

MS4 Annual Report Form

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

2	0	0	9
---	---	---	---

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N	Y	R	2	0	3	1	6	
---	---	---	---	---	---	---	---	--

Appendix

<u>Page</u>	<u>Item</u>
1	Stormwater Online Survey
2	Ardsley School District and Village Newsletter Articles
3	Literature Log
4	Scout Clean up and Erosion Awareness Event Photos
5	Village of Ardsley Drainage Map
6 - 13	Outfall Inspection Sheets 3/2008 – 3/2009
14 – 22	Department of Public Works Log Sheets 3/2008 – 3/2009

MS4 Annual Report Form

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

2	0	0	9
---	---	---	---

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N	Y	R	2	0	A	3	1	6
---	---	---	---	---	---	---	---	---

Village of Ardsley Phase II Stormwater Management Survey

We're trying to clean up all the waters of the United States, including the ones right here in Ardsley – the Saw Mill River and the Sprain Brook.

To help us out, please take a minute to fill out our survey.

1. Keeping more runoff water on your own property is a big help.

Do your roof drains run to a dry well? **Yes**___ **No**___

Have you put in a dry well in the last five years? **Yes**___ **No**___

Have you redirected your downspouts onto your lawn or into your garden? **Yes**___ **No**___

Do you use a rain barrel? **Yes**___ **No**___

Would you consider using a rain barrel? **Yes**___ **No**___

Information about rain barrels, rain gardens and more, www.marc.org/Environment/water.

2. Using less pesticide, herbicide and fertilizer on your property keeps them out of our water.

Do you use lawn chemicals sparingly? **Yes**___ **No**___

Have you replanted some lawn with plants or a rain garden? **Yes**___ **No**___

Do you use alternative methods (native plants, compost, soil testing)? **Yes**___ **No**___

Would you consider using alternative methods? **Yes**___ **No**___

www.grassroots.org is a great resource for alternate methods.

3. We need to use less salt and sand in the winter to keep them out of the water, too.

Do you try to break up your driveway ice instead of salting? **Yes**___ **No**___

Do your downspouts empty onto the driveway? **Yes**___ **No**___

Do downspouts empty into the street (water runs down street before getting to drain)? **Yes**___ **No**___

Have you fixed your leaky gutters so they don't cause icy buildup on the walkways? **Yes**___ **No**___

These may be problems, so please make a note for fixing them in the spring.

4. Pet waste can be a big source of water pathogens.

Do you always pick up after your dog? **Yes**___ **No**___ **I don't have a dog.**___

Do you dispose of the waste in a trash barrel or carry it home for proper disposal? **Yes**___ **No**___

Never throw pet waste or anything else into the storm drains. They are for runoff water only.

Thanks so much for taking the survey!

Please indicate if you are an Ardsley resident: **Yes___ **No**___**

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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

Name of MS4/Coalition **VILLAGE OF ARDSLEY**

SPDES ID

N Y R 2 0 A 3 1 6

June 2008

The Ardsley Villager

A Publication of the Ardsley Village Board of Trustees

STORMWATER NEWS: H₂O = \$

Yes, water conservation makes "cents" (sense)! It's expensive to chlorinate our drinkable water and treat wastewater. Here are some summer garden tips: buy hardy, native plants which require less herbicide, pesticide and water, mow lawns less frequently to develop strong roots, don't over water and try using a rain barrel to collect water for your plants. Save money and reduce polluted runoff, too.

The Stormwater Annual Report 2007-8 is now available at www.ardsleyvillage.com. Village Hall and the Library. NYSDEC has issued a new SPDES permit to the Village covering May 1, 2008 to April 30, 2010. Stormwater Management Program continues, Annual Reports in June.

Lastly, looking for a change of scene that's "fuel-friendly"? Visit the Bronx River. There's a great hiking and biking path and two

Stormwater spots to visit. Park at the Crestwood RR station in Tuckahoe and walk a few yards north on the trail to the SW Management Demo garden. Also, stop by the County Center parking lot in White Plains and check out progress on conversion to a SW Management Practices Demo. Bronx River clean-up is ongoing and a healthier waterway will benefit all of us. Keep up the good work helping to make our water cleaner and have a great summer!

December 2008

The Ardsley Villager

A Publication of the Ardsley Village Board of Trustees

STORMWATER UPDATE: DON'T "P" ON THE LAWN!

"P" for Phosphorous, that is! The Environmental Subcommittee of the County Board of Legislators is hard at work on regulations to lower the phosphorous content of lawn fertilizer. The law is not yet final, but the message is clear. Too much fertilizer running off lawns is causing algae overgrowth and very poor water quality in our lakes and streams. You can do your part right now by reducing your use of lawn fertilizer and/or asking your landscaper to do so, too.

You can also help out by using less chemical pesticide. ICM (Integrated Cultural Management) is a lawn and garden technique using native plants and grasses, compost "tea" and even beneficial fungi. For more information, go to www.grassrootsinfo.org.

Winter's on its way and we all appreciate the incredible efforts of Highway Dept to keep our roads clear and safe. But our road salt needs a home! We're happy to report that Advanced Storage Technology, which designs salt shed for groups across the State including the NYS Thruway Authority, is busy preparing plans for Ardsley's salt shed on Elm Street. Fish and other aquatic life in the Saw Mill River will cheer this runoff water quality improvement. Expect construction in summer 2009.

It's a good idea to limit home pavement salting as much as possible, too. And it's never too early to plan a spring water quality improvement project. The Village may try a porous pavement application in Bicentennial Park. The pathway may be replaced with a Geogrid system or Flexi-pave, a porous pavement made from recycled tires. Either way, stormwater runoff will get a better chance to get back into the ground.

Watch for Ardsley's Rain Barrel drive coming this spring and thanks for keeping our water cleaner! - Lorraine Kuhn

September 2008

The Ardsley Villager

A Publication of the Ardsley Village Board of Trustees

STORMWATER NEWS: MUDDY WATERS

No, we're not singin' the blues. That is unless your backyard construction project is washing dirt into the street with every rainstorm. The Village has had an Erosion and Sedimentation Control (ESC) Law on the books since 2005. NYSDEC is requiring an update of that Law to ensure certification of

SWPPP's (Stormwater Pollution Prevention Plans). Just to check up, you need a SWPPP if your project exceeds one acre, is a teardown of any size, is new construction of any size on a previously undeveloped lot or is part of a multi-unit development project. Make sure your contractor is in compliance.

Last tip of the summer - please don't over-water. We've had plenty of rain. Turn off that automatic sprinkler timer and check that your watering pattern doesn't include the street or driveway.

Fall is coming. Place those leaves in biodegradable bags, and keep our storm drains clear. Thanks for making our water cleaner! - Lorraine Kuhn, SWM Asst.

RECYCLING: Two large plastic blue containers were placed recently in Ashford Park and McDowell Park for use by the general public. It is hoped that these will be the first of several set up around the heavily pedestrian trafficked areas of the Village for bottles and cans particularly near bus stops. Thus far, the ones set up in the parks have proven to be very popular since the DPW has to empty them often. The blue containers were the suggestion of the Environmental Action Committee chaired by Susan Porcino.

THE POOPER SCOOPER LAW

Word has reached our offices that dog walkers are not picking up after their pets. Please be advised that there is a local law prohibiting this action, and that observance of this law is not optional.

Section 190-10 of the Ardsley Village Code states that:

"No person owning, harboring, keeping or in charge of any dog shall cause, suffer, or allow such dog to soil, defile, defecate on, or commit any nuisance on any common thoroughfare: sidewalk, passageway, bypath, play area, park, or any place where people congregate or walk or upon any public property whatsoever or upon any private property without the permission of the owner of said property... The person who curbs a dog shall immediately remove all feces deposited by such by any sanitary method..."

