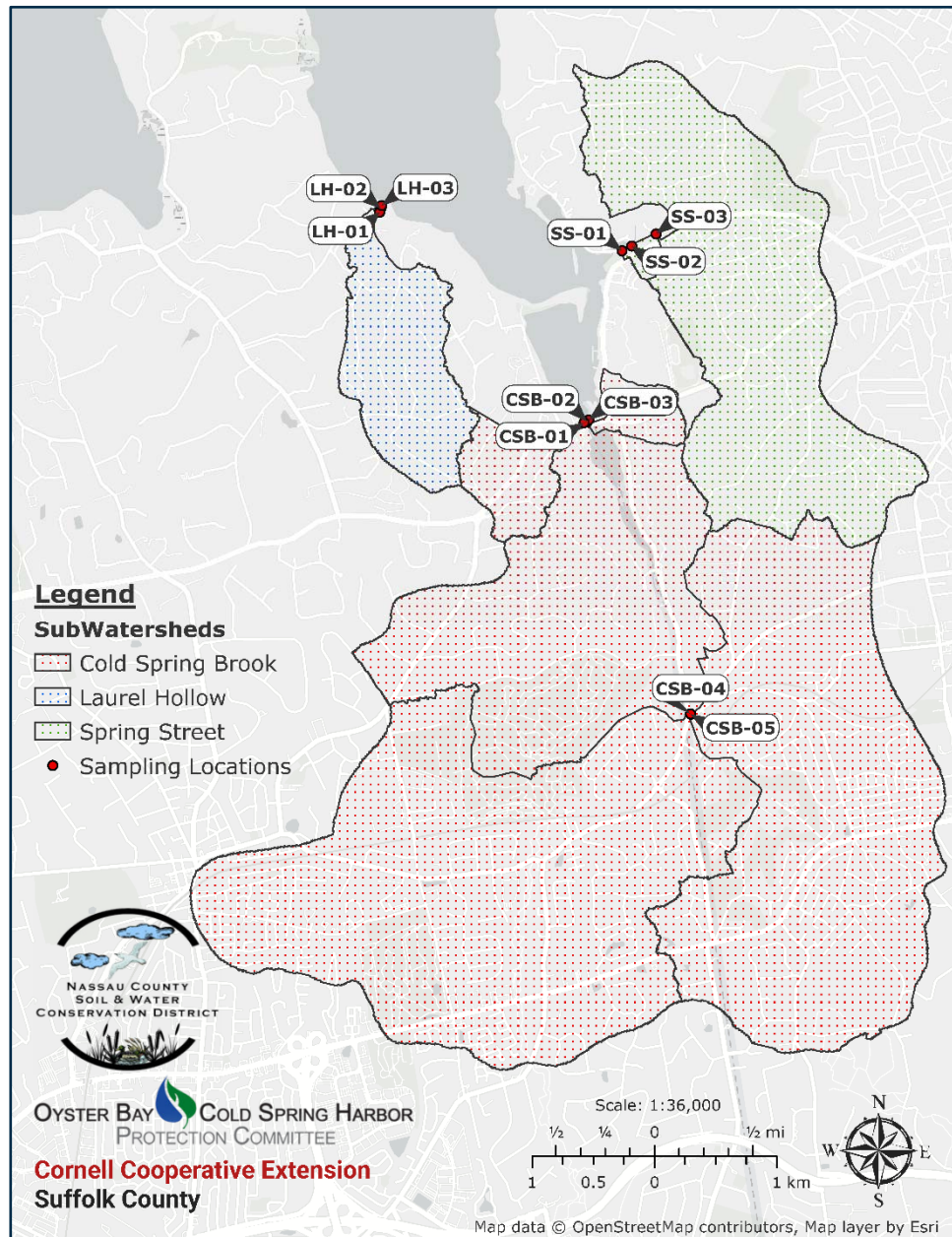


Figure 2. Catchment areas for each of the significant branches within the major subwatersheds of Cold Spring Harbor and Sampling Locations.

Baseflow events occurred on 8/10/20, 8/24/20, 8/26/20, and 9/21/20. Fecal coliform enumeration for baseflow events ranged from <1 MPN/100mL to 1,842 MPN/100mL with a mean fecal coliform enumeration of 215.5 MPN/100mL. Wet weather events occurred on 8/19/20, 8/29/20, 9/01/20, 9/10/20, and 9/30/20. Fecal coliform enumeration for wet events ranged from <100 MPN/100mL to 435,200 MPN/100mL with a mean fecal coliform enumeration of 23,206 MPN/100mL.

### Microbial Source Tracking (MST) Results and Station Classifications

Microbes from stormwater samples can be traced back to specific sources using microbial source tracking (MST) techniques to determine if the discharge originated from humans or a particular animal group. Samples were processed by Source Molecular to determine whether or not microbes present in the sample originated from human (e.g., failed septic system) or non-human sources. The non-human sources selected for testing were Canada goose and canine (dog).

Twenty (20) preserved samples from five (5) different stations (CSB-01, CSB-02, CSB-03, LH-02, SS-01) were processed for MST. MST detections for human, canine, and goose biomarkers is indicated in the data table in Appendix A along with fecal coliform enumeration for each sample. 'ND' indicates not detected, 'DNQ' indicates detected but not quantified due to quantities below the limit of quantification, and detected results are indicated by a number that represents a relative quantification.

