



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF WATER  
**COMBINED SEWER OVERFLOWS ANNUAL REPORT**

**PART I. GENERAL INSTRUCTIONS:** The Combined Sewer Overflows (CSO) Annual Report is consistent with the EPA CSO Long-Term Control Policy requiring permitting authorities to report “Measures of Success” of the policy implementation. Hence, the goal of this report is to obtain information regarding:

1. Compliance with the 15 CSO Best Management Practices;
2. The condition and operation of the combine sewer system (CSS) components. Most importantly, the end-of-pipe measures that show trends in the discharge of CSS flows to the receiving water body, such as reduction of pollutant loadings, the frequency of CSOs, and the duration of CSOs;
3. Receiving water body measures that show trends of the conditions in the water body to which the CSO occurs;
4. Overall status of the CSO LTCP, if applicable;
5. Key CSO control accomplishments and design and construction progress in the previous year

**Permittee must complete ALL parts of the form and must attach all supporting documents.** Please be aware that this annual report form template highlights the minimum requirement a permittee is expected to submit. Permittee is obligated to complete abatement activities to ensure compliance with the Clean Water Act. This report is also consistent with NYS 6 NYCRR 750-2.1(i).

**Special Instructions:**

1. Multiple permittees (for instance NYC and Albany Pool) responsible to develop a single LTCP can submit one form and also complete Section D of this form.
2. **ALL SECTIONS OF THIS REPORT MUST BE COMPLETED.**

**Part II - CSO LTCP Control Information**

<b>CSO Facility:</b>	<b>Flow:</b> <b>MGD</b>
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**SECTION A: CSO LTCP GENERAL INFORMATION**

LTCP Development/Implementation:

<b>Check all that apply:</b>	<i>Describe other controls currently being used or planned. Also describe how the objectives of the CSO Control Policy have been met.</i>
In Development <input type="checkbox"/>	This report is an appendix to the Onondaga County, New York ACJ Fourth Stipulation 2014 Annual Report. - refer to Section 4.0 Annual report; refer to Section 4.1.6 CSO 063 Conveyances Project; Section 4.1.7: CSO 061 Sewer Separation, and Section 4.1.8: Gray Infrastructure Operation and Maintenance Requirements
Submitted <input checked="" type="checkbox"/>	
Approved <input checked="" type="checkbox"/>	
In Progress <input type="checkbox"/>	
Completed <input type="checkbox"/>	
Not Required <input type="checkbox"/>	

CSO Controls:

<b>Check all that apply:</b>	<i>Describe other controls currently being used or planned. Also describe how the objectives of the CSO Control Policy have been met under the selected controls</i>
Source Controls <input checked="" type="checkbox"/>	Please refer to 2014 ACJ Fourth Stipulation Annual Report; refer to Section 1.3.4 :Facility and Floatable Control Plans and Table ES-1: CSO capture Compliance Schedule and Table ES-2: ACJ Gray Infrastructure Milestone Schedule and Compliance Status
Collection System Controls <input checked="" type="checkbox"/>	
Storage Technologies <input checked="" type="checkbox"/>	
Treatment Technologies <input checked="" type="checkbox"/>	
Floatable Controls <input checked="" type="checkbox"/>	
Disinfection <input checked="" type="checkbox"/>	
Type:	

Post-Construction Compliance Monitoring (PCCM) Program:

<b>Check all that apply:</b>	<i>Describe PCCM findings, status, updates, and future plan. Attach a separate sheet if necessary and describe if the PCCM confirms that LTCP is meeting the t objectives of the CSO Control Policy</i>
In Development <input checked="" type="checkbox"/>	Please refer to 2014 ACJ Fourth Stipulation Annual Report; refer to Table 2-3: CSO PCCM Program Summary, Table 2-7: Summary of Post-Sewer Separation Water Quality Data for CSO 022, Table 2-8: Summary of Post-Sewer Separation Water Quality Data for CSO 045; and Table 2-10: Summary of 2015 PCCM Program; Section 2.6: 2015 PCCM Program
Submitted <input checked="" type="checkbox"/>	
Approved <input type="checkbox"/>	
In Progress <input type="checkbox"/>	
Completed <input type="checkbox"/>	
Not Required <input type="checkbox"/>	

**Part II - CSO LTCP Control Information**

**SECTION B: OUTFALL INFORMATION**

*List all existing and active CSO the outfalls. Attach extra sheets, if necessary.*