Therefore, if you are the owner of a dog or in charge of one, please pick up after the pet. No one should have to experience the indignity of stepping into what dogs leave behind on front walks, driveways, or lawns. If a dog or dog owner is causing a nuisance in your neighborhood, please contact the Police Desk (693-1700) immediately. There is little the Police can do once the dogs and their walkers have departed. I thank you in advance for your cooperation in this matter. - George F. Calvi, Village Manager

Ardsley Union Free School District

Ardsley 100

THE CONNECTION



Integrated Pest Management (IPM)

IPM is a process for managing, preventing and suppressing pests with minimal impact on human health, the environment and non-target organisms. IPM incorporates all reasonable measures by properly identifying, monitoring and controlling pests through the use of cultural, physical, biological and chemical control methods to reduce pests to acceptable levels. Pesticides are only used as a last resort, and if pesticides are needed, the least toxic pest-specific alternative is always selected. It is rare that we have to use a pesticide. There were no pesticides used in any of our buildings last year.

Pesticide Neighbor Notification Law...Section 409-h of the Education Law requires schools to provide a written notice to all parents, guardians and staff at the beginning of each school year that includes the following points:

- Pesticide products may be used periodically throughout the school year.
- Schools are required to maintain a list of parents, guardians and staff who wish to receive 48-hour written advanced notice of an actual pesticide application.
- The name of the school representative to contact for further information.

If you have any pesticide related questions, please call Joseph Urbanowicz, Director of Facilities and Transportation, at 914-693-6300 X 2208. If you would like to register to receive a written notification 48 hours prior to an actual application, please write to Mr. Urbanowicz at Ardsley UFSD, 500 Farm Road, Ardsley, NY 10502 indicating that you would like to be put on a list.

MS4 Annual Report Form

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

2	0	0	9
---	---	---	---

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N	Y	R	2	0	A	3	1	6
---	---	---	---	---	---	---	---	---

Item : Literature Distribution Log – number of copies taken (3/10/2008 – 3/10/2009)

LOCATION											
	“After the Storm” (EPA 833 B03002)	“Make Your Home the Solution to SW Pollution” (EPA 833B03003)	“Grassroots Healthy Lawns” (Grassroots/ Westchester County Planning)	“New Req’s for Small Construc Projects” (NYSDEC)	“When It Drains” bookmark (Hudson River Estuary)	“Don’t Dump, Drains to Saw Mill River” Bumper sticker (SMRC)	“Step by Step” (LI Sound Study EPA)	“Guide to Living in Harmony with Streams” (Chemung County 2006)	“Green Cycle” (Westchester County Planning)	“Geosynthetics for SW Management” (ACF Environmental /Westchester County Planning)	Outreach Letters
Village Hall		5	3	4		7	1				
Library		12	23			3	6	2	5		
SMO										1	
AHS AP Env Sci class	3	3				3		1			
Earth Day Erosion Awareness event		5			13						
League of Women Voters meeting	9										
Business Outreach	11										11
Outfall Testing	4										4

Other items distributed: 17 Village of Ardsley SW Program refrigerator magnets given out at **Eath Day Erosion Awareness event.**

2 Construction BMP posters given out at **LWV meeting.**

1 Construction BMP poster given out during **Outfall Testing.**

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

NYR 20A316

PAGE 2 — THE RIVERTOWNS ENTERPRISE, FRIDAY, MARCH 21, 2008



Big haul

Boy Scouts, their parents, and members of Ardsley's Highway Department toss bags of trash into the back of a garbage truck after the Scout's annual village-wide cleanup on March 15. The refuse was brought to the village's public library where it was picked up.



Bicentennial Planting / Erosion Awareness Event

Scout Clean up

Before



After



Brownie Scout Planting Event

MS4 Annual Report Form

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

2	0	0	9
---	---	---	---

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY									
--------------------	--	--	--	--	--	--	--	--	--

SPDES ID

N	Y	R	2	0	A	3	1	6
---	---	---	---	---	---	---	---	---

Village of Ardsley Watershed Map



Saw Mill River Watershed:
(H-4 1301-0007, 303d listed)
POC – floatables, chlordane

Bronx River Watershed:
(ER-3 1702-0107, 303d listed)
POC – dissolved oxygen/oxygen demand, pathogens



OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data SUNNY

Subwatershed: Sprain Brook Outfall ID: AZ 35
 Today's date: 3/10/2008 Time (Military): 3:42 P.M.
 Investigators: Japisa, Kuhn Form completed by: Jf Kuhn
 Temperature (°F): 26.1 Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"
 Latitude: N 41° 7' 15" Longitude: W 73° 50' 39" GPS Unit: _____ GPS LMK #: _____
 Camera: _____ Photo #: _____
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☒ Suburban Residential Other: Ardsley High School
☐ Commercial Known Industries: _____
 Notes (e.g., origin of outfall, if known): Alongton Road

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box Other: _____	Single Double Triple Other: _____ Diameter/Dimensions: <u>22"</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (if present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input checked="" type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input checked="" type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	ft. In	Tape measure	
	Measured length	ft. In	Tape measure	
	Time of travel	S	Stop watch	
	Temperature	°F	Thermometer	
	pH	pH Units	Test strip/Probe	
	Ammonia	mg/L	Test strip	

9.31, 9.31 Ave rate = 59.1 gal/min

OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data SUNNY

Subwatershed: Saw Mill River Outfall ID: OF 172 / AZ 17
 Today's date: 3/17/2008 Time (Military): 3:45 P.M.
 Investigators: Japisa, Kuhn Form completed by: Jf Kuhn
 Temperature (°F): 30 Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"
 Latitude: N 41° 00' 50" Longitude: W 73° 50' 16" GPS Unit: _____ GPS LMK #: _____
 Camera: _____ Photo #: _____
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☒ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☒ Suburban Residential Other: DeCicco strip mall, Bicentennial Rd
☒ Commercial Known Industries: _____
 Notes (e.g., origin of outfall, if known): Route 9A

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel Other: <u>brick lined</u>	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box Other: _____	Single Double Triple Other: _____ Diameter/Dimensions: <u>11" 10"</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (if present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input checked="" type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input checked="" type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	ft. In	Tape measure	
	Measured length	ft. In	Tape measure	
	Time of travel	S	Stop watch	
	Temperature	°F	Thermometer	
	pH	pH Units	Test strip/Probe	
	Ammonia	mg/L	Test strip	

6.33, 6.00 Ave rate = 270.3 gal/min

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No *(If No, Skip to Section 5)*

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input type="checkbox"/> No	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/> No	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/> No	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <u>slight foam</u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible rags or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, rags, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No *(If No, Skip to Section 6)*

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	
Deposits/Stains	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/> No	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/> No	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sods <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/> No	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes, type: <input checked="" type="checkbox"/> ORM <input type="checkbox"/> Cask dam</i>

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?



Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No *(If No, Skip to Section 5)*

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input type="checkbox"/> No	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/> No	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/> No	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <u>slight on pipe</u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible rags or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, rags, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No *(If No, Skip to Section 6)*

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/> No	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	
Deposits/Stains	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other: <u>sediment</u>	
Abnormal Vegetation	<input type="checkbox"/> No	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/> No	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sods <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/> No	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes, type: <input checked="" type="checkbox"/> ORM <input type="checkbox"/> Cask dam</i>

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?



OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: BxRV/Jordan Brook Outfall ID: SUNNY OF 6 / A231
 Today's date: 3/24/2008 Time (Military): 3:57 P.M.
 Investigators: Japinga, Kuhn Form completed by: AJ Kuhn
 Temperature (°F): 32.1 Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"
 Latitude: 41° 01' 11.4" Longitude: W 73° 49' 12.1" GPS Unit: Garmin etrex GPS LMK #:
 Camera: Nikon Coolpix Photo #:
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☒ Suburban Residential Other: AHS
☐ Commercial Known Industries:
 Notes (e.g., origin of outfall, if known): Dellwood Lane

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: <u></u>	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: <u></u>	Diameter/Dimensions: <u>10"</u>	In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u></u>	Depth: <u></u> Top Width: <u></u> Bottom Width: <u></u>	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Skip to Section 5			
Flow Description (If present)	<input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

EAST PIPE TO RD FLOW

PARAMETER	RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle
	Time to fill	Sec	
	Flow depth	In	Tape measure
<input checked="" type="checkbox"/> Flow #2	Flow width	Fl. In	Tape measure
	Measured length	Fl. In	Tape measure
	Time of travel	S	Stop watch
	Temperature	°F	Thermometer
	pH	pH Units	Test strip/Probe
	Ammonia	mg/L	Test strip

pH 6.5 = 6.4
 Ave. rate = 41.8 gal/min

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input checked="" type="checkbox"/> <u>N/A</u>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input checked="" type="checkbox"/>	<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <u></u>	<input checked="" type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input checked="" type="checkbox"/>	See severity <u>1-2 (cloudy)</u>	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input checked="" type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input checked="" type="checkbox"/> Food/waste (leaves, twigs) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input checked="" type="checkbox"/> 2 - Some, indications of origin (e.g., possible rods or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, rods, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/> <u>N/A</u>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Sludge	<input checked="" type="checkbox"/>	<input type="checkbox"/> Only <input checked="" type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other: <u></u>	
Abnormal Vegetation	<input type="checkbox"/> <u>N/A</u>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input checked="" type="checkbox"/>	<input type="checkbox"/> Algae <input type="checkbox"/> Sludge <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other: <u></u>	
Pipe benthic growth	<input checked="" type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <u></u>	

Section 6: Overall Outfall Characterization

☐ Unlikely ☒ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No
 2. If yes, collected from: ☐ Flow ☐ Pool
 3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☒ ORM ☐ Cask/dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?



OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: Saw Mill River Outfall ID: SLIGHTLY OVERCAST A2 55
 Today's date: 5/16/2008 Time (Military): 3:55 PM
 Investigators: Japinga, Kuhn Form completed by: AJ Kuhn
 Temperature (°F): 72.1 Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"
 Latitude: N 41° 04' 39.1" Longitude: W 73° 51' 04.9" GPS Unit: Garmin etrex GPS LMK #:
 Camera: Nikon Coolpix Photo #:
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☒ Suburban Residential Other: NYS Thruway exit
☐ Commercial Known Industries:
 Notes (e.g., origin of outfall, if known): Ridge Road, Alameda Ave
to measure and verify if any discharge is present at the exit

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: <u></u>	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: <u></u>	Diameter/Dimensions: <u>1"</u>	In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u></u>	Depth: <u></u> Top Width: <u></u> Bottom Width: <u></u>	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, Skip to Section 5			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

Flow #1

PARAMETER	RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle
	Time to fill	Sec	
	Flow depth	In	Tape measure
<input checked="" type="checkbox"/> Flow #2	Flow width	Fl. In	Tape measure
	Measured length	Fl. In	Tape measure
	Time of travel	S	Stop watch
	Temperature	°F	Thermometer
	pH	pH Units	Test strip/Probe
	Ammonia	mg/L	Test strip

Ave. rate = 50.4 gal/min

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input checked="" type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <u>orange peels</u>	<input type="checkbox"/> 1 - Faint <input checked="" type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input checked="" type="checkbox"/>	<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input checked="" type="checkbox"/>	See severity <u>1-2 (cloudy)</u>	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input checked="" type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sludge <input type="checkbox"/> Petroleum (oil sheen) <input checked="" type="checkbox"/> gross droppings <input type="checkbox"/> Other: <u>orange peels</u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input checked="" type="checkbox"/> 2 - Some, indications of origin (e.g., possible rods or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, rods, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/> <u>N/A</u>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Sludge	<input checked="" type="checkbox"/>	<input type="checkbox"/> Only <input checked="" type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other: <u></u>	
Abnormal Vegetation	<input type="checkbox"/> <u>N/A</u>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input checked="" type="checkbox"/>	<input type="checkbox"/> Algae <input type="checkbox"/> Sludge <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other: <u></u>	
Pipe benthic growth	<input type="checkbox"/> <u>N/A</u>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <u></u>	

Section 6: Overall Outfall Characterization

☐ Unlikely ☒ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☐ No
 2. If yes, collected from: ☐ Flow ☐ Pool
 3. Intermittent flow trap set? ☒ Yes ☐ No If Yes, type: ☒ ORM ☐ Cask/dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?



OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: Saw Mill River Outfall ID: A251 / OF 135
 Today's date: 7/7/2008 Time (Military): 4:33 PM
 Investigators: Javiera Kuhn Form completed by: X / Kuhn
 Temperature (°F): 72°F Rainfall (in.): Last 24 hours: 0.11 Last 48 hours: 0.38"
 Latitude: N 41° 06' 00" Longitude: W 73° 30' 50" GPS Unit: Garmin etrex GPS LMK #:
 Camera: Nikon Coolpix Photo #:
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☒ Institutional
☒ Suburban Residential Other:
☐ Commercial Known Industries: Concord Rd Elementary
 Notes (e.g., origin of outfall, if known): Heathfield Rd

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP <input type="checkbox"/> Circular <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Elliptical <input type="checkbox"/> Steel <input type="checkbox"/> Box <input type="checkbox"/> Double <input type="checkbox"/> Other: <u></u> <input type="checkbox"/> Other: <u></u> <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple	Diameter/Dimensions: <u>3" 3"</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u></u>	Depth: <u></u> Top Width: <u></u> Bottom Width: <u></u>	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (if present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

PARAMETER	RESULT	UNIT	EQUIPMENT
<input checked="" type="checkbox"/> Flow #1	Volume: <u>75.175</u> Time to fill: <u>2:29</u> Flow depth: <u>2.23</u> Flow width: <u>2.63</u> Measured length: <u>2.123</u> Time of travel: <u></u>	<u>gal</u> <u>min</u> <u>in</u> <u>ft</u> <u>ft</u> <u>s</u>	Bottle Tape measure Tape measure Tape measure Stop watch
<input type="checkbox"/> Flow #2			
Temperature	<u>71</u>	<u>°F</u>	Thermometer
pH	<u>6.8</u>	<u>pH Units</u>	Test strip/Probe
Ammonia	<u>0</u>	<u>mg/L</u>	Test strip

Ave rate = 1.06 gal/min

OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: Box Riv / Spring Brook Outfall ID: OF 24 (Sewer)
 Today's date: 10/3/2008 Time (Military): 1615
 Investigators: Gourevitch, Kuhn Form completed by: Cow (6/1/10)
 Temperature (°F): 55° Rainfall (in.): Last 24 hours: 0.01 Last 48 hours: 0.01"
 Latitude: 41° 01' 00" N Longitude: 73° 49' 30" W GPS Unit: Garmin etrex GPS LMK #:
 Camera: Nikon Coolpix Photo #:
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☒ Institutional
☒ Suburban Residential Other: AHS, Veterans Park
☐ Commercial Known Industries:
 Notes (e.g., origin of outfall, if known): Jordan Lane, Heathfield Rd

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input checked="" type="checkbox"/> Circular <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Elliptical <input type="checkbox"/> Steel <input type="checkbox"/> Box <input type="checkbox"/> Double <input type="checkbox"/> Other: <u></u> <input type="checkbox"/> Other: <u></u> <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Double <input type="checkbox"/> Triple	Diameter/Dimensions: <u>6"</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u></u>	Depth: <u></u> Top Width: <u></u> Bottom Width: <u></u>	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (if present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

PARAMETER	RESULT	UNIT	EQUIPMENT
<input checked="" type="checkbox"/> Flow #1	Volume: <u>230</u> Time to fill: <u>5</u> Flow depth: <u>4.12</u> Flow width: <u>3.24</u> Measured length: <u>3.72</u> Time of travel: <u>3.61</u>	<u>gal</u> <u>min</u> <u>in</u> <u>ft</u> <u>ft</u> <u>s</u>	Bottle Tape measure Tape measure Tape measure Stop watch
<input type="checkbox"/> Flow #2			
Temperature	<u>59°F</u>	<u>°F</u>	Thermometer
pH	<u>6.2</u>	<u>pH Units</u>	Test strip/Probe
Ammonia	<u>0</u>	<u>mg/L</u>	Test strip

Ave Flow Rate = 0.82 gal/min (0-14 scale paper)

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No *(If No, Skip to Section 5)*

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input checked="" type="checkbox"/> No	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible rods or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, rods, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No *(If No, Skip to Section 6)*

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other: <u></u>	
Abnormal Vegetation	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sods <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other: <u></u>	
Pipe benthic growth	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <u></u>	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No
 2. If yes, collected from: ☐ Flow ☐ Pool
 3. Interim flow trap set? ☐ Yes ☒ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Ilicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?



Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No *(If No, Skip to Section 5)*

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input checked="" type="checkbox"/> No	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible rods or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, rods, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No *(If No, Skip to Section 6)*

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other: <u></u>	
Abnormal Vegetation	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sods <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other: <u></u>	
Pipe benthic growth	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <u></u>	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No
 2. If yes, collected from: ☐ Flow ☐ Pool
 3. Interim flow trap set? ☐ Yes ☒ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Ilicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?



OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data *SUNNY*

Subwatershed: *SAN MILL RIVER* Outfall ID: *A23 OF125*
 Today's date: *10/17/2008* Time (Military): *1622*
 Investigators: *GOUREVITCH, KUNIN* Form completed by: *Jesse Gourevitch 7/2/09*
 Temperature (°F): *52°* Rainfall (in.): Last 24 hours: *0.02"* Last 48 hours: *0.02"*
 Latitude: *41°00.618'N* Longitude: *73°50.987'W* GPS Unit: *GARMIN ETCX* GPS LMK #:
 Camera: *NIKON COOLPIX* Photo #:
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☐ Suburban Residential ☐ Other:
☒ Commercial Known Industries: *Auto Body Shop*
 Notes (e.g., origin of outfall, if known): *ROUTE 9A, catch basin at Auto Body Shop*

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe <i>Observed P.C. w/ pipe bell</i>	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Other: <i>IRON</i>	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: <i></i>	Diameter/Dimensions: <i>16"</i>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: <i></i>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <i></i>	Depth: <i></i> Top Width: <i></i> Bottom Width: <i></i>	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (if present)	<input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input checked="" type="checkbox"/> Flow #1	Volume: <i>2.5, 3.0, 3.0, 3.0, 4.0</i>	<i>ML</i>	<i>Measuring Cup</i>	
	Time to fill: <i>35.90, 42.28, 44.12, 48.50, 54.81</i>	Sec		
<input type="checkbox"/> Flow #2	Flow depth: <i></i>	In	Tape measure	
	Flow width: <i></i>	ft. In	Tape measure	
	Measured length: <i></i>	ft. In	Tape measure	
	Time of travel: <i></i>	S	Stop watch	
	Temperature: <i>60°F</i>	°F	Thermometer	
	pH: <i>6.5 (1-4.2), 6.4 (6.8)</i>	pH Units	Test strip/Probe	
	Ammonia: <i>1.0</i>	mg/L	Test strip	

Ave rate = 0.01 gal/min

OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data *SUNNY*

Subwatershed: *BROOKLYN RIVER / SPAIN BROOK* Outfall ID: *A246*
 Today's date: *10/24/2008* Time (Military): *1607*
 Investigators: *GOUREVITCH, KUNIN* Form completed by: *Jesse Gourevitch 7/2/09*
 Temperature (°F): *50°F* Rainfall (in.): Last 24 hours: *0"* Last 48 hours: *0"*
 Latitude: *41°00.618'N* Longitude: *73°49.999'W* GPS Unit: *GARMIN ETCX* GPS LMK #: *no landmark*
 Camera: *NIKON COOLPIX* Photo #:
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☒ Suburban Residential ☐ Other: *Ardsley High School*
☐ Commercial Known Industries:
 Notes (e.g., origin of outfall, if known): *Albion creek
Dellwood creek*
*spoke to resident
at Kensington
she said she used
landscapers not to blow leaves
into roadway stream*
*NOTE: 24" diam. cement
pipe (from SD) is dry*

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe <i>Observed</i>	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Other: <i>CLAY</i>	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: <i></i>	Diameter/Dimensions: <i>10"</i>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: <i></i>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <i></i>	Depth: <i></i> Top Width: <i></i> Bottom Width: <i></i>	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (if present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume: <i>3.25, 3.20, 3.40, 3.10, 4.40</i>	<i>ML</i>	<i>Measuring Cup</i>	
	Time to fill: <i>5.58, 6.35, 5.71, 6.50, 5.35</i>	Sec		
<input type="checkbox"/> Flow #2	Flow depth: <i></i>	In	Tape measure	
	Flow width: <i></i>	ft. In	Tape measure	
	Measured length: <i></i>	ft. In	Tape measure	
	Time of travel: <i></i>	S	Stop watch	
	Temperature: <i>60°F</i>	°F	Thermometer	
	pH: <i>6.4 (6.8), 6.5 (0-4)</i>	pH Units	Test strip/Probe	
	Ammonia: <i>0</i>	mg/L	Test strip	

Ave rate = 0.94 gal/min

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only
 Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No *(If No, Skip to Section 5)*

INDICATOR	CHECK IF PRESENT	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input checked="" type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/foul <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <i></i>	<input type="checkbox"/> 1 - Faint <input checked="" type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input checked="" type="checkbox"/>	<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Brown <input type="checkbox"/> Grey <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <i></i>	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input checked="" type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables (Does Not Include Trash!)	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <i></i>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some indications of origin (e.g., possible rags or oil sheen) <input type="checkbox"/> 3 - Some origin clear (e.g., obvious oil sheen, rags, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No *(If No, Skip to Section 6)*

INDICATOR	CHECK IF PRESENT	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spilling, Cracking or Chipping <input type="checkbox"/> Peeling Paint	<i>P.C. is observed by observer *</i>
Deposits/Stains	<input checked="" type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow line <input type="checkbox"/> Point <input checked="" type="checkbox"/> Other: <i>Flow line</i>	<i>Observed by observer *</i>
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Algae <input type="checkbox"/> Slime <input type="checkbox"/> Other: <i></i>	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <i></i>	<i>Observed by observer *</i>

Section 6: Overall Outfall Characterization

Overall Outfall Characterization: *Catch basin leading to pipe was found with standing water pump to empty water, instruction to prevent backflow from SAR*

1. Sample for the lab? ☐ Yes ☒ No *only sample sent to lab was taken in catch basin & we poured directly in two weeks ago. OBM was black & green, decaying leaves in*

2. If yes, collected from: ☐ Flow ☒ Pool *may be leading to oxygen ammonia result -*

3. Intermittent flow trap set? ☒ Yes ☐ No *RE-TEST recommended*

If Yes, type: ☒ ORM ☐ Cask dam *Time: 10/24/2008 4:30 PM*

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Observed? ☐ Yes ☒ No *collected 10/24/2008 4:30 PM*
WET: NEG
Dry: NEG 10/24/2008



Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only
 Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No *(If No, Skip to Section 5)*

INDICATOR	CHECK IF PRESENT	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/foul <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <i></i>	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input checked="" type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Grey <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <i></i>	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables (Does Not Include Trash!)	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <i></i>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some indications of origin (e.g., possible rags or oil sheen) <input type="checkbox"/> 3 - Some origin clear (e.g., obvious oil sheen, rags, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No *(If No, Skip to Section 6)*

INDICATOR	CHECK IF PRESENT	DESCRIPTION	COMMENTS
Outfall Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/> Spilling, Cracking or Chipping <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input checked="" type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow line <input type="checkbox"/> Point <input checked="" type="checkbox"/> Other: <i>Flow line</i>	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input checked="" type="checkbox"/>	<input type="checkbox"/> Algae <input type="checkbox"/> Slime <input type="checkbox"/> Other: <i></i>	<i>LEAKS, 1.1111 SD: 10/24/2008</i>
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <i></i>	