Stations were classified according to methods described in Tagliaferri et. al (2021) to aid resource managers with potential remediation efforts (Table 1). Class 1 sites have the highest levels of contamination and class 5 sites have the least. This prioritization considers concentrations of fecal coliform above 49 most probable number per 100 milliliters (MPN/100 mL), dry weather discharges, and influences of human sewage and canine waste.

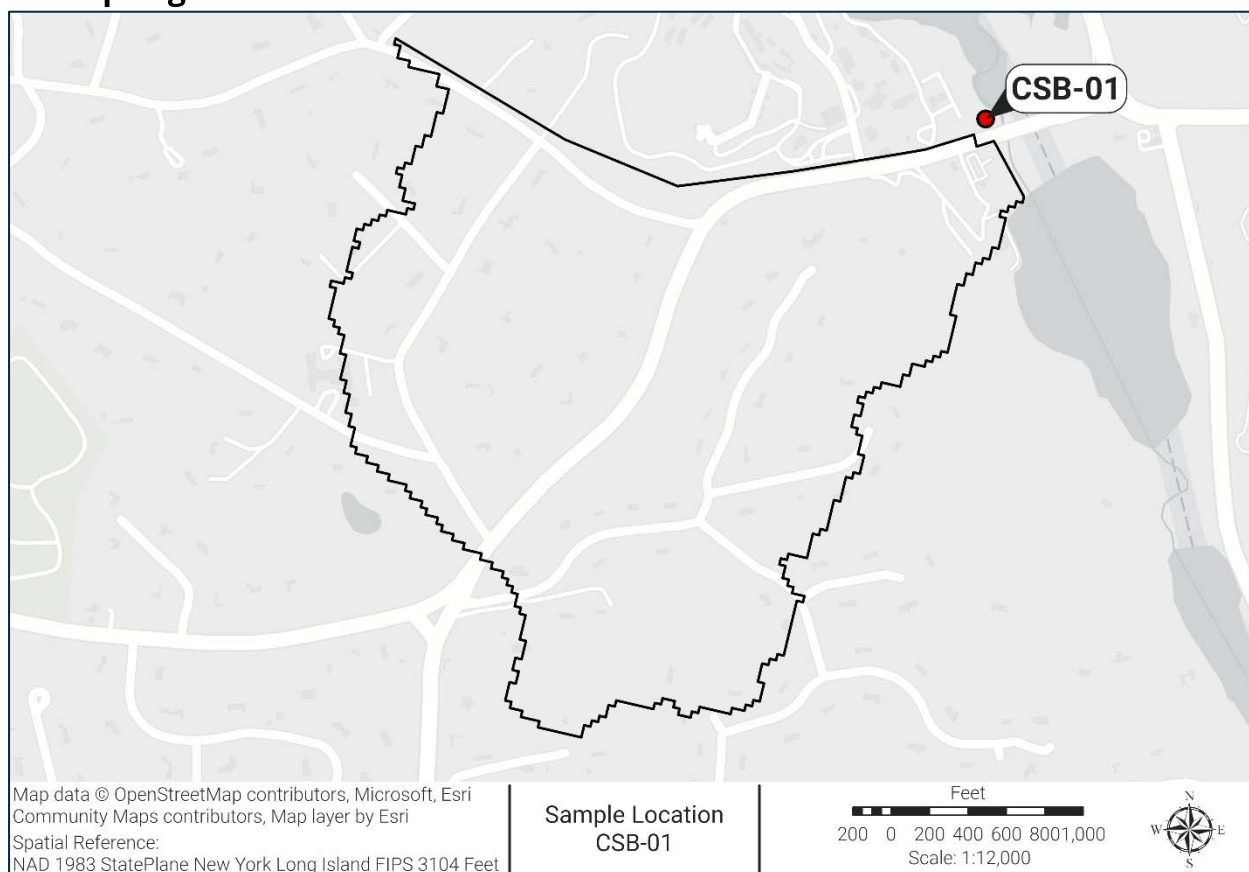
Table 1. Sample results for fecal coliform and microbial source tracking markers by source site type at Cold Spring Harbor on Long Island, New York.

Site Name	Site Type	Number of Samples	Fecal coliform (MPN/100 mL)				Elevated fecal coliform during dry-weather discharge	Sewage affected (HF183)	Canine affected (BacCan)	Class <sup>1</sup>
			Median	25th percentile	75th percentile	Mean				
CSB-01	Channel	8	86	39	548	744	Yes	No	Yes	2
CSB-02	Channel	8	100	39	352	410	Yes	No	Yes	2
CSB-03	Channel	8	280	193	3155	56027	Yes	Yes	Yes	1
LH-02	STS	8	1575	126	3532	7162	Yes	No	Yes	2
SS-01	Outfall	8	5807	208	15670	12797	Yes	Yes	Yes	1

<sup>1</sup>Class is rated from 1 to 5, with 1 being the most contaminated and 5 being the least as described in Tagliaferri et. al. (2021)