Outfall #	Latitude	Longitude	Receiving Water/Classification	# of Regulators Associated with this Outfall	Type of Regulator(s) Associated with this Outfall (Fixed Dam, Float / Dynamic, Elevated Pipe, Wet Well Overflow, etc.)
			Refer to 2014 ACJ 4th Stipulation		
			Annual Report		
			See Table 2-2:		
			CSO Outfall Information		

**Part II - CSO LTCP Control Information**

*List all CSO the outfalls that have been closed or separated since LTCP development. Attach extra sheets, if necessary.*

Outfall #	Latitude	Longitude	Receiving Water/Classification	Indicate Reason for Closure
				Please refer to 2014 ACJ 4th Stipulation
				Annual Report; Table 2-2:CSO Outfall Information;
				Figure 2-2: CSO Outfalls and Abatement Projects



**Part II - CSO LTCP Control Information**

CSO Outfall #	No. of overflow events in the previous year		Total Annual CSO Volume Discharged (MG)		Total Annual Volume Captured or Diverted to POTW (MG)		# of CSO Outfalls		Indicate type of overflow measurements (e.g. metered, estimated, or modeled). <i>If other, please describe.</i>
	Baseline	Current	Baseline	Current	Baseline	Current	Baseline	Current	
									Please refer to 2014 ACJ 4th Stipulation
									Annual Report; refer to Table 3-1:
									Flow Meter Summary for the 2014
									Flow Monitoring Program
<b>TOTAL</b>									

**Part II - CSO LTCP Control Information**

**SECTION D: Collection System Information**

	Baseline	After CSO BMP and/or LTCP Implementation	Current
Percentage of the collection system owned by the permittee that is combined.			
Approximate no. of miles of combined sewers in the permittee owned system			
Number of combined sewer outfalls in the permittee owned system			
Average annual no. of CSO events in the permittee owned system			
Average annual CSO volume discharged from the permittee owned system (MG)			
Population served by the permittee's owned system			
Number of satellite system connections			

Use the space below to provide any further relevant information on the collection system. This should include a description of any unique ownership, operation and maintenance agreements or further explanation and description of satellite system connections. (Attach extra sheets, if necessary):

Onondaga County operates and maintains all large diameter trunk sewers, wet weather facilities, and pump stations at Richmond Street, Sackett Street, and Park Street. The remainder of the collection system is owned and operated by the City of Syracuse.

Please refer to 2014 ACJ Fourth Stipulation Annual Report; see Executive Summary Table ES-3: Pre-ACJ and Current CSOs and Drainage Basins Tributary to Metro, Table ES-5: 2014 Annual Capture Results; also refer to Table 2-5: Flow Meter Summary Table (Representative CSO Flow Metering Data)

**Part II - CSO LTCP Control Information**

**SECTION F: Use this section to describe how the implementation of the LTCP development and implementation have met the water quality standards of the receiving stream(s) and also objectives of the EPA CSO Control Policy (attach extra sheets as necessary):**

Please refer to the Onondaga County, New York ACJ Fourth Stipulation 2014 Annual Report (see Section 4.0); refer to Table 4-1: ACJ Gray Infrastructure Milestone Schedule; refer to Section 4.1.6: CSO 063 Conveyances Project; Section 4.1.7 CSO 061 Sewer Separation, and 4.1.8 Gray Infrastructure Operation and Maintenance (O&M) Requirements.

All planned milestones were met.

**SECTION G: Use the following space to summarize other planned CSO control projects (attach extra sheets as necessary):**

CSO 063 separation and connection to Lower Harbor Brook Storage Facility  
 CSO 061 separation

*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 gather and evaluate 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, to 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.*

<b>Name:</b>	<b>Official Title:</b>	<b>Phone:</b>
<b>Signature:</b>	<b>Date Signed:</b>	<b>Email:</b>



