



Industrial Stormwater Inspection Form UMTC-Fleet Services Facility

Month, Year:

Instructions: Gather Site Map and List of Significant Materials from the SWPPP for this Facility. Complete an Inspection Form each month; at least two per year must be during a runoff event. One inspection must be completed during a snow melt event. Indicate any corrective actions needed and date completed on this form. Send copy of this completed Inspection Form to DEHS staff only if changes to the SWPPP, Site Map or Significant Materials list are indicated by inspection.

Part 1. Inspection Details

Date and time of inspection:	Name of inspector:
Site conditions during inspection: <input type="checkbox"/> Dry or frozen conditions <input type="checkbox"/> Runoff conditions with sampling ^{1,5} <input type="checkbox"/> Runoff conditions <u>without</u> sampling ¹ <input type="checkbox"/> Wet, not runoff conditions	If runoff conditions exist, indicate total accumulation from event, in inches, or indicate "melt event" ¹ : If runoff event without sampling, indicate reason for no sample:
Weather conditions:	

¹ Indicate total accumulation for the precipitation event, to the nearest tenth of an inch. For less than 0.1", indicate "Trace".

Part 2. Significant Activities and Materials

A. Review/recall activities at Facility since the previous stormwater inspection.	
Have any spills at the Facility resulted in a release to the environment or resulted in other potential exposure to stormwater?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate spill material and date(s) of spill event(s):
Any salt or sand applied to hard surface areas/roads?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any mechanical street sweeping?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate date(s) :
Any permanent changes (construction/project) made at facility?	<input type="checkbox"/> Yes ² <input type="checkbox"/> No

² SWPPP revision may be needed. Review list of Significant Materials and Site Map, marking up as needed to reflect site conditions. Send changes with completed Inspection Form to EC staff to revise the Site Map and/or SWPPP. If site conditions indicate changes to the Site Map or SWPPP are needed, the Plan must be updated prior to submittal of the Annual Report for the reporting period.

B. Review Significant Materials List for this Facility; the list should be complete and accurate.	
Is the list a complete and accurate representation of Significant Materials present at the Facility at the time of the inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No ²

C. Review the location of each Significant Material at the Facility as indicated on the Site Map.	
Are the map designated locations accurate and complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No ²
Are any contractors or trades staff conducting work on-site at time of inspection that may potentially affect stormwater?	<input type="checkbox"/> Yes ² <input type="checkbox"/> No
Any construction with disturbed soil at time of inspection?	<input type="checkbox"/> Yes ³ <input type="checkbox"/> No If yes, total disturbed area is:

³ If the project disturbs more than 1 acre, make a copy of the Site Map and mark up to indicate disturbed area and indicate the permit number covering the activities. For projects ≤ 1 acre in size, make a copy of the Site Map and mark up to indicate disturbed area, as well as all temporary BMPs and/or BMP maintenance activities at the time of inspection. Staple the marked up Site Map to the Inspection Checklist and maintain with Checklist.

Part 3. Best Management Practices (BMPs)

A. Review areas at the Facility that are indicated as a Structural BMP on the Site Map.	
Are all BMPs in place and functioning properly?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:
Are rip rap areas reasonably free of vegetation?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:
Are vegetated areas in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:

Are structural BMPs and areas nearby free of evidence of erosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:
Are impermeable surfaces reasonably free of salt, sand, detritus and/or other debris?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:

⁴Corrective action needed; appropriate corrective action must be initiated within 30 days of discovery, and functionality of BMPs restored to full operation as soon as field conditions allow.

B. Review the non-structural BMPs indicated in the SWPPP.	
Are all Significant Materials stored indoors or under cover?	<input type="checkbox"/> Yes <input type="checkbox"/> No ²
Are containers with Significant Materials plainly labeled?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:
Is inventory of Significant Materials maintained on-site managed appropriately for current and anticipated needs at the Facility (excess inventory minimized)?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:
Is housekeeping (point-of-use issues) acceptable at time of inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:
Are Spill Response Materials adequately stocked?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:
Are training, SOPs and fuel/chemical delivery provisions up-to-date and being implemented at Facility at the time of the inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:

Part 4. Outfalls and Sampling

A. Review the location of stormwater outfalls at the Facility as indicated on the Site Map.	
Are the map designated locations accurate and complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No ²
Are outfalls stable and functional (no evidence of erosion or intrusion)?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ If no, indicate corrective action taken and date completed:
Water discharging to outfall?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, was the discharge free of discoloration, sheen, foam and floating items?	<input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ <input type="checkbox"/> N/A If no, indicate corrective action taken and date completed:
If discharge occurring, was a sample taken during inspection?	<input type="checkbox"/> Yes ⁵ <input type="checkbox"/> No ⁶

⁵If a sample is taken, it should be taken within the first 30 minutes of a runoff event, if possible. If not possible to collect the sample within the first 30 minutes, an explanation of why this was not possible should be maintained with test results. Attach test results and explanation, if applicable, to the relevant Inspection Form.

⁶If water was discharging to outfall but a sample was not taken, indicate reason in Part 1 of form; e.g. "quarterly sample already taken" or "sampling not required".