A summary of each of the 5 stations which are recommended to be prioritized for future retrofits is provided below:

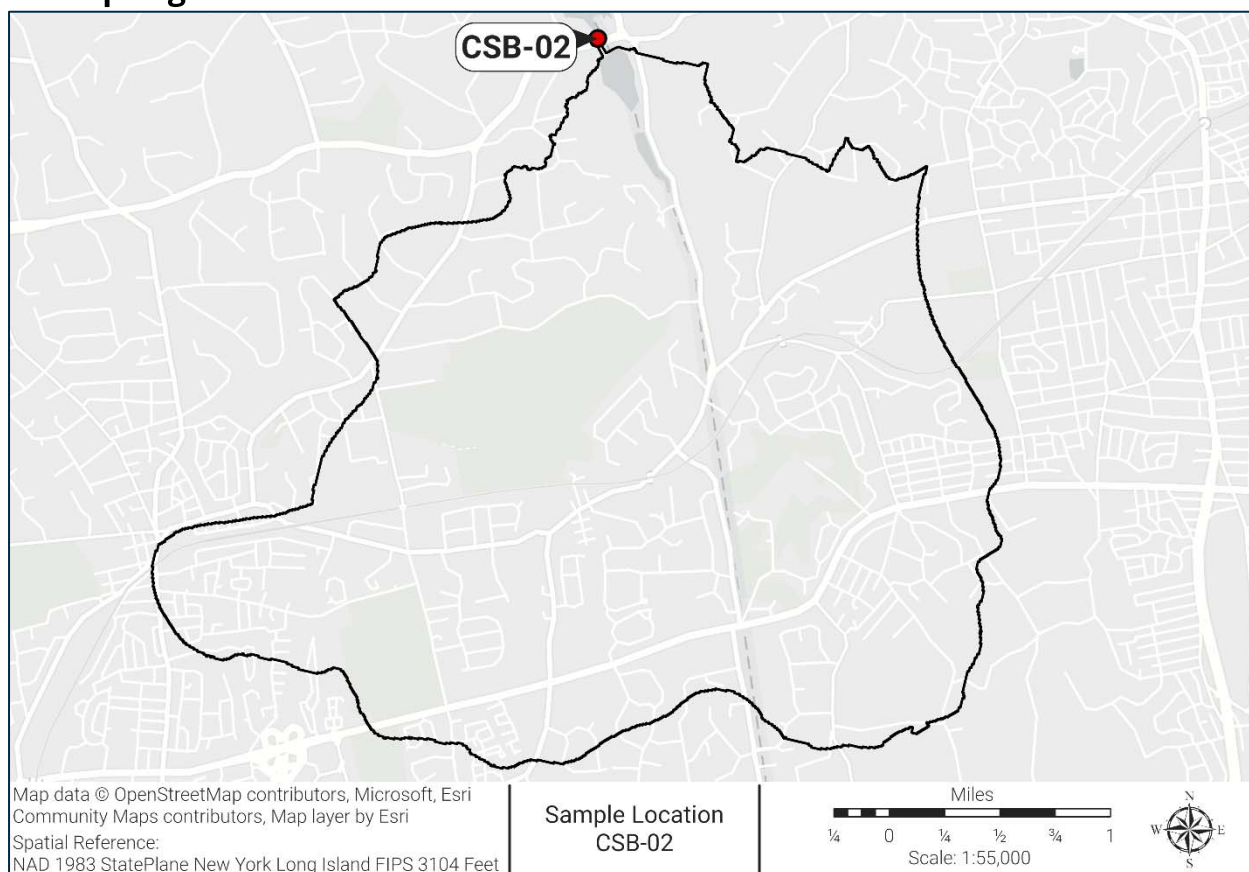
## Cold Spring Brook: CSB-01 – Class 2



CSB-01 discharges to the head of Cold Spring Harbor under State Road 25A from the west. The catchment area is about 150 acres and encompasses predominantly low-density residential areas along the 25A corridor. Fecal coliform enumeration for baseflow events ranged from 31 MPN/100mL to 72 MPN/100mL with a mean fecal coliform enumeration of 43.75 MPN/100mL. Fecal coliform enumeration for wet events ranged from 100 MPN/100mL to 3,690 MPN/100mL with a mean fecal coliform enumeration of 1,445 MPN/100mL.

There were four (4) samples processed for MST at CSB-01. One each on 8/24/2020 (dry), 9/21/2020 (dry), 9/10/2020 (wet) and 9/30/2020 (wet). The detections of Human and Canine biomarkers both occurred during wet weather events on 9/10/2020 (0.92in) and 9/30/2020 (0.89in) respectively. Human biomarker detection was not quantifiable. Dog biomarker was detected at 324 copies/100mL. Goose biomarker was not detected in any of the samples.

