

The following form or similar will be used during inspections for the ACP Project

DTI E&S/VPDES Inspection Report

Date: _____
Time: _____

General Information

Project:			Location:		
Are proper site postings in place?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No (Describe below)	
Is the SWPPP accessible onsite?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No (Describe below)	

Inspection Schedule: Does the project drain to impaired waters?

<input type="checkbox"/>	No (Select General Inspection Criteria)		<input type="checkbox"/>	Yes (Select Enhanced Inspection Criteria)	
<input type="checkbox"/>	Every 5 business days		<input type="checkbox"/>	Every 4 business days	
<input type="checkbox"/>	Every 10 business days and 48 hours after measureable storm event		<input type="checkbox"/>	Every 5 business days and 48 hours after measureable storm event	

Rainfall Data Recording

Onsite rain gauge or named local monitoring site (<i>rain gauge is located where?</i>):
Date & rainfall amount of the last measurable storm event (inches):

Stage of Construction

<input type="checkbox"/>	Pre-Construction	<input type="checkbox"/>	Access Installation	<input type="checkbox"/>	Finish Grading
<input type="checkbox"/>	Clearing & Grading	<input type="checkbox"/>	Rough Grading	<input type="checkbox"/>	Final Stabilization

E&S Minimum Standards	Y	N	N/A
01. Are all denuded areas stabilized? (MS-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02. Are all required structural practices installed properly per plan? (MS-2,6,10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03. Does permanent vegetation provide adequate stabilization? (MS-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04. Have sediment trapping facilities been constructed? (MS-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05. Are earthen control structures seeded and mulched? (MS-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06. Are all finished cut and fill slopes adequately stabilized? (MS-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07. Are all channels and outlets adequately stabilized? (MS-8,9,11,19)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08. Is re-stabilization of in-stream construction complete? (MS-12,15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09. Are in-stream construction EC properly installed? (MS-13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Have all applicable federal, state, & local requirements pertaining to working in or crossing live watercourses been met? (MS-14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Are utilities trenches dewatered, backfilled and stabilized? (MS-16)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are construction entrances maintained & public roads free of soil & mud? (MS-17)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Have control structures no longer needed been removed & areas stabilized? (MS-18)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are adjacent properties and waterways adequately protected? (MS-19)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Have all deficiencies from previous inspections been addressed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Have there been any discharges since the time of last inspections?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The following form or similar will be used during inspections for the ACP Project

Pollution Prevention Plan Implementation

<i>(*Note: if Yes is selected for the following, location is to be marked in the SWPPP)</i>	Y	N	N/A
01. Are wash waters occurring on this project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02. Is the location designated on the plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03. If so, is this activity located away from surface waters & stormwater inlets?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04. Are wash waters being directed into filter devices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05. Are there any prohibited discharges including, but not limited to, soaps, solvents, or detergents from or in association with wash water, fuels, oils or other petroleum products?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06. Are there any location(s) of control measure(s) that failed to operate as designed or proved inadequate or inappropriate for a particular location?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07. Any control measures require maintenance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08. Any location(s) where there is evidence that the approved erosion and sediment control plan prepared in accordance with VDEQ-approved annual standards and specifications has not been properly implemented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09. Any location(s) where any additional control measure is needed that did not exist at the time of inspection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Any disturbance outside the approved plan or permitted site area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Has SWPPP map been updated? (porta-potties, rain gauge, new stockpiles, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Summarized Overall Findings

List numerically any corrective actions required (including control measures requiring maintenance):

#	Description (with prescribed fix)	Correction Date	Initial

***All corrective actions must be implemented as soon as practicable but no later than 7 days after discovery.
 *Attach any documentation of any corrective actions required from a previous inspection that have not been implemented**

DTI E&S/VPDES Inspection Report

Project:	Location:
----------	-----------

No Deficiencies Certification

The facility is in compliance with the SWPPP and this VPDES permit:	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
---	--------------------------	-----	--------------------------	----

Signatory Confirmation (Signed by the Permit Holder or Duly Authorized Representative)

"I certify under penalty of law that I have read and understood this document and that this document and all attachments were prepared in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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."	
Name (Printed):	Date:
Signed:	Phone:
Title/Cert. No. (if applicable):	