**PART III - CSO BEST MANAGEMENT PRACTICES**

*Check N/A if not required in the permit, consent order, or LTCP:*

1. CSO Maintenance/Inspection 6 NYCRR 750-2.8(a)(2) (EPA NMC: Proper Operation and Maintenance)	YES	NO	N/A
Is there a written program for the operation, inspection and maintenance of the CSS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Does the program include procedures for ALL outfalls in the permit?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Does the program include procedures for ALL regulators in the permit?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Are inspections conducted at least as frequently as required in the permit (weekly or monthly)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Are inspections conducted during dry and wet weather?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Do the inspection reports indicate visual inspection, any observed flows, incidence of rain or snowmelt, condition of equipment, and any work required?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Are inspection reports submitted to the DEC regional office with the monthly operating reports?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Is the written program sufficiently detailed? Indicate which of the following additional components are included in the plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pump Stations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sewer cleaning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sewer Manholes and Catch Basins	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outfalls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CSO Controls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there inter-municipal agreements which require inspection and maintenance?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are any changes planned in the upcoming year for the agreements to make them more effective?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the collection system mapped using GIS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entire system, including manholes and catch basins?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the past year, was significant mapping progress accomplished?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the upcoming year, is GIS mapping planned?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the collection system monitored using a SCADA system?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the past year, was significant progress accomplished in installing or expanding monitoring with a SCADA system?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In the upcoming year, is installation of a SCADA system planned or being expanded?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the municipality have an asset management plan that includes the collection system?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are funds available to carry out the BMP requirements?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are any major equipment purchases planned or expected in the next five years related to the BMP requirements? If yes, describe below	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the pump inventory, including spare parts, adequate for the upcoming year?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is sufficient staff training available?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PART III - CSO BEST MANAGEMENT PRACTICES**

Is funding for training adequate and available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>YES</b>	<b>NO</b>	<b>N/A</b>
Is sufficient staff training available?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is funding for training adequate and available?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have any work efforts or problems in the past year resulted in changes in overflows? If yes, describe below	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Fewer events	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Less volume	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Reduction in floatables, settleable solids or oil and grease discharged	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Reduction in industrial pollutants (chemicals)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Improvement in water quality of receiving waterbody	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
In the past year, was the inspection and maintenance program mostly:			
Reactive (responding to problems)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proactive (focusing on preventative maintenance to avoid problems)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If the program is mostly reactive, describe below any plans to shift the emphasis to prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)</b>			
See the Attached Appendix A-Syracuse Sanitary Combined Sewer System Maintenance Repair Totals for 2014 and Grit Totals for 2014			
See Onondaga County, New York ACJ Fourth Stipulation 2014 Annual Report Section 4.1.8: Gray Infrastructure Operation and Maintenance (O&M) Requirements			

**PART III - CSO BEST MANAGEMENT PRACTICES**

<b>2. Maximum Use of Collection System for Storage</b> 6 NYCRR 750-2.7(f), 750-2.8(a)(2), 750-2.8(a)(5) (EPA NMC: Maximum Use of Collection System for Storage)	Yes	No	N/A
Are CSOs minimized, and flow to the treatment plant maximized?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the hydraulic capacity of the system been evaluated?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there a continuous program of flushing and cleaning to prevent deposition of solids?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have regulators and weirs been adjusted to maximize storage without causing service backups?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the past year or the upcoming year, have any changes to structures or procedures been made or planned that will improve use of the collection system for storage? Describe below	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tidegates maintenance/repairs/replacement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FOG program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Removal of small systems bottlenecks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sewer cleaning and sediment removal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Removal of flow obstructions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regulator or weir adjustment - list locations below	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In-line storage: Inflatable dams or sluice gates	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wet Weather Operating Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do the municipalities within the combined sewer system have a water conservation program for homeowners?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In the upcoming year are there any studies, work, or projects planned (other than routine activities) to improve use of collection system for storage? Describe below.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)</b></p> <p>All grit interceptors and chambers are inspected and maintained to provide maximum performance.</p>			

**PART III - CSO BEST MANAGEMENT PRACTICES**

<b>3. Industrial Pretreatment</b> 6 NYCRR 750-2.7(f) and 2.9(a)(4 ) (EPA NMC: Review and Modify Pretreatment Requirements) <input type="checkbox"/> N/A	YES	NO	N/A
Has the impact on CSOs from nondomestic users that discharge toxic pollutants been evaluated, and steps taken to minimize such impacts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there an approved pretreatment or mini-pretreatment program?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If there is no pretreatment or min-pretreatment program, are there any nondomestic users? If No to both of the previous questions, go to BMP 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there an inventory of industrial dischargers? Is the following information included?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Volume of discharge?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pollutants in discharge?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are any pollutants classified as "persistent toxics" or bioaccumulative?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the location included on the collection system map?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any industrial discharges that could reach CSO outfalls?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, have any industrial dischargers been identified as contributing to a water quality impairment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, does the industry have a holding tank or EQ tank to store wastewater prior to discharge to the collection system?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, does the industry have a written plan to store or hold discharges during rain events?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, has the industry been asked to prepare a written plan to store or hold discharges?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the past year, have there been negotiations or changes to agreements with industrial dischargers which will potentially reduce impacts during CSO events? Describe below.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In the upcoming year, are any negotiations or changes to agreements with industrial dischargers planned which will potentially reduce impacts during CSO events? Describe below.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p><b>DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)</b></p> <p>Implementation of the Pretreatment Program and implementation of Wet Weather Operating Plan helps to minimize the impact of industrial discharges during CSO events.</p>			