## Cold Spring Brook: CSB-02 – Class 2

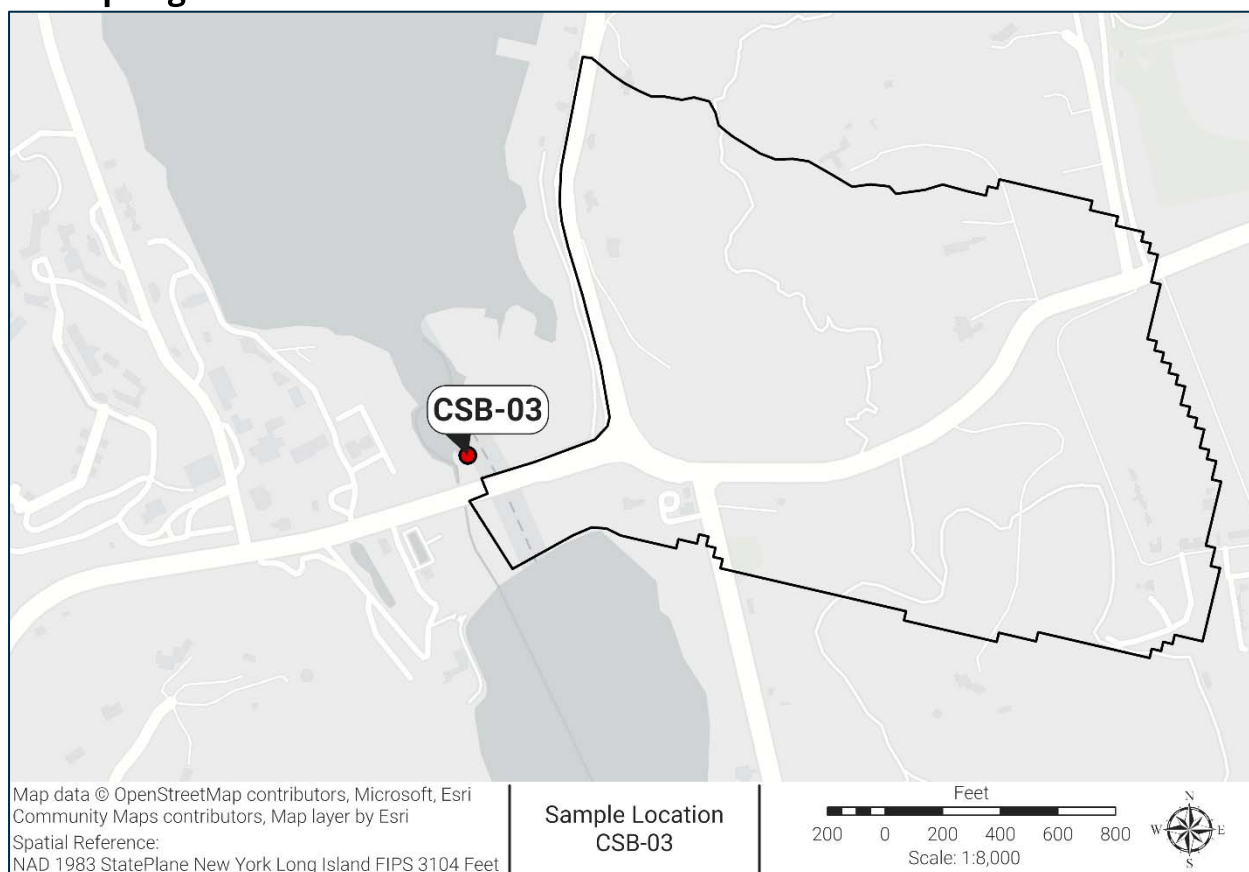


CSB-02 discharges to the head of Cold Spring Harbor under State Road 25A from the south. The catchment area is about 5,000 acres and encompasses large areas of natural undeveloped land as well as residential areas, St. Johns Pond, Cold Spring Country Club, Oheka Castle, and Town of Oyster Bay Golf Course. Fecal coliform enumeration for baseflow events ranged from 20 MPN/100mL to 299 MPN/100mL with a mean fecal coliform enumeration of 97.75 MPN/100mL. Fecal coliform enumeration for wet events ranged from <100 MPN/100mL to 2,180 MPN/100mL with a mean fecal coliform enumeration of 722.25 MPN/100mL.

There were four (4) samples processed for MST at CSB-02. One each on 8/26/2020 (dry), 9/21/2020 (dry), 9/10/2020 (wet) and 9/30/2020 (wet). Canine biomarker was detected in both wet weather samples. However, the quantifiable detection occurred during 9/30/2020 (0.89in) at 5440 copies/100mL. Neither Human nor Goose biomarkers were detected in any of the samples.



## Cold Spring Brook: CSB-03 – Class 1



CSB-03 discharges to the head of Cold Spring Harbor under State Road 25A from the east. The catchment area is about 75 acres and encompasses a portion of Cold Spring Harbor State Park, a portion of Uplands Farm Field Station (Cold Spring Harbor Lab), as well as the intersection of 25A/Harbor Rd/Lawrence Hill Road. Fecal coliform enumeration for baseflow events ranged from 122 MPN/100mL to 259 MPN/100mL with a mean fecal coliform enumeration of 179.75 MPN/100mL. Fecal coliform enumeration for wet events ranged from 300 MPN/100mL to 435,200 MPN/100mL with a mean fecal coliform enumeration of 111,875 MPN/100mL.

