

**MS4 MUNICIPAL COMPLIANCE CERTIFICATION FORM**  
**MCC form for period ending March 9, 2010**

Name of MS4: Town of Kent

SPDES ID NYR20A346

**Section 2: Contact Information**

Provide contact information for ***all*** of the following contacts:

1. The Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. The Local Stormwater Public Contact (required pre GP-0-08-002 Part VII.A.2.c).
3. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
4. Report Preparer (Consultants may provide company name in the space provided).

**Submit a separate sheet for each contact.**

For each contact, select all that apply:

- **Signatory Authority (choose one of the following)**
  - Executive Officer or Ranking Elected Official**
  - Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

Katherine Doherty  
Supervisor  
25 Sybil's Crossing  
Kent Lakes, NY 10512  
[kdohererty@townofkentny.gov](mailto:kdohererty@townofkentny.gov)  
845-225-3943  
Putnam County

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- **Local Stormwater Public Contact**
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

Julie Butler  
Building Inspector  
25 Sybil's Crossing  
Kent Lakes, NY 10512  
Putnam County  
[buildinginspector@townofkentny.gov](mailto:buildinginspector@townofkentny.gov)  
845-225-3900

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- Local Stormwater Public Contact
- **Stormwater Management Program (SWMP) Coordinator**
- Report Preparer

Cornerstone Associates  
1770 Central Street  
Yorktown Heights, NY 10598  
[bruce@cornerstonesny.com](mailto:bruce@cornerstonesny.com)  
914-962-7733  
Westchester County

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