**PART III - CSO BEST MANAGEMENT PRACTICES**

<b>4. Maximize Flow to POTW</b> 6 NYCRR 750-2.7(f), 2.8(a)(2), and 2.8(a)(5) (EPA NMC: Maximum Flow to POTW for Treatment) N/A	<input type="checkbox"/>	YES	NO	N/A
In the past year, were the headworks, primary treatment works and disinfection works able to pass the flows specified in the permit for all wet weather flows?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the past year, was the secondary treatment works able to treat the flows specified in the permit for all wet weather flows?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If the answer to either of the above questions was No, has a plan and schedule to accomplish this been submitted to the Department?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the past year have there been any physical modifications to the collection system which have allowed more flow to reach the POTW? Describe below.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are any physical modifications planned for the upcoming year?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there areas of the collection system, including pump stations that need additional study to evaluate capacity, condition, or to determine if illegal connections (i.e. inflow) exist? List below	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the past year, have any new problem areas been identified that restrict flow to the plant? List locations below	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the upcoming year, are there plans to address hydraulic restrictions or bottlenecks?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pipe replacement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Construction of relief sewer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Construction of overflow tank	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pump station improvements	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pump replacement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weir adjustment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smoke testing, dye testing to identify illicit connections	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS.** (Attach extra sheet if necessary)

Note that the reduced capacity at Metropolitan Wastewater Treatment Plan was the result of a construction project to improve the performance of preliminary treatment (screen and grit removal). The project communication and schedule were coordinated with NYSDEC Region 7.

PERMITTEE NAME: Onondaga County

SPDES PERMIT No.: NY-002 7081

**PART III - CSO BEST MANAGEMENT PRACTICES**

5. Wet Weather Operating Plan (WWOP) 6 NYCRR 750-2.8(a) (EPA NMC: None) <input type="checkbox"/> N/A	YES	NO	N/A
Has a WWOP been developed, specifying procedures for unit operations, to maximize treatment during wet weather events while not diminishing effluent quality or destabilizing treatment upon return to dry weather operation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the past year, did treatment of wet weather flows cause any effluent violations or destabilize treatment upon return to normal service?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the WWOP been developed in accordance with the DEC guidance, "Wet Weather Operating Practices for POTWs with Combined Sewers"? If no, describe changes needed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the WWOP been submitted to the Regional Office and Bureau of Water Permits (Albany) for review and approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If the collection system or plant has been modified or upgraded, has the WWOP been modified to reflect new flow rates or new procedures?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, has the revised plan been submitted to the Regional Office for approval?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does the plan identify the maximum flows through preliminary, primary, secondary treatment, tertiary, and disinfection units?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the upcoming year, are changes to the plan expected?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)</b></p>			

**PART III - CSO BEST MANAGEMENT PRACTICES**

<b>6. Prohibition of Dry Weather Overflows</b> 6 NYCRR 750-2.7 and 2.8(b)(2) (EPA NMC: Eliminate Dry Weather Overflows) N/A	<input type="checkbox"/>	YES	NO	N/A
In the past year, were there any dry weather overflows? If no, skip to BMP 7.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Were all dry weather overflows reported in accordance with 6 NYCRR Part 750-2.7 (incident reporting)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If dry weather overflows occurred, indicate which procedures or equipment have been improved or replaced	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Schedule for routine inspections	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Management, operation and maintenance program	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Modification of existing or issuance of new inter-municipal agreements	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
FOG program	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Removal of illicit connections	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
I/I Control program	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Leaky tidegates	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Adjustment and/or repair of regulators	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pumps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Auxiliary power	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Elimination of hydraulic bottlenecks	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Adequate dry weather flow capacity at the treatment plant	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Other, list below	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Has additional staff training been provided?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Has the likelihood of future dry weather overflows been eliminated? If not, describe additional information below.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<p><b>DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)</b></p> <p>In 2014 there was one (1) overflow event.</p> <p>Please refer to Appendix B- Service Area Summary Report ("City of Syracuse) (2014)</p>				