Section 6: Overall Outfall Characterization

Overall Outfall Characterization:

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☒ Yes ☐ No *If Yes, type: ☒ ORM ☐ Cask dam*

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

NO *collected 10/28/2008 2 PM*
WET: NEG
Dry: NEG 11/2/2008



OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: Sprain Brook Outfall ID: A243/OF47
 Today's date: 12/5/2008 Time (Military): 1530
 Investigators: Gourevitch, Kuhn Form completed by: Jesse Gourevitch, J/Kuh
 Temperature (°F): 36°F Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"
 Latitude: 41°00.766'N Longitude: 73°50.127'W GPS Unit: Garmintrex GPS LMK #:
 Camera: Nikon Coolpix Photo #: ✓
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☒ Suburban Residential Other: OLPH/Lyce School
☐ Commercial Known Industries:
 Notes (e.g., origin of outfall, if known): Sprain Road

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input checked="" type="checkbox"/> Steel corr. <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input checked="" type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input checked="" type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(If No, Skip to Section 3)		
Flow Description (if present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input checked="" type="checkbox"/> Flow #1	Volume <u>2.2</u>	Liter	Bottle	
	Time to fill <u>1.53</u>	Sec		
	Flow depth <u>2.75</u>	In	Tape measure	
<input type="checkbox"/> Flow #2	Flow width <u>2.75</u>	Ft. In	Tape measure	
	Measured length <u>2.59</u>	Ft. In	Tape measure	
	Time of travel _____	S	Stop watch	
Temperature	<u>48°F</u>	°F	Thermometer	
pH	<u>6.2 (6-8)</u>	pH Units	Test strip/Probe	
Ammonia	<u>0</u>	mg/L	Test strip	

OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: Saw Mill River Outfall ID: A254/OF52
 Today's date: 11/29/2008 Time (Military): 430
 Investigators: Kuhn Form completed by: J/Kuh
 Temperature (°F): 47°F Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"
 Latitude: N41°00.498' Longitude: W73°50.819' GPS Unit: GPS LMK #:
 Camera: Photo #:
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☒ Suburban Residential Other:
☐ Commercial Known Industries:
 Notes (e.g., origin of outfall, if known): Bramble Brook

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input checked="" type="checkbox"/> Steel corr. <input type="checkbox"/> Other: _____	<input type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>33" d</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input checked="" type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input checked="" type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input checked="" type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(If No, Skip to Section 3)		
Flow Description (if present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume _____	Liter	Bottle	
	Time to fill _____	Sec		
	Flow depth <u>1.4</u>	In	Tape measure	
<input checked="" type="checkbox"/> Flow #2	Flow width <u>1.4</u>	Ft. In	Tape measure	
	Measured length <u>2.25</u>	Ft. In	Tape measure	
	Time of travel <u>1.38</u>	S	Stop watch	
Temperature	<u>44°F</u>	°F	Thermometer	
pH	<u>6.4</u>	pH Units	Test strip/Probe	
Ammonia	<u>0</u>	mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/> No	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/foul <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: _____	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: _____	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/> No	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input checked="" type="checkbox"/> Other: <u>TFO</u>	<input checked="" type="checkbox"/> 1 - Few/light, origin not obvious	<input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	<u>Very slight</u>
Deposits/Sludge	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input checked="" type="checkbox"/> Other: _____	<u>Slight black sludge</u>
Abnormal Vegetation	<input type="checkbox"/> No	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhabited	
Poor pool quality	<input type="checkbox"/> No	<input type="checkbox"/> Algae <input type="checkbox"/> Fossils <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sulfide <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other: _____	
Pipe benthic growth	<input type="checkbox"/> No	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: _____	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No
 2. If yes, collected from: ☒ Flow ☐ Pool
 3. Intermittent flow trap set? ☒ Yes ☐ No If Yes, type: ☒ OHM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

No



collected 12/11/2008 2:30 PM
 wet NEG
 dry 12/14/2008 NEG

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/> No	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/foul <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: _____	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/> No	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: _____	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/> No	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/> No	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: _____	<input type="checkbox"/> 1 - Few/light, origin not obvious	<input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/> No	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Sludge	<input type="checkbox"/> No	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input checked="" type="checkbox"/> Other: _____	
Abnormal Vegetation	<input type="checkbox"/> No	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhabited	
Poor pool quality	<input type="checkbox"/> No	<input type="checkbox"/> Algae <input type="checkbox"/> Fossils <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sulfide <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other: _____	
Pipe benthic growth	<input type="checkbox"/> No	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: _____	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No
 2. If yes, collected from: ☐ Flow ☐ Pool
 3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☒ OHM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

No



collected 12/11/2008 10 AM
 wet: NEG
 dry: NEG 12/19/2008

OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: Saw Mill River Outfall ID: A229/0F181
 Today's date: 1/9/2009 Time (Military): 2:19 PM
 Investigator: Kuhn Form completed by: SP/2/09
 Temperature (°F): 28°F Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"
 Latitude: N 41° 01' 30" Longitude: W 73° 50' 16.52" GPS Unit: Garmin etrex GPS LMK #:
 Camera: Nikon Cool Pix Photo #:
 Land Use in Drainage Area (Check all that apply):
☒ Industrial ☐ Open Space Concord Rd. School
☐ Ultra-Urban Residential ☒ Institutional Strip Mail
☐ Suburban Residential Woodlands Nursing Home
☒ Commercial Gas Station (north)
 Notes (e.g., origin of outfall, if known): Route 9A
Catch basin water level below outfall pipes, N 41° 01' 30" W 73° 50' 16.52"

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: <u>corr</u>	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: <u></u>	Diameter/Dimensions: <u>24"</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u></u>	Depth: <u></u> Top Width: <u></u> Bottom Width: <u></u>	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, Skip to Section 5)			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
	Flow depth	In	Tape measure	
	Flow width	Ft. In	Tape measure	
<input type="checkbox"/> Flow #2	Measured length	Ft. In	Tape measure	
	Time of travel	S	Stop watch	
	Temperature	°F	Thermometer	
	pH	pH Units	Test strip/Probe	
Ammonia	mg/L	Test strip		

OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: Saw Mill River Outfall ID: OF 182
 Today's date: 1/9/2009 Time (Military): 1:54 PM
 Investigator: Kuhn Form completed by: SP/2/09
 Temperature (°F): 28°F Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"
 Latitude: N 41° 01' 30" Longitude: W 73° 50' 16.52" GPS Unit: Garmin etrex GPS LMK #:
 Camera: Nikon Cool Pix Photo #:
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space Concord Rd. School
☐ Ultra-Urban Residential ☒ Institutional St. Barnabas
☒ Suburban Residential St. Barnabas
☐ Commercial St. Barnabas
 Notes (e.g., origin of outfall, if known): Heathcote Rd, St Barnabas road drain

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: <u>corr</u>	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: <u></u>	Diameter/Dimensions: <u>18"</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u></u>	Depth: <u></u> Top Width: <u></u> Bottom Width: <u></u>	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, Skip to Section 5)			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
	Flow depth	In	Tape measure	
	Flow width	Ft. In	Tape measure	
<input type="checkbox"/> Flow #2	Measured length	Ft. In	Tape measure	
	Time of travel	S	Stop watch	
	Temperature	°F	Thermometer	
	pH	pH Units	Test strip/Probe	
Ammonia	mg/L	Test strip		

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only
 Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/rot <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables (Does Not Include Trash!)	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible soda or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, soda, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls
 Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	<u>Basement completely rusted out</u>
Deposits/Stains	<input checked="" type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow line <input type="checkbox"/> Paint <input type="checkbox"/> Other: <u></u>	<u>Heavy rusted</u>
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sods <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other: <u></u>	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <u></u>	

