## Site Inspection Record Template Construction (05-2024)

	Project Name:								
	Coverage Nur	nber:							
	Inspector:		Date:	Time:					
	Precipitation A	Date:							
	Areas Inspect	Rea	Reason for inspection (Choose Applicable):  14 day						
	☐ Active area								
	☐ Stabilized a	areas with less than 70% cover		After (	0.25 inch+ rainfall				
	☐ Areas that	have achieved final stabilization							
	Is there evider	nce of, or the potential for, pollutants	entering drainag	ge sys	stems or waters of the state from:				
		rial Storage Areas	л ,		□N				
	<ul> <li>Vehic</li> </ul>			□N					
	Voline	ons / Corrective							
□ Y	□N	Have all erosion and sediment conti implemented?	rols and best ma	anage	ement practices identified in the plan been installe	ed or			
□ Y	□N	Are erosion and sediment controls of	operating correc	ctly an	nd in serviceable condition?				
☐ Y	□N	Are erosion and sediment controls of	pperating consis	stently	y and effectively?				
ΠΥ	□N	Are there any devices similar to silt the device? (Removal and repairs n			here sediment has reached more than 1/3 the hele 24 hours.)	ght of			
ΔΥ	□N	Are there any sediment basins where collected sediment has reduced the storage capacity by 1/2? (Drainage and removal must be completed within 72 hours.)							
□ Y	□N	Is there evidence of sediment deposits in surface waters, drainage ditches or other stormwater conveyance systems? (Removal and stabilization must be completed within 7 days unless prohibited by legal, regulatory or physical access constrains. All reasonable efforts must be made to obtain access. Once permission is granted, removal must take place within 7 days.)							
Δ	□N □NA	Is there evidence of sediment being on paved surfaces must be removed			ehicles or equipment? (Sediment tracked or depo	sited			
□ Y	□N		ust be recovere	ed in a	an in surface waters, drainage ditches and storm a manner and frequency sufficient to minimize off g the next precipitation event.)				
ΠΥ	□ N □ NA	Is stormwater flow distributed evenly	y over vegetativ	e buff	fers?				
ΠΥ	□N □NA	Is sediment accumulating in vegetar	tive buffers?						
ΠΥ	□ N □ NA	Are rills forming within vegetative bu	uffers?						
		(If vegetative buffers are silted cove sediment controls must be impleme			re otherwise rendered ineffective, other erosion a must be repaired and stabilized.)	nd			
ΔΑ	□N	Are litter, debris, chemicals and par	ts being manag	ed pro	operly to minimize stormwater pollution?				
☐ Y	□N	Are liquid or soluble materials like o discharges?	il, fuel, paint, et	c., pro	operly stored to prevent spills, leaks or other				
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adjacent properties?	Is there evidence of concrete wash water discharging to waters of the state, storm sewer systems or onto adjacent properties?							
Is there evidence of wastewater from processing operations or sanitary facilities (i.e., portable toilets) discharging from the site?								
(These types of discharges are not covered by the obstopped immediately if they are not covered by another discharges are allowable if the appropriate prevention flushing, potable water line flushing, infrequent build uncontaminated foundation drains, springs, lawn was discharges from temporary dewatering activities, su may require coverage under the temporary dewater	ther type of on measureding and ecatering and atering and uch as hydr	permit. These are in purposed	he follow lace: find vash down ioning co ting or co	wing non- re-fighting wn witho ondensa lisinfectio	-stormwater g, fire hydran ut detergents te. Please no	t , te that		
□ N Is there evidence of wash water from tools or equipostorm sewer systems?	ment drain	ent draining to waters of the state, drainage ditches or						
□ N □ NA Are permanent stormwater management measures (e.g., oil-water separators, rain gardens) functioning properly?								
Corrective Actions and S	Schedule:							
Are best management practices effective to minimize the discharge of sediment from the site?	ge		ΠY	□N				
➤ Do best management practices need to be adjusted?			□Y	□N				
➤ Are additional best management practices needed?			□Y	□ N				
Comments:								
-Size -Location		ce the las it reportat	-		reported?			
Cize Econom	∏ Y		, , , , , , , , , , , , , , , , , , ,	□ Y	□ N			
	Y	_ N		_ _ Y	_ □ N			
	_ \ \ \ \ \	□N		ΠΥ	□N			
➤ Were Spill Prevention Procedures adequate?			ΠY	□N				
➤ What Spill Response Procedures were used?								
Comments								
						•		
➤ Has the SWPP Plan been updated as a result of this inspection?			□Y	□N				

## **Additional Observations / Corrective Actions: CERTIFICATION** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Printed Name Title Signature Date