**PART III - CSO BEST MANAGEMENT PRACTICES**

<b>7. Control of Floatables and Settleable Solids</b> 6 NYCRR 750-2.8(a)(4) (EPA NMC: Control of Solid and Floatable Materials in CSOs)	<input type="checkbox"/> N/A	YES	NO	N/A
In the past year, were did any outfalls discharge floating solids, oil and grease, or solids of sewage origin?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have BMPs been implemented to eliminate or minimize the discharge of floatables and settleable solids?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have any of the following measures been implemented (either existing from previous years, in the past year) or will any be implemented in the upcoming year? If significant progress has been made in implementing these, or if significant improvements have occurred, describe below.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floatables quantification		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Booming and skimming of open waters		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Source controls (street cleaning, public education, household hazardous waste collection, solid waste collection, recycling, and/or composting of lawn/leaf/roadkill deer)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In-line netting		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screens		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Catch basin hoods		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are any changes needed or planned for the upcoming year? Describe additional information below.		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)</b></p> <p>Other: Green Infrastructure inserts are cleaned</p> <p>Please refer to attached Appendix C- 2014 Floatables Control Operations Report</p>				



**PART III - CSO BEST MANAGEMENT PRACTICES**

8. Combined Sewer System Replacement 6 NYCRR 750-2.10(i) (EPA NMC: None) <input type="checkbox"/> N/A	YES	NO	N/A
In the past year, were any combined sewers designed or constructed that were not approved by DEC?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, was the combined sewer replaced by separate sanitary and storm sewers to the greatest extent possible?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, were the separate sanitary and storm sewers designed and constructed simultaneously but without interconnections to the maximum extent practicable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the combined portion of the collection system completely identified on maps or GIS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any plans or current projects to separate combined sewers into sanitary and storm sewers?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there an approved engineering plan for this project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the past year, how many areas of combined sewer were separated? acres			
In the upcoming year, how many areas of combined sewer are scheduled to be separated? acres			
Are the sewer replacement projects on schedule? If no, describe below.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Overall, has the implementation of this BMP resulted in fewer overflow events and/or less volume discharged? Describe below.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)</b>			
<p>Under Combined Sewer separated-please refer to Section 4 (Sections 4.1.6: CSO 063 Conveyances Project and 4.1.7: CSO 061 Sewer Separation) of the Onondaga County, New York ACJ Fourth Stipulation 2014 Annual Report</p> <p>Please refer to Section 3 SWMM Update of the Onondaga County, New York ACJ Fourth Stipulation 2014 Annual Report</p>			

PERMITTEE NAME:

SPDES PERMIT No.: NY-002 7081

**PART III - CSO BEST MANAGEMENT PRACTICES**

9. Combined Sewer Extension 6 NYCRR 750-2.10(i) (EPA NMC: None) <input type="checkbox"/> N/A	YES	NO	N/A
In the past year, were any combined sewers extended not using separate sewers?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Were sanitary and storm sewers extensions designed and constructed simultaneously but without interconnections?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were any new sources of stormwater added to a separate sewer anywhere in the collection system?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If separate sewers were extended from combined sewers, was it demonstrated that the sewerage system had the ability to convey, and the treatment plant had the ability to adequately treat, the increased dry-weather flows?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If determined necessary by the Regional Water Engineer, was an assessment made of the effects of the increased flow of sanitary sewage or industrial waste on the strength of CSOs and their frequency of occurrence, including the impacts upon best usage of the receiving water?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has a recent combined sewer extension resulted in increased discharge from a CSO?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has a recent combined sewer extension resulted in increased flow to the POTW? Describe any CSO impacts below.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is any development planned upstream of a combined sewer?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, has a sewer extension plan been submitted for review and approval?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If the approval contained a flow credit requiring removal of I/I, what was the requirement or ratio?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Does the plan include any flow retention structures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)</b></p> <p>Onondaga County requires any additional flow to be offset on a 1:1 basis.</p> <p>Please refer to attached Appendix D-Onondaga County Water Environment Protection Matrix for Sanitary Sewer Offsets.</p>			

**PART III - CSO BEST MANAGEMENT PRACTICES**

10. Connection Prohibitions 6 NYCRR750-2.9(a)(5) (EPA NMC: None) <input type="checkbox"/> N/A	YES	NO	N/A
In the past year, were any sewer connections approved, in spite of a notice from DEC to prohibit further connections due to documented, recurrent instances of sewage backing up into house(s) or discharges of raw sewage onto the ground surface from surcharging manholes?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are new connections prohibited by the DEC? If no, skip to BMP 11.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is this due to basement backups?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is this due to surcharging manholes?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
In the upcoming year, is any work planned to either increase capacity or reduce hydraulic loading? Describe below.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)**

Onondaga County does not respond to residential calls within the corporate limits of the City of Syracuse. Onondaga County reports all sanitary overflow when events are observed.  
 Please refer to Appendix B- Sewer Area Summary Report ("City of Syracuse") 2014.