There were four (4) samples processed for MST at CSB-03. One each on 8/10/2020 (dry), 9/21/2020 (dry), 9/10/2020 (wet) and 9/30/2020 (wet). Human biomarker was detected during a wet weather event on 9/10/2020 (0.92in) at 328 copies/100mL. Canine biomarker was detected in all samples, but only quantifiable results were obtained during wet weather events on 9/10/2020 (0.92in) at 1220 copies/100mL and 9/30/2020 (0.89in) at 867 copies/100mL. Goose biomarker was not detected in any of the samples.

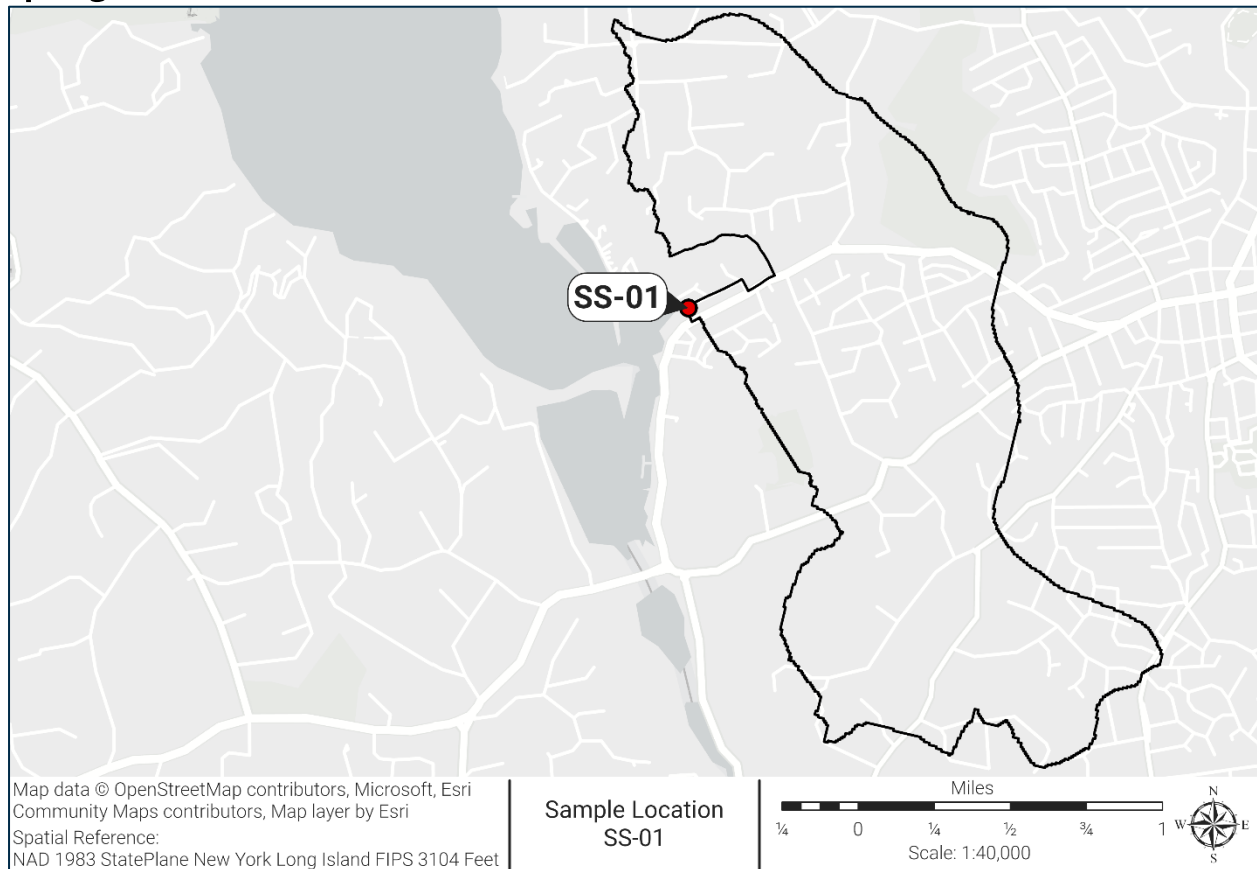
## Laurel Hollow: LH-02 – Class 2



LH-02 discharges through a stormwater treatment system to the Laurel Hollow Beach outfall which discharges to Cold Spring Harbor. The catchment area is about 0.37 acres and encompasses predominantly low-density residential areas and a portion of Laurel Hollow Beach Park. Fecal coliform enumeration for baseflow events ranged from <1 MPN/100mL to 1,842 MPN/100mL with a mean fecal coliform enumeration of 506 MPN/100mL. Fecal coliform enumeration for wet events ranged from 1,320 MPN/100mL to 43,520 MPN/100mL with a mean fecal coliform enumeration of 13,817.5 MPN/100mL.

There were four (4) samples processed for MST at LH-02. One each on 8/10/2020 (dry), 8/24/2020 (dry), 8/29/2020 (wet) and 9/30/2020 (wet). Canine biomarker was detected on 9/30/2020 (0.89in) at 899000 copies/100mL. Neither Human nor Goose biomarkers were detected in any of the samples.