Section 6: Overall Outfall Characterization
☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, type: <input type="checkbox"/> OHM <input type="checkbox"/> Cuck dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)? W/S of TRASH, PIPE BROKEN AT END



Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only
 Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/rot <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables (Does Not Include Trash!)	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <u></u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible soda or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, soda, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls
 Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input checked="" type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	<u>slight chipping on end</u>
Deposits/Stains	<input checked="" type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow line <input type="checkbox"/> Paint <input type="checkbox"/> Other: <u></u>	<u>black stain inside</u>
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	<u>inside lines</u>
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sods <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other: <u></u>	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <u></u>	

Section 6: Overall Outfall Characterization
☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, type: <input type="checkbox"/> OHM <input type="checkbox"/> Cuck dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)? clear lines



OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: Sprain Brook / Bx Riv Outfall ID: A242/0546
 Today's date: 1/20/2009 Time (Military): 09:05:11
 Investigators: Grossmith, Kuhn Form completed by: Jesse Goulet
 Temperature (°F): 16°F Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0.02"
 Latitude: 41°02'35"N Longitude: 73°50'13"W GPS Unit: Garmin etrex GPS LMK #: 12/10/08
 Camera: Nikon Coolpix Photo #: ✓
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☒ Suburban Residential Other: Lycee
☐ Commercial Known Industries: Cross Rd.
 Notes (e.g., origin of outfall, if known): Cross Rd.

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> Circular <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Elliptical <input type="checkbox"/> Steel <input type="checkbox"/> Box <input checked="" type="checkbox"/> Other: <u>cement</u>	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: <u>circle w/ par skirt</u>	Diameter/Dimensions: <u>30"</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u>_____</u>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u>_____</u>	Depth: <u>_____</u> Top Width: <u>_____</u> Bottom Width: <u>_____</u>	
<input type="checkbox"/> In-Stream (applicable when collecting samples)				
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, Skip to Section F)			
Flow Description (if present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

PARAMETER	RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1			
Volume		Liter	Bottle
Time to fill		Sec	
Flow depth	<u>3"</u>	In	Tape measure
<input checked="" type="checkbox"/> Flow #2			
Flow width	<u>21"</u>	ft. In	Tape measure
Measured length	<u>4"</u>	ft. In	Tape measure
Time of travel	<u>1.7, 2.5, 1.1, 2.5, 1.2, 1.0, 1.2, 1.0, 1.2, 1.0, 1.2</u>	Stop watch	
Temperature	<u>36°F</u>	°F	Thermometer
pH	<u>6.4</u> (pH paper)	pH Units	Test strip/Probe
Ammonia	<u>0</u>	mg/L	Test strip

Ave rate = 8.44 gal/min

OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: Sprain Brook / Bx Riv Outfall ID: A242/0546
 Today's date: 1/20/2009 Time (Military): 15:16
 Investigators: Grossmith, Kuhn Form completed by: Jesse Goulet
 Temperature (°F): 32°F Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"
 Latitude: 41°02'35"N Longitude: 73°50'13"W GPS Unit: Garmin etrex GPS LMK #: 12/10/08
 Camera: Nikon Coolpix Photo #: ✓
 Land Use in Drainage Area (Check all that apply):
☐ Industrial ☐ Open Space
☐ Ultra-Urban Residential ☐ Institutional
☒ Suburban Residential Other: NYS Thruway
☐ Commercial Known Industries: _____
 Notes (e.g., origin of outfall, if known): Bramble Brook

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP <input type="checkbox"/> Circular <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Elliptical <input type="checkbox"/> Steel <input type="checkbox"/> Box <input type="checkbox"/> Other: <u>_____</u>	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: <u>_____</u>	Diameter/Dimensions: <u>12"</u>	In Water: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u>_____</u>	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: <u>_____</u>	Depth: <u>_____</u> Top Width: <u>_____</u> Bottom Width: <u>_____</u>	
<input type="checkbox"/> In-Stream (applicable when collecting samples)				
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, Skip to Section F)			
Flow Description (if present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

PARAMETER	RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1			
Volume		Liter	Bottle
Time to fill		Sec	
Flow depth	<u>3"</u>	In	Tape measure
<input checked="" type="checkbox"/> Flow #2			
Flow width	<u>12"</u>	ft. In	Tape measure
Measured length	<u>14"</u>	ft. In	Tape measure
Time of travel	<u>5.00, 2.22, 2.5, 9.31, 2.19, 2.57, 4.22</u>	Stop watch	
Temperature	<u>42</u>	°F	Thermometer
pH	<u>6.2</u>	pH Units	Test strip/Probe
Ammonia	<u>0</u>	mg/L	Test strip

Ave rate = 22.1 gal/min

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK IF PRESENT	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/rot <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <u>_____</u>	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Grey <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <u>_____</u>	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input checked="" type="checkbox"/> Yes	See severity <u>NOPE</u>	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables (Does Not Include Trash!)	<input type="checkbox"/> Yes	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <u>_____</u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK IF PRESENT	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/> No	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other: <u>green</u>	<u>leaves, water, etc. green</u>
Abnormal Vegetation	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhabited	<u>leaves, water, etc. green</u>
Poor pool quality	<input type="checkbox"/> No	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sods <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other: <u>_____</u>	<u>leaves</u>
Pipe benthic growth	<input type="checkbox"/> No	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <u>_____</u>	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No
 2. If yes, collected from: ☐ Flow ☐ Pool
 3. Interim flow trap set? ☒ Yes ☐ No If Yes, type: ☒ OBM ☐ Cask dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?



Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK IF PRESENT	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input type="checkbox"/> No	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/rot <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: <u>_____</u>	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Easily detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Grey <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other: <u>_____</u>	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/> No	See severity <u>NOPE</u>	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables (Does Not Include Trash!)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Sods <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other: <u>garbage/leaves</u>	<input type="checkbox"/> 1 - Few/light, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK IF PRESENT	DESCRIPTION	COMMENTS
Outfall Damage	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	<u>minimal</u>
Deposits/Stains	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other: <u>green</u>	<u>green, brown, etc.</u>
Abnormal Vegetation	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhabited	<u>leaves, water, etc. green</u>
Poor pool quality	<input type="checkbox"/> No	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sods <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other: <u>_____</u>	
Pipe benthic growth	<input type="checkbox"/> No	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: <u>_____</u>	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No
 2. If yes, collected from: ☐ Flow ☐ Pool
 3. Interim flow trap set? ☒ Yes ☐ No If Yes, type: ☒ OBM ☐ Cask dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?



OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

SUNNY

Section 1: Background Data

Subwatershed: Sprain Brook / Box Riv Outfall ID: A2 39

Today's date: 1/6/2009 Time (Military): 1527

Investigator: Gourevitch, Kuba Form completed by: Jesse Gourevitch, APLand

Temperature (°F): 17°F Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"

Latitude: 41°00.456'N Longitude: 73°50.021'W GPS Unit: Garmin etrex GPS LMK #: _____

Camera: Nikon Coolpix Photo #: ✓

Land Use in Drainage Area (Check all that apply):

☐ Industrial ☐ Open Space

☐ Ultra-Urban Residential ☒ Institutional

☒ Suburban Residential Other: OLPH School, McDowell Park

☐ Commercial Known Industries: _____

Notes (e.g., origin of outfall, if known): Cross St

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> Circular <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Elliptical <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>10"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> In-Stream (applicable when collecting samples)				
Flow Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, Skip to Section 3)				
Flow Description (If present): <input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial				

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS			
PARAMETER	RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle
	Time to fill	Sec	
	Flow depth	In	Tape measure
<input checked="" type="checkbox"/> Flow #2	Flow width	Ft. In	Tape measure
	Measured length	Ft. In	Tape measure
	Time of travel	S	Stop watch
	Temperature	°F	Thermometer
	pH	pH Units	Test strip/Probe
	Ammonia	mg/L	Test strip