**PART III - CSO BEST MANAGEMENT PRACTICES**

11. <b>Septage and Hauled Waste</b> 6 NYCRR 750-2.7(f) and 2.8(a)(1) (EPA NMC: None) <input type="checkbox"/> N/A	YES	NO	N/A
In the past year, has there been any discharge or release of septage or hauled waste into the collection system upstream of a CSO?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does the facility have authorization from DEC to accept hauled waste or septage at a location other than the POTW? Describe below.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are any of these locations upstream of a CSO?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are there any agreements with haulers to accept waste at a location other than at the POTW?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In the past year, was any hauled waste or septage accepted at a location other than at the POTW?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
What was the total volume received at locations other than the POTW?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is there a dedicated location to discharge septage at the POTW?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there restrictions on when the plant accepts hauled waste or septage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have there been any changes to the POTW's policy on septage and hauled waste in the past year? Are any changes needed or planned in the upcoming year?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)**

The County has only one dedicated receiving station for hauled waste. The location is staffed 7 days a week, and wastes are not accepted during bypass events.

The County's policies on septage and hauled wastes were revised in January 2015 to update insurance requirements for haulers.

**PART III - CSO BEST MANAGEMENT PRACTICES**

12. Control of Run-off 6 NYCRR750- 2.1(e) (EPA NMC: None) <input type="checkbox"/> N/A	YES	NO	N/A
Is sediment in runoff from construction zones entering catch basins in the combined sewer system?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is there adequate communication between the local municipal department that enforces local stormwater codes and ordinances and the collection system staff regarding stormwater runoff?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do the municipalities within the combined sewer system have adequate storm water pollution prevention programs to reduce pollutants in stormwater?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Annual household hazardous waste collection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Autumn leaf collection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lawn clippings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Christmas tree pickup	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Roadkill deer composting	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fertilizer and pesticide management	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Enforcement of litter laws	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Public education programs on composting	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are any changes needed in the implementation of this BMP to reduce the number of CSO events, the volume discharged, or pollutants in the discharge? If yes, describe below.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)**

The City of Syracuse is the responsible party for MS4 in the collection system.

Onondaga County is working to get public outreach and inter-municipal cooperation to capture floatable debris before it enters the collection system.

**PART III - CSO BEST MANAGEMENT PRACTICES**

13. <b>Public Notification</b> 6 NYCRR 750-1.12 (EPA NMC: Public Notification) <input type="checkbox"/> N/A	YES	NO	N/A
Have identification signs been installed and maintained at all CSO outfalls owned and operated by the permittee?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are all signs placed at or near the outfall?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are the signs easily readable by the public?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are the signs a minimum size of 18" by 24"?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do the signs have white letters on a green background?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do all the signs contain the following information:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SPDES permit number	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outfall number	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Permittee name, contact name and phone number at business office or NYSDEC Division of Water regional contact address and phone number	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For waters that are Class B or higher, is a public notification program implemented to inform citizens of the location and occurrence of CSO events?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does this program include a mechanism (public media broadcast, standing beach advisories, newspaper notice, etc) to alert potential users of the receiving waters affected by CSOs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does this program include a system to determine the nature and duration of conditions that are potentially harmful to users of these receiving waters due to CSOs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were there any problems in the past year with missing or damaged signs? Describe below.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is there a written public notification plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Does the plan list all methods used to notify the public of CSO events?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Does the plan list outfalls where signs are posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS.** (Attach extra sheet if necessary)

Please refer to the web site for CSO information. (<http://www.cso.savetherain.us>)

Text and e-mail alerts are available to individuals who sign up on the web site to be alerted of potential CSO activities.

Several CSO discharge into the covered portion of Harbor Brook and the discharges occur below grade.