## Spring Street: SS-01 – Class 1



SS-01 discharges through Spring Street Outfall #273 directly into Cold Spring Harbor and is the first structure in line for this system. The catchment area is about 1,284 acres and encompasses predominantly residential areas, Cold Spring Harbor downtown, a portion of the Huntington Country Club Gold Course, and Goose Hill Primary School. Fecal coliform enumeration for baseflow events ranged from 63 MPN/100mL to 754 MPN/100mL with a mean fecal coliform enumeration of 298.25 MPN/100mL. Fecal coliform enumeration for wet events ranged from 10,860 MPN/100mL to 57,940 MPN/100mL with a mean fecal coliform enumeration of 25,295 MPN/100mL.

There were four (4) samples processed for MST at SS-01. One each on 8/10/2020 (dry), 8/26/2020 (dry), 8/19/2020 (wet) and 9/1/2020 (wet). Human biomarker was detected in all four (4) samples at 1070, 8450, 2000 and 800 copies/100mL. Canine biomarker was detected on 8/10/2020, 8/19/2020 (0.28in) and 9/1/2020 (0.11in). However, quantifiable results were only obtained during wet events at 1220 and 867 copies/100mL. Goose biomarker was not detected in any of the samples.



A summary of average MST concentrations for quantifiable results can be seen in *Table 2*. Quantifiable Human biomarker was found in all four (4) of the SS-01 samples implying a consistent occurrence at this location only. Whereas the remaining locations having at most one (1) occurrence indicates a periodic or inconsistent contribution. While Canine biomarker was present at all locations, it was present in CSB-03 at all four (4) samples collected with two (2) samples having quantifiable results. The remaining locations had varying intensities and frequencies of Canine biomarker indicating a widespread yet inconsistent, albeit significant contribution. Goose biomarker was not found in any of the samples.

*Table 2. Summary of Average MST Concentrations by Sample Station*

Sample Station	Human_HF183 Average Marker Copies per 100mL			Dog_BacCan-UCD Average Marker Copies per 100mL			Goose_CGOF1 Average Marker Copies per 100mL		
	ND	DNQ	AVG	ND	DNQ	AVG	ND	DNQ	AVG
CSB-01	3	1	-	3	-	324 (n=1)	4	-	-
CSB-02	4	-	-	2	1	5440 (n=1)	4	-	-
CSB-03	3	-	328 (n=1)	-	2	1043.5 (n=2)	4	-	-
LH-02	4	-	-	3	-	899000 (n=1)	4	-	-
SS-01	-	-	3080 (n=4)	1	1	60150 (n=2)	4	-	-

\* Please note that concentration of biomarker copies is only relatable to concentrations of the same fecal host, not between different hosts.

## CONCLUSION

Cornell Cooperative Extension of Suffolk County (CCE) in collaboration with the Oyster Bay-Cold Spring Harbor Protection Committee, Friends of the Bay, and the Nassau County Soil and Water Conservation District, assessed the potential sources of fecal contamination entering Cold Spring Harbor on Long Island, NY, using samples collected at various storm sewer system (MS4) locations from August through September 2020. Host sources of fecal contamination in Cold Spring Harbor were assessed based on bacterial (Bacteroides) genetic markers.

Quantifiable Human biomarker was found in all four (4) of the SS-01 samples processed implying a consistent occurrence at this location during dry and wet events. As has been suggested in a recent comparable study in Hempstead Harbor, Tagliaferri et. al (2021), this could be attributed to failing on-site wastewater treatment systems (OWTS) adjacent to stormwater infrastructure resulting in over

land flows into storm drains or seepage of contaminated groundwater into cracks in stormwater pipes. Fecal coliform concentrations found during dry weather did not imply traditional illicit connections. Further study would be required to confirm direct locations of sources. The remaining locations (CSB-01 and CSB-03) having at most one (1) occurrence of human biomarker indicates a periodic or inconsistent contribution and could be attributed to sources such as improper disposal of household trash.

While Canine biomarker was present at all locations, it was present in CSB-03 at all four (4) samples collected with two (2) of the wet samples having quantifiable results. The remaining locations had varying intensities and frequencies of Canine biomarker indicating a widespread yet inconsistent, albeit significant, contribution based on fecal coliform enumeration data. Locations where known dog walking corridors exist were found to have higher frequency (CSB-03, SS-01) of occurrence of Canine biomarker or higher average marker copies (LH-02, SS-01).

Goose biomarker was not found in any of the samples indicating that Canada geese were not found to be a source of pathogens in the MS4s discharging to Cold Spring Harbor. Further study would be required to determine if Canada geese are a contributor of pathogens to Cold Spring Harbor through overland stormwater flow directly into the Harbor and presence in the waterway. If Canada geese are a source, it is likely that their contribution would be seen at local bathing beaches or natural areas along the shoreline where they may congregate, but not in MS4s.