*Catch basin not full - one after storm and
8 ft below surface one letter given out
to Lyman Kennedy Patient

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No (If No, Skip to Section 3)

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/rot <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Faintly detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other	<input type="checkbox"/> 1 - Few/dilute, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking, or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	<u>In spring, may include 1/2 inch</u>
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sulfide <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OHM ☐ Culk dam

Section 8: Any Non-Illlicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

No



OUTFALL RECONNAISSANCE INVENTORY/SAMPLE COLLECTION FIELD SHEET

SUNNY

Section 1: Background Data

Subwatershed: Sprain Brook Outfall ID: A2 41 / OF 70

Today's date: 2/13/2009 Time (Military): 1518

Investigator: Gourevitch, Kuba Form completed by: Jesse Gourevitch, APLand

Temperature (°F): 39°F Rainfall (in.): Last 24 hours: 0" Last 48 hours: 0"

Latitude: 41°00.339'N Longitude: 73°50.095'W GPS Unit: Garmin etrex GPS LMK #: _____

Camera: Nikon Coolpix Photo #: ✓

Land Use in Drainage Area (Check all that apply):

☐ Industrial ☐ Open Space

☐ Ultra-Urban Residential ☐ Institutional

☒ Suburban Residential Other: _____

☐ Commercial Known Industries: _____

Notes (e.g., origin of outfall, if known): Markwood Ave stream

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input type="checkbox"/> RCP <input type="checkbox"/> CMP <input checked="" type="checkbox"/> Circular <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Elliptical <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>3.4</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> In-Stream (applicable when collecting samples)				
Flow Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, Skip to Section 3)				
Flow Description (If present): <input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial				

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS			
PARAMETER	RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle
	Time to fill	Sec	
	Flow depth	In	Tape measure
<input checked="" type="checkbox"/> Flow #2	Flow width	Ft. In	Tape measure
	Measured length	Ft. In	Tape measure
	Time of travel	S	Stop watch
	Temperature	°F	Thermometer
	pH	pH Units	Test strip/Probe
	Ammonia	mg/L	Test strip

Ave rate = 32.96 gal/min

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No (If No, Skip to Section 3)

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/rot <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other	<input type="checkbox"/> 1 - Faint <input type="checkbox"/> 2 - Faintly detected <input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other	<input type="checkbox"/> 1 - Faint colors in sample bottle <input type="checkbox"/> 2 - Clearly visible in sample bottle <input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness <input type="checkbox"/> 2 - Cloudy <input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other	<input type="checkbox"/> 1 - Few/dilute, origin not obvious <input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen) <input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking, or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other	<u>Wires here and just below</u>
Abnormal Vegetation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	<u>Loss of invasive vines</u>
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Sulfide <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☒ Yes ☐ No If Yes, type: ☒ OHM ☐ Culk dam

Section 8: Any Non-Illlicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

No



MS4 Annual Report Form

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

2	0	0	9
---	---	---	---

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N	Y	R	2	0	A	3	1	6
---	---	---	---	---	---	---	---	---

<u>Catch Basin Head Cleaning</u> Routes: A = Ashford Ave H = Heatherdell Rd EV = Entire Village PS = "Paper" Streets		<u>Bulk Roadside Cleaning</u> Route: Entire Village (litter and small brush)	<u>Bulk Leaf Clean-up</u>	
ROUTES	DATE	DATE	ROUTE	DATE
A	3/5/2008	3/5/2008 – Storm	EV	3/6/2008
H	3/6	3/10 – Storm	EV	3/19
EV	3/18	3/11	McDowell Park	3/25
EV	5/2	3/24	Flood Control Blowoffs	4/4
EV	5/16	3/26	A	4/21
A	5/28	5/5	Flood Control Blowoffs	6/10
H	5/29	5/14	A	6/23
EV	6/20	5/28	H	6/24
EV	7/24	6/11 – Storm	A	9/11
A	8/5	7/24	H	9/12
H	8/6	8/11	EV	10/3
PS	8/11	9/11	EV	10/17
EV	9/29	9/16	EV	11/6
EV	10/28	9/17	EV	11/7
EV	10/14	10/3	EV	11/24
EV	11/13	10/14	EV	12/2
A	12/1	11/11	A	12/5
EV	12/16	11/20	H	12/8
EV	12/19	12/7	EV	12/12
			EV	12/16
			EV	1/5/2009
			EV	1/8
			EV	1/12
			EV	1/16
			EV	1/20
			EV	1/22
			EV	1/26
			EV	2/3
			EV	2/13
			EV	2/17
			EV	2/20
			EV	2/26

MS4 Annual Report Form

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

2	0	0	9
---	---	---	---

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N	Y	R	2	0	A	3	1	6
---	---	---	---	---	---	---	---	---

Catch Basin Internal Clean-out

LOCATION	# of BASINS	DATE
Almena Ave (Route #1)	22	10/24/2008
Bramblebrook Rd (Route #2)	18	10/25/2008
Abington Rd (Route #3)	27	10/26/2008
Ashford Ave (Route #4)	16	12/1/1008

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N Y R 2 0 A 3 1 6

Street Sweeping

Routes: HN = North of Heatherdell Rd
 HS = South of Heatherdell Rd
 AN = North of Ashford Ave
 AS = South of Ashford Ave
 BD = Business District, Route 9A/Center St

DATE	ROUTES	DATE	ROUTES
3/5/2008	AN AS BD	9/10	Entire Village - Storm
3/12	HN HS BD	9/17	Entire Village
3/19	AN AS BD	9/25	AN AS BD
4/2	HN HS BD	10/1	HS HN BD
4/9	AN AS BD	10/8	AN BD
4/16	HN HS BD	10/15	AS BD
4/30	AN AS BD	10/22	AN BD
5/7	HN HS BD	10/29	HN HS BD
5/14	AN AS BD	11/5	AN BD
5/21	HN HS BD	11/12	AS BD HS
5/28	AN AS BD	11/19	Entire Village
6/4	AN BD	11/26	Entire Village
6/11	AS HN BD		
6/18	HS AN BD		
6/25	AS BD		
7/2	HN BD		
7/9	AN AS BD		
7/16	HN HS BD		
7/23	AN AS BD		
7/30	HN HS BD		
8/6	AN HN BD		
8/13	AS HS BD		
8/20	AN AS BD		
8/27	HN HS BD		
9/3	AN AS BD		

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N Y R 2 0 A 3 1 6

Road Repair

Location (St/Cross St)	Material	Amount (tons)	Date of use
Ashford Ave	7F3	3	3/3/2008
Abington Ave	7F3	3	3/6
Euclid/Lincoln/Prospect	7F3	6	3/28
King/Park/Orlando	7F3	3	4/1
Eastern/Western/Plainview	Curb mix	3	4/8
Eastern/Western/Plainview	7F3	4	4/29
Wilmoth/Grandview/Mt View	7F3	4	5/15
Windsong/Agnes Circle	Curb mix	8	5/15
Windsong/Agnes/Markwood	7F3	3	5/19
Ashford/McKinley/Taft	7F3	4	5/30
Elm/Bridge/King	7F3	3	7/9
Fuller/Carriere/Euclid	7F3	3	7/29
Lincoln/Exeter/Kensington	7F3	4	8/12
Overlook/Oakhill	7F3	3	9/4
Ridge/Eastern/Shady/Almena	7F3	4	9/18
Grandview (berm)	Curb mix	2	9/23
Huntley	7F3	3	10/1
Concord/Victoria	7F3	4	12/15

MS4 Annual Report FormThis report is being submitted for the reporting period ending March 9,

2	0	0	9
---	---	---	---

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N	Y	R	2	0	A	3	1	6
---	---	---	---	---	---	---	---	---