**PART III - CSO BEST MANAGEMENT PRACTICES**

14. Characterization and Monitoring (6 NYCRR 750-1.11(a), 2.5(a) and 2.7(g)) (EPA NMC: Monitoring)	YES	NO	N/A
If required in the permit, has the combined sewer system been characterized to determine the frequency of overflows, and identify CSO impacts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a baseline sampling program established as part of the LTCP development?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are all outfalls monitored during discharge events for:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flow Volume:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Frequency:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Duration:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If all outfalls are not monitored, explain how sufficient data is obtained to document the success of the BMPs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List locations of rain gauges or the source of data, below.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a Post Construction Modeling and Monitoring plan been submitted to the Department for review and approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the Department approved the Post Construction Modeling and Monitoring plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Has post construction monitoring and modeling of the receiving water begun? Attach results if this has not already been provided.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**DESCRIBE BELOW HOW THIS BMP IMPLEMENTATION HAS MET THE REQUIREMENTS OF THE SPDES PERMIT, AND THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS. (Attach extra sheet if necessary)**

The post construction modeling and monitoring plan is in process.

For clarification, the thirteen (13) representative CSOs are monitored with flow meters. Refer to the 2014 ACJ Annual Report Table 2-4: Representative Flow Monitoring Locations and Table 2-5: 2014 Flow Meter Summary Table. Refer to Table 2-2: CSO Outfall Information (provides flow monitoring efforts). For all other CSOs, the County relies on the SWMM mode for frequency and duration of discharge events.

PERMITTEE NAME: Onondaga County

SPDES PERMIT No.: NY-002 7081

**PART III - CSO BEST MANAGEMENT PRACTICES**

15. Annual report 6 NYCRR 750-2.1(i) <input type="checkbox"/> N/A (EPA NMC: None; Required in LTCP permit)	YES	NO	N/A
Is this report being used to satisfy BMP 15, Annual report, and the BMP checklist?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is existing documentation of implementation of the BMPs included?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is this annual report submitted by January 31 to the Regional Office and the Bureau of Water Permits (Albany)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Attach any additional information necessary to document the implementation of BMPs in the past year or list plans for the upcoming year.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall, was implementation of the BMPs effective in controlling and minimizing CSO discharges?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, list any improvements needed that have not been described elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



PERMITTEE NAME: Onondaga County

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**PART III - CSO BEST MANAGEMENT PRACTICES**

**ADDITIONAL INFORMATION:**

DESCRIBE BELOW IN DETAIL OTHER "MEASURE OF SUCCESS" ABOVE AND BEYOND THE REQUIREMENTS OF THE SPDES PERMIT. DESCRIBE HOW ADDITIONAL PROJECT(S) HAS HELPED TO MEET THE OBJECTIVES OF THE EPA NINE MINIMUM CONTROLS POLICY. (Attach extra sheet if necessary)

This report is in concert with the Onondaga County, New York ACJ Fourth Stipulation 2014 Annual Report due on April 1.

PERMITTEE NAME: \_\_\_\_\_

SPDES PERMIT NO.: NY-\_\_\_\_\_

**PART III - CSO BEST MANAGEMENT PRACTICES**

**SECTION D: For Multiple Permittees Only**

Permittee Name	SPDES Permit Name	SPDES Permit No

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**PART III - CSO BEST MANAGEMENT PRACTICES****SECTION E: GLOSSARY/ACRONYMS**

For the purposes of this annual report, the following terms and acronyms are described below:

**Baseline:** Conditions before the development and/or implementation of CSO BMPs and/or LTCP.

**Best Management Practice (BMP):** Permit condition used in place of or in conjunction with effluent limitations to prevent or control the discharge of pollutants. May include schedule of activities, prohibition of practices, maintenance procedure, or other management practice. BMPs may include, but are not limited to, treatment requirements, operating procedures, or practices to control plant site runoff, spillage, leaks, sludge or waste disposal, or drainage from raw material storage.

**Bypass:** A discharge of wastewater, stormwater, or combination of both, around a treatment unit designed for the removal of pollutants.

**Catch Basin:** A chamber usually built at the curblineline of a street, which admits surface water for discharge into a storm drain

**Collection System:** A wastewater collection system which conveys sanitary wastewaters (domestic, commercial and industrial wastewaters) and stormwater through a single pipe to a publicly owned treatment works for treatment prior to discharge to surface waters.