Storm sewer systems were the focus of this study, but future study could include assessing other potential sources of fecal contaminated water contributing to Cold Spring Harbor, such as groundwater, marinas (boats), and resuspension of sediment. A recent U.S. Geological Survey (USGS) study of Hempstead Harbor (Tagliaferri et. al (2021)), a nearby waterway on the north shore of Nassau County, has indicated that compared to these other potential sources, stormwater from MS4s were the most likely transport mechanism of fecal contamination into Hempstead Harbor. Furthermore, the most substantial source of fecal contamination to Hempstead Harbor was found to be discharge from sites with constant flow, mainly MS4s throughout the harbor, under both dry and wet conditions. It is important to draw parallels to this recent USGS study, as the purpose is to use findings in Hempstead Harbor as a framework for future water quality regulations on Long Island. It is of

note that of the sites sampled in this study of Cold Spring Harbor, two sites had constant flow (CSB-03 & SS-01) from groundwater seepage into the MS4. These sites had events that showed elevated human and canine biomarker frequency and average marker copies and have been classified as Class 1, meaning within this study they were the most contaminated sites. When comparing to Hempstead Harbor, fecal coliform enumerations during baseflow were not found to be higher than those found during wet weather events at all sites. This further supports that traditional illicit connections (i.e., direct connections from OWTS) may not be as much of a contributor to surface water impairments in Cold Spring Harbor as they seem to be in Hempstead Harbor. Rather, stormwater runoff carries additional pathogens into the MS4 during wet events as opposed to diluting baseflow values. Alternatively, groundwater may be diluting illicit discharges into the MS4s. Further study would be required to determine to what extent groundwater seepage into these MS4s is impacting water quality.

## Appendix A. Samples Collected at Cold Spring Harbor on Long Island, New York, for Bacterial Genetic Markers and Fecal Coliform

**Table 1.** Data summary of all samples collected in Cold Spring Harbor on Long Island, New York, for bacterial genetic markers and fecal coliform analysis.

Site name	Date	Time (EST)	Human_ HF183 (copies/ 100 mL)	Dog_ BacCan (copies/ 100 mL)	Goose_ CGOF1 (copies/ 100 mL)	Fecal coliform (MPN/ 100 mL)	Sample Condition
CSB-04	8/10/2020	9:59	-	-	-	41	dry
CSB-05	8/10/2020	10:03	-	-	-	275	dry
CSB-01	8/10/2020	10:40	-	-	-	31	dry
CSB-02	8/10/2020	10:52	-	-	-	31	dry
CSB-03	8/10/2020	11:03	ND	DNQ	ND	216	dry
LH-03	8/10/2020	11:19	-	-	-	-	dry
LH-02	8/10/2020	11:25	ND	ND	ND	1842	dry
LH-01	8/10/2020	11:42	-	-	-	399	dry
SS-01	8/10/2020	11:57	1070	DNQ	ND	228	dry
SS-02	8/10/2020	12:11	-	-	-	132	dry
SS-03	8/10/2020	12:26	-	-	-	-	dry
SS-01	8/19/2020	11:10	2000	98100	ND	10860	wet
SS-02	8/19/2020	11:25	-	-	-	10170	wet
SS-03	8/19/2020	11:32	-	-	-	13140	wet
LH-03	8/19/2020	11:48	-	-	-	14670	wet
LH-02	8/19/2020	12:00	-	-	-	1830	wet
LH-01	8/19/2020	12:07	-	-	-	2920	wet
CSB-04	8/19/2020	12:23	-	-	-	6970	wet
CSB-05	8/19/2020	12:33	-	-	-	7170	wet
CSB-01	8/19/2020	15:13	-	-	-	100	wet
CSB-02	8/19/2020	15:23	-	-	-	100	wet
CSB-03	8/19/2020	15:36	-	-	-	300	wet
CSB-01	8/24/2020	9:54	ND	ND	ND	72	dry
CSB-02	8/24/2020	10:02	-	-	-	20	dry
CSB-03	8/24/2020	10:14	-	-	-	122	dry
LH-03	8/24/2020	10:33	-	-	-	-	dry
LH-02	8/24/2020	10:42	ND	ND	ND	161	dry
LH-01	8/24/2020	10:56	-	-	-	246	dry
CSB-04	8/24/2020	11:24	-	-	-	62	dry
CSB-05	8/24/2020	11:32	-	-	-	199	dry
SS-01	8/24/2020	11:56	-	-	-	148	dry