Road Salt Application

Village (total) or Neighborhood (name)	Amount (tons)	Condition	Date applied
Village	8	Snow	11/30/2008
Village	6	Snow	12/7
Village	10	Snow	12/13
Village	8	Snow	12/14
Village	4	Mop up	12/15
Village	12	Snow	12/19
Village	4	Ice runoff	12/20
Village	2	Ice runoff	12/21
Euclid & Prospect	2	Water line break	12/22
Village	8	Snow	12/24
Village	4	Mop up	12/26
Village	10	Snow	12/31
Village	4	Snow	1/6/2009
Village	15	Snow	1/10
Village	6	Snow	1/15
Village	15	Snow	1/18
Village	10	Snow	1/28
Village	10	Snow	3/2
Various locations	3	Snow	3/3

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N Y R 2 0 A 3 1 6

Vehicle Maintenance

Vehicle type	#	Wash or Maintenance (brief description)	Date serviced
Senior Bus		Routine & Oil change	3/3/2008
Pick up	9	Routine & Oil change	3/4
Pick up	9	Fabricate new fuel line - leak	3/5
Explorer	98	2 new tires	3/11
Crown Vic	95	Replace valve	3/17
Ladder truck	BT	4 new tires	3/24
Jeep	HI	Routine & Oil change	3/26
Senior Bus		Transmission leak	3/31
Pick up	7	Routine & Oil change	4/3
Senior Bus		3 new batteries	4/8
Dump	3	Steam clean	4/8
Payloader	PL	Steam clean	4/10
Packer	15	Routine & Oil change	4/11
Packer	12	Replace axle – leak, Routine & Oil change	4/15
Packer	15	4 new tires	4/16
Packer	8	2 new tires	4/21
Explorer	98	Routine & Oil change, stabilizer	4/22
Ladder truck	BT	Power steering leak	4/23
Pick up	7	Steam clean & undercoat	4/25
Payloader	PL	Steam clean	4/25
Explorer	96	O ₂ sensors	4/29
Tractor	JD3	Steam clean	4/30
Pick up	11	Transmission leak	5/5
Ladder	BT	Steering box leak	5/7
Pick up	10	Routine & Oil change	5/9
Crown Vic	95	Power steering pump - leak	5/29
Packer	8	2 new tires	6/2
Charger	PC	Routine & Oil change	6/5
Jeep	H1	2 new tires	6/9
Packer	14	AC & Cooling system leak	6/10
Crown Vic	2013	Catalytic convertors	6/13

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N Y R 2 0 A 3 1 6

Vehicle Maintenance

Vehicle type	#	Wash or Maintenance (brief description)	Date serviced
Crown Vic	2013	Routine & Oil change	6/14
Pick up	4, 9, 11	Wash	6/23
Pick up	6, 10	Wash	6/24
Dump	5	Routine & Oil change	7/1
Packer	14	Wash	7/2
Packer	15	Wash	7/3
Tahoe	2012	Routine & Oil change	7/9
Tractor	JD3	Replace hydraulic pump	7/11
Pick up	11	Replace pump	7/15
Packer	14	2 new batteries & alternator	7/24
Payloader	PL	Transmission reservoir	7/30
Tractor	JD1	Hydraulic leak	8/4
Suburban	2011	Routine & Oil change, brakes	8/12
Crown Vic	BI	Routine & Oil change	8/14
Packer	14	Wash	8/20
Tractor	JD2	Front axle	8/21
Packer	14	Hydraulic leak	8/25
Pick up	11	Fuel line	8/26
Explorer	94	Routine & Oil change	9/2
Dump	1, 5	Wash	9/8
Dump	3	Routine & Oil change	9/18
Packer	14	Routine & Oil change	10/7
Pick up	6	Replace coil	10/9
Explorer	97	Routine & Oil change	10/15
Pick up	10	Brakes, rotors, tie rods	10/24
Pick up	6, 9	New batteries	11/7
Tractor	JD1	Hydraulic hose	11/10
Tahoe	2012	Routine, Oil change, winterize	11/13
Payloader	PL	New batteries	11/21
Pick up	4	New batteries	11/24
Jeep	HW1	Winterize & lube	11/25

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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

Name of MS4/Coalition VILLAGE OF ARDSLEY

SPDES ID

N Y R 2 0 A 3 1 6

Vehicle Maintenance

Vehicle type	#	Wash or Maintenance (brief description)	Date serviced
Crown Vic	2013	4 new tires, routine	12/4
Senior Bus		Routine & Oil change	12/5
Pick up	9	Routine & Oil change	12/10
Pick up	4, 7, 11	Wash	12/24
Dump	1, 3, 5	Wash	12/24
Payloader	PL	Wash	12/24
Explorer	98	New battery	1/8/2009
Dump	1, 2, 3, 5, 7	Wash	1/12
Plow pump	6, 7, 9, 11	Lube	1/13
Dump	3, 4, 6, 7, 9, 11	Wash	1/20
Tractor		Repair front axle leak	1/22
Explorer	96	New battery, 2 new tires	1/27
Crown Vic	BI	2 new tires, Oil change	1/27
Plow	10	Replace piston	2/3
Payloader	PL	Wash, steam clean, lube	2/9
Truck	1, 2, 3, 6, 7	Steam clean, lube	2/10
Truck	5, 9, 11	Steam clean, lube	2/11
Senior Bus		Oil change, lube, preventative maintenance	2/13
Crown Vic	2012	Change gasket & thermostat	2/20
Crown Vic	2011	Oil change & lube	2/24
Truck	1	Change hydraulic lines on spreader and body, steam clean	2/25
Truck	8	Change gasket & hydraulic line on sled	2/26
Truck	8	Steam clean & lube	2/27

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2009

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

Name of MS4/Coalition

VILLAGE OF ARDSLEY

SPDES ID

N Y R 2 0 A 3 1 6

Incident Report

Location (st/cross st)	Description (water main, sewage)	Date incident	Repair (DPW or other)	Date repaired
Hilltop	Sewer back up	3/24/2008	Greenburgh	3/24
Eastern Dr	Flush sewer	3/25	Ardsley DPW	3/25
Heatherdell Rd	Sewer back up	3/31	Greenburgh	3/31
Fairmont	Sewer back up	4/4	Greenburgh	4/4
Eastern Dr	Flush sewer	5/6	Ardsley DPW	5/6
Revolutionary Rd	Sewer back up	6/11	Greenburgh	6/11
Dellwood Ln	Catch basin rebuild	6/26	Ardsley DPW	6/26
Ashford Park	Catch basin rebuild	6/26	Ardsley DPW	6/26
Concord Rd	Catch basin rebuild	6/27	Ardsley DPW	6/27
Eastern Dr	Flush sewer	6/27	Ardsley DPW	6/27
Revolutionary Rd	Sewer back up	7/6	Greenburgh	7/6
Euclid Ave	Catch basin rebuild	7/8	Ardsley DPW	7/8
Elm St	Catch basin rebuild	7/8	Ardsley DPW	7/8
Augustine	Catch basin rebuild 2X	7/9	Ardsley DPW	7/9
Center St	Catch basin rebuild	7/10	Ardsley DPW	7/10
Glen Rd	Catch basin rebuild	7/28	Ardsley DPW	7/28
Abington Rd	Catch basin rebuild	7/29	Ardsley DPW	7/29
Hillside	Sewer back up	7/30	Greenburgh	7/30
Major Appleby	Sewer back up	8/4	Greenburgh	8/4
Lincoln	Catch basin rebuild	8/6	Ardsley DPW	8/6
Eastern Dr	Flush sewer	8/7	Ardsley DPW	8/7
Center St	Sewer back up	8/12	Greenburgh	8/12
Woodlands Ave	Sewer back up	9/8	Greenburgh	9/8
Prospect Ave	Sewer back up	10/15	Greenburgh	10/15
Eastern Dr	Flush sewer	10/16	Ardsley DPW	10/16
Heatherdell	Sewer back up	11/1	Private plumber	11/2
Eastern Dr	Flush sewer	11/24	Ardsley DPW	11/24
Eastern Dr	Flush sewer	12/22	Ardsley DPW	12/22