**Combined Sewer:** A sewer designed to carry wastewater and stormwater runoff.

**Combined Sewer Overflows (CSO):** A discharge of untreated wastewater from a combined sewer system at a point prior to the headworks of a publicly owned treatment works. CSOs generally occur during wet weather (rainfall or snowmelt). During periods of wet weather, these systems become overloaded, bypass treatment works, and discharge directly to receiving waters.

**Combined Sewer System (CSS):** A wastewater collection system that conveys sanitary wastewaters and storm water through a single pipe to a publicly owned treatment works for treatment prior to discharge to surface waters.

**Demonstrative Regulatory Approach:** Control approach where a permittee develops and implement an LTCP that meets the state water quality standards. A permittee could develop an LTCP that would provide for attainment of water quality standards, or it could use a total maximum daily load (TMDL) to *demonstrate* that water quality standards can be attained through a combination of CSO controls and other controls.

**EPA:** Environmental Protection Agency

**EQ Tank:** Equalization Tank often used to smooth hydraulic peaks to a POTW or WWTP.

**Fats Oil & Grease (FOG)**

**Geographic Information System (GIS)** is a computer-based tool for mapping and analyzing features in the environment. GIS support a wide range of activities including water quality modeling, watershed planning, and wetlands permitting and mitigation.

**GI:** Green" Infrastructure

**Infiltration/Inflow (I/I):** Rainwater, snowmelt, or groundwater flowing into separate sanitary or combined sewers, typically introduced via connected roof downspouts and/or building footing drains or infiltrating into the pipe through cracks in the pipe walls or joints.

**This Period:** Period covering the last 12 months from January to December

**Last Period:** Activities covering the 12 calendar months prior to the end of the current period

**PART III - CSO BEST MANAGEMENT PRACTICES**

**Long Term Control Plan (LTCP):** An engineering document that characterizes and assesses CSO discharge to a receiving waterbody. The goal of the Plan is to comply with the water quality standards of the receiving waterbody.

**Million Gallons per Day (MGD)** is a unit of flow commonly used for wastewater discharges. One mgd is equivalent to 1.547 cubic feet per second.

**Multiple Permittees** here is described as when a group of permittees (e.g. Albany Pool) is responsible to develop a single LTCP or when a single LTCP is required for multiple SPDES permit under a single permittee (e.g. NYC).

**Nine Minimum Controls (NMC)** provide information on nine minimum technology-based controls that permittees are expected to use to address CSO problems, without extensive engineering studies or significant construction costs, before long-term measures are taken.

**NYSDEC:** New State Department of Environmental Conservation (interchangeably uses as DEC)

**Publicly Owned Treatment Works (POTW):** Also commonly referred to as "treatment facility, WWTP (Wastewater Treatment Plant)

**SPDES Permit:** State Pollutant Discharge Elimination System Permit. A permit issued by DEC, authorized under the federal Clean Water Act, to discharge treated wastewater to waters of the United States.

**Overflow Events:** An event starts once an overflow starts from an outfall, and ends once the overflow stops and the pumpback to treatment facility have ended.

**Presumptive Approach:** The presumption approach is based on the assumption that an LTCP that meets certain minimum defined performance criteria. The "presumption approach," under which achievement of certain performance criteria (i.e., 4-6 untreated overflow events or 85 percent by volume capture) would be presumed to provide an adequate level of control to attain water quality standards

**Raw Sewage:** Untreated sanitary sewage.

**Sanitary Sewer Overflow (SSO)** is an untreated or partially treated sewage discharge from the sanitary sewer collection system.

**Separate Sewer (SS):** A pipe or conduit intended to convey only sanitary sewage to a wastewater treatment facility.

**SPDES:** State Pollutant Discharge Elimination System

**Sewer System:** A public or privately owned wastewater collection facility designed and used to convey or treat sanitary sewage or sanitary sewage and storm water. Sewer system does not include an on-site wastewater treatment system serving one residential unit or duplex.

**Supervisory Control and Data Acquisition (SCADA)** is a complex computer system that provides automatic control of stormwater storage and overflows at various locations within the sewer system.

**Volume Discharged:** Total discharge volume for the event (in millions of gallons) from each CSO outfall within this reporting period.

**Volume Captured:** Total discharge volume for the event (in millions of gallons) that were either captured via an offline treatment facility before discharge or diverted to the WWTP for treatment.

**WWOP:** Wet Weather Operating Plan

**Water Quality Standards (WQS)** are regulations that establish the uses for which surface waters of the state are protected and include numeric and narrative criteria to protect those uses.