Site name	Date	Time (EST)	Human_ HF183 (copies/ 100 mL)	Dog_ BacCan (copies/ 100 mL)	Goose_ CGOF1 (copies/ 100 mL)	Fecal coliform (MPN/ 100 mL)	Sample Condition
SS-02	8/24/2020	12:09	-	-	-	75	dry
SS-03	8/24/2020	12:14	-	-	-	-	dry
CSB-04	8/26/2020	10:35	-	-	-	97	dry
CSB-05	8/26/2020	10:41	-	-	-	399	dry
LH-03	8/26/2020	11:10	-	-	-	-	dry
LH-02	8/26/2020	11:20	-	-	-	20	dry
LH-01	8/26/2020	11:31	-	-	-	199	dry
SS-02	8/26/2020	11:47	-	-	-	10	dry
SS-01	8/26/2020	11:55	8450	ND	ND	754	dry
SS-03	8/26/2020	11:58	-	-	-	-	dry
CSB-01	8/26/2020	12:14	-	-	-	31	dry
CSB-02	8/26/2020	12:24	ND	ND	ND	41	dry
CSB-03	8/26/2020	12:32	-	-	-	122	dry
LH-01	8/29/2020	2:18	-	-	-	200	wet
CSB-04	8/29/2020	13:33	-	-	-	1210	wet
CSB-05	8/29/2020	13:39	-	-	-	9060	wet
LH-02	8/29/2020	14:06	ND	ND	ND	8600	wet
CSB-01	8/29/2020	15:16	-	-	-	100	wet
CSB-02	8/29/2020	15:21	-	-	-	<100	wet
CSB-03	8/29/2020	15:26	-	-	-	310	wet
SS-01	9/1/2020	9:11	800	22200	ND	57940	wet
SS-02	9/1/2020	9:17	-	-	-	141360	wet
SS-03	9/1/2020	9:27	-	-	-	43520	wet
LH-03	9/1/2020	9:47	-	-	-	12540	wet
SS-01	9/10/2020	9:30	-	-	-	15150	wet
SS-02	9/10/2020	9:38	-	-	-	14500	wet
SS-03	9/10/2020	9:48	-	-	-	13340	wet
CSB-04	9/10/2020	10:04	-	-	-	12740	wet
CSB-05	9/10/2020	10:06	-	-	-	27550	wet
CSB-01	9/10/2020	10:27	DNQ	ND	ND	1890	wet
CSB-02	9/10/2020	10:31	ND	DNQ	ND	510	wet
CSB-03	9/10/2020	10:35	328	1220	ND	11690	wet
LH-03	9/10/2020	11:02	-	-	-	200	wet
LH-02	9/10/2020	11:10	-	-	-	1320	wet
LH-01	9/10/2020	11:16	-	-	-	3230	wet
CSB-01	9/21/2020	9:25	ND	ND	ND	41	dry
CSB-02	9/21/2020	9:31	ND	ND	ND	299	dry
CSB-03	9/21/2020	9:37	ND	DNQ	ND	259	dry
LH-03	9/21/2020	10:02	-	-	-	-	dry

Site name	Date	Time (EST)	Human_ HF183 (copies/ 100 mL)	Dog_ BacCan (copies/ 100 mL)	Goose_ CGOF1 (copies/ 100 mL)	Fecal coliform (MPN/ 100 mL)	Sample Condition
LH-02	9/21/2020	10:15	-	-	-	<1	dry
LH-01	9/21/2020	10:28	-	-	-	74	dry
SS-03	9/21/2020	10:40	-	-	-	-	dry
SS-02	9/21/2020	10:48	-	-	-	63	dry
SS-01	9/21/2020	10:58	-	-	-	63	dry
CSB-04	9/21/2020	11:23	-	-	-	52	dry
CSB-05	9/21/2020	11:30	-	-	-	933	dry
CSB-01	9/30/2020	6:09	ND	324	ND	3690	wet
CSB-02	9/30/2020	6:12	ND	5440	ND	2180	wet
CSB-03	9/30/2020	6:17	ND	867	ND	435200	wet
LH-03	9/30/2020	6:55	-	-	-	200	wet
LH-02	9/30/2020	7:02	ND	899000	ND	43520	wet
LH-01	9/30/2020	7:08	-	-	-	7940	wet
SS-01	9/30/2020	7:23	-	-	-	17230	wet
SS-03	9/30/2020	7:36	-	-	-	17890	wet
SS-02	9/30/2020	7:43	-	-	-	14830	wet
CSB-04	9/30/2020	8:07	-	-	-	8200	wet
CSB-05	9/30/2020	8:11	-	-	-	24890	wet

## REFERENCES

Tagliaferri, T.N., Fisher, S.C., Kephart, C.M., Cheung, N., Reed, A.P., and Welk, R.J., 2021, Overview and method-ology for a study to identify fecal contamination sources using microbial source tracking in seven embayments on Long Island, New York: U.S. Geological Survey Scientific Investigations Report 2021–5033, 8 p., at <https://doi.org/10.3133/sir20215033>.

Tagliaferri, T.N., Fisher, S.C., Kephart, C.M., Cheung, N., Reed, A.P., and Welk, R.J., 2021, Using microbial source tracking to identify fecal contamination sources in an embayment in Hempstead Harbor on Long Island, New York: U.S. Geological Survey Scientific Investigations Report 2021–5042, 19 p., <https://doi.org/10.3133/sir20215042>.

New York State Department of Environmental Conservation, 2021, Cold Spring Harbor Shellfish Growing Area #48 Triennial Evaluation 2021 (2020 Data).

New York State Department of Environmental Conservation, 2020, Cold Spring Harbor Shellfish Growing Area #48 Annual Evaluation 2020 (2019 Data).

New York State Department of Environmental Conservation, 2019, Cold Spring Harbor Shellfish Growing Area #48 Annual Evaluation 2019 (2018 Data).

Weather Underground, 2020, Cold Spring Harbor - KNYCOLDS14: Weather Underground data, accessed December 21, 2020, at: <https://www.wunderground.com/dashboard/pws/KNYCOLDS14>

U.S. Geological Survey, 2020, USGS NHDPlus High Resolution, accessed September 9, 2020, at: [https://hydro.nationalmap.gov/arcgis/rest/services/NHDPlus\\_HR/MapServer](https://hydro.nationalmap.gov/arcgis/rest/services/NHDPlus_HR/MapServer).