

Section A – General Information		
<i>(If necessary, complete additional inspection reports for each separate inspection location.)</i>		
Inspector Information		
Inspector Name:		Email:
Qualifications:		Phone Number:
Inspection Details		
Inspection Date:	Inspection Start Time:	Inspection End Time:
Location Inspected:		Current Phase of Construction:
Weather Conditions for the period since the last inspection:		
Weather Conditions During Inspection:		
Required Frequency Basis for This Inspection: <input type="checkbox"/> after any storm event greater than one-half inch of rain per 24-hour period (by the end of the next calendar day, excluding weekends and holidays unless work is scheduled) As determined by <input type="checkbox"/> On-site rain gauge <input type="checkbox"/> Weather station report (Source: _____) Storm event date and start time: _____ Storm Event Duration : _____ Total Rainfall (inches): _____ Did a discharge occur? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> once every seven calendar days <input type="checkbox"/> once every month for dormant sites: <input type="checkbox"/> the entire site is temporarily stabilized) <input type="checkbox"/> runoff is unlikely due to extended periods of snow or ice cover, or the ground is frozen		
Section B – Description of Discharges		
Discharge Location	Is a discharge occurring during the inspection?	Observations for each point of discharge ¹ :
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	

1. Describe the visual quality of the discharge including color; odor; floating, settled, or suspended solids; foam; oil sheen; and other indicators of stormwater pollutants. Include signs of the above pollutant characteristics that are visible from your site and attributable to your discharge.

Section C – Overall Site Conditions		
Are all BMPs in the SWP3 are properly implemented in accordance with the proposed schedule?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Are all BMPs installed are adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Are additional BMPs needed that do not exist at the time of the inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Is there evidence of or the potential for pollutants to discharge?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:	

Section D – Erosion and Sediment Controls		
Construction Entrance		
Description of Conditions Observed:		
Is a construction entrance installed per plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Is sediment being tracked off-site?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Does sediment need to be removed from the surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Does the runoff drain properly away from the entrance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Requires Routine Maintenance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:	
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:	

Permanent Stabilization		
Description of Conditions Observed:		
Are all areas of the site at final grade permanently stabilized?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Have proper methods for seedbed preparation, fertilizer application, and mulching utilized?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Are critical areas (conveyance channels, outlets, steep slopes, etc.) stabilized?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Requires Routine Maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:	
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:	

Temporary Stabilization		
Description of Conditions Observed:		
Are all disturbed areas of the site that will lie dormant for over 14 days temporarily stabilized?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Have all stockpiles been temporarily stabilized?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Does existing temporary stabilization provide sufficient and effective cover?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Requires Routine Maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:	
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:	

Sediment Settling Pond		
Description of Conditions Observed:		
Is a sediment settling pond installed per plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Does runoff enter the pond without causing erosion or bypassing the control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Are the banks stabilized?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Is the skimmer installed and functioning properly?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Does the Dewatering volume drain entirely through the skimmer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Is the outlet free of obstructions?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Does the pond have sediment storage capacity?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Requires Routine Maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:	
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:	

Sediment Barriers		
Description of Conditions Observed:		
Are sediment barriers installed as planned in the SWP3?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Is the barrier sealed to the ground with ends upturned and without gaps or openings such that water ponds behind it?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Does captured sediment need to be removed from behind the barrier?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Requires Routine Maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:	
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:	

Storm Drain Inlet Protection		
Description of Conditions Observed:		
Is storm drain inlet protection installed as planned in the SWP3?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Are all operational inlets receiving sediment-laden water protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Does runoff bypass the device through tears, seams, gaps, or holes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Does captured sediment need to be removed from the device?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
Requires Routine Maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:	
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:	

OTHER CONTROL: _____	
Description of Conditions Observed:	
Requires Routine Maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:

OTHER CONTROL: _____	
Description of Conditions Observed:	
Requires Routine Maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:

OTHER CONTROL: _____	
Description of Conditions Observed:	
Requires Routine Maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:

Section D – Pollution Controls		
Are all controls to prevent the following pollutants from entering the drainage system or discharging installed, maintained, and operating effectively?		
Dewatering	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Notes:
Washout of Concrete and other materials	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Notes:
Fuel Storage & Handling	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Notes:
Trash Storage & Handling	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Notes:
Agrichemical Storage & Handling	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Notes:
Petroleum Product Storage & Handling	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Notes:
Toxic Materials Storage & Handling	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Notes:
Sanitary Waste	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Notes:
Requires Routine Maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Maintenance Items Needed:	
Requires Corrective Action? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe Actions Needed:	

Section E – Site Compliance Summary	
<input type="checkbox"/> I certify that on the date of this inspection, the site was found to be in compliance with the terms of the applicable Construction General Permit.	
<input type="checkbox"/> The following corrective actions are required by the established completion date ¹ .	
Corrective Action:	Complete By:
Section F – Signature and Certification	
<p>“I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information contained therein. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information contained is, to the best of my knowledge and belief, true, accurate, and complete. I have no personal knowledge that the information submitted is other than 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.”</p>	
Signature of Inspector or “Duly Authorized Representative”	
Signature:	Date:
Printed Name:	Affiliation:

¹ If the inspection reveals that a control practice needs repair or maintenance, it shall be repaired or maintained within 3 days of the inspection. Sediment settling ponds shall be repaired or maintained within 10 days of the inspection. If the inspection reveals that a control practice fails to perform its intended function and that another, more appropriate control practice is required, the SWP3 shall be amended, and the new control practice shall be installed within 10 days of the inspection. If the inspection reveals that a control practice has not been implemented in accordance with the schedule, the control practice shall be implemented within 10 days from the date of the inspection. If the inspection reveals that the planned control practice is not needed, the record shall contain a statement of explanation as to why the control practice is not needed.