

Construction Stormwater Inspection Form

Project: 01-000-16-8009

UMTC-Track & Sports Recreational Bubble (Track)

Permit No: C00048487



UNIVERSITY OF MINNESOTA

Environmental Health & Safety

Instructions: Review the project SWPPP and BMPs currently in place. Complete an Inspection Form every seven (7) days and within 24 hours of rain event from Permit Issuance Date to the date the Notice of Termination (NOT) is signed. Indicate findings, corrective actions needed and date completed **on this form**. Adjust and maintain on-site SWPPP as necessary to reflect site conditions. Maintain completed forms on-site with other project documentation.

Part A Inspection Details

| | |
|---|--|
| Date and time of inspection: | Name of inspector: |
| Inspection Type: <input type="checkbox"/> Routine Inspection <input type="checkbox"/> Precipitation Event Inspection <input type="checkbox"/> Frozen conditions <input type="checkbox"/> Other: | If precipitation event, indicate total accumulation from event, in inches, or indicate "melt event" ¹ : |

¹ Indicate total accumulation for the precipitation event, to the nearest tenth of an inch. For less than 0.1", indicate "Trace". Use data from onsite rain gauge as indicated in onsite weather log.

Part B. SWPPP Details

| Review the current SWPPP, maintained in the onsite Project office, and answer the following questions. | Corrective Actions (CA) (² Corrective actions are required for any question where "No" is indicated.) | CA Completed (Date, Time, Person) |
|--|---|---|
| 1. Has Plan been modified to current site conditions? Indicate date of last update: | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 2. Does the Plan identify all potential pollutant sources, including waste collection, fueling and concrete washout areas? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 3. Does the Plan include a USGS map of surroundings (showing proximity to surface waters)? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 4. Is the permit Coverage Card posted at the Project site? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 5. Is the weather log being maintained and current? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 6. Project is not complete ³ . | <input type="checkbox"/> Yes <input type="checkbox"/> No ³ <input type="checkbox"/> N/A | |

² For any answer indicated as "No", indicate specific finding, corrective action(s), date and time corrective action was completed, and who completed corrective action.

³ If the project is complete, complete and sign the Notice of Termination, and remit signed NOT and copies of all Project inspections to DEHS for record retention.

Part C. Perimeter Controls

| Review all perimeter controls at the Project site for proper installation, maintenance and functionality, and answer the following questions. | Corrective Actions (CA) (² Corrective actions are required for any question where "No" is indicated.) | CA Completed (Date, Time, Person) |
|---|---|---|
| 1. Are all appropriate perimeter control devices installed and indicated on SWPPP map? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 2. Is perimeter control for all down-gradient perimeters maintained and functioning properly? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 3. Is perimeter control trenched-in where appropriate? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 4. Is vehicle tracking prevention at all site exits in maintained and functioning properly? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 5. Is tracked sediment removed within 24 hours? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 6. No discharges were observed during this inspection: sediment, water, or otherwise? | <input type="checkbox"/> Yes <input type="checkbox"/> No ⁴ <input type="checkbox"/> N/A | |



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| | | | |
|--|--|--|--|
| 7. Is a 50 foot natural buffer being maintained from all surface waters? | <input type="checkbox"/> Yes <input type="checkbox"/> No ⁵ <input type="checkbox"/> N/A | | |
| 8. Have all ditches been stabilized 200' back from point of discharge within 24 hours? (Not mulch) | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 9. Has any ditch or other bank erosion been observed? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 10. Is there any visible dust, other visible airborne pollutants or odors leaving the site? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 11. Are there any perimeter controls that are in place but which are no longer needed/not in use? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |

⁴If no, record observations about the discharge, including the location, and indicating the presence of anything in the water, including floating debris, a sheen or foam. Indicate whether there was an odor present.

⁵If no, redundant sediment controls must be installed, in-place and functional.

Part D. Inlets, Catch Basins and Culverts

| Review all inlets, catch basins and culverts at the Project site for proper installation, maintenance and functionality and answer the following questions. | Corrective Actions (CA) (² Corrective actions are required for any question where "No" is indicated.) | CA Completed (Date, Time, Person) |
|---|--|--------------------------------------|
| 1. Are all appropriate inlet protection devices installed and indicated on SWPPP map? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 2. Project site: Are inlet protection devices on all inlets, catch basins and culverts maintained and functioning properly? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 3. Adjacent/downgradient: Are inlet protection devices on all inlets, catch basins and culverts maintained and functioning properly? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 4. Are there any inlet protection devices that are in place but which are no longer needed/not in use? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |

Part E. Site Stabilization, Grading and Stockpiles

| Review all non-vegetated areas, including stockpiles, at the Project site and answer the following questions. | Corrective Actions (CA) (² Corrective actions are required for any question where "No" is indicated.) | CA Completed (Date, Time, Person) |
|--|--|--------------------------------------|
| 1. Is the topsoil on this project being preserved? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 2. Do all stockpiles have perimeter control? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 3. Has soil stabilization been installed where no construction activity for 14 days? (7 days or as soon as possible, where applicable) | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 4. Has the need to disturb steep slopes been minimized? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 5. Are all previously stabilized areas maintaining 90% ground cover? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |

Part F. Infiltration Areas and Sedimentation Basins

Section N/A

| Review any infiltration areas and sedimentation basins at the Project site and answer the following questions <u>or</u> check the box to the right if there are no infiltration areas or sedimentation basins at the site. | Corrective Actions (CA) (² Corrective actions are required for any question where "No" is indicated.) | CA Completed (Date, Time, Person) |
|--|--|--------------------------------------|
| 1. Are infiltration areas indicated on SWPPP map? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 2. Are all infiltration areas staked and marked to avoid compaction? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | |
| 3. Are all infiltration areas maintained and functioning properly? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² | |

| | | | |
|---|--|--|--|
| | <input type="checkbox"/> N/A | | |
| 4. Do all infiltration areas have a pretreatment device installed, in place and functioning? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 5. Are sedimentation basin(s) indicated on SWPPP map? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 6. Do pipe outlets have energy dissipation? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 7. Is a chemical control system in place in a Project sedimentation basin? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 8. Will a Project sedimentation basin be utilized as a permanent stormwater management system at project completion? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 9. If there is a discharge from the sedimentation basin, is the water clear, free from floating debris, sheen and foam, and free of odor? | <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |

Part G. Concrete Washout Areas

Section N/A

| Review any concrete washout areas at the Project site, and either answer the following questions <u>or</u> check the box to the right if there are no concrete washout areas at the project site. | Corrective Actions (CA) (² Corrective actions are required for any question where "No" is indicated.) | CA Completed (Date, Time, Person) |
|---|--|--------------------------------------|
| 1. Are concrete washout areas indicated on SWPPP map? <input type="checkbox"/> Yes <input type="checkbox"/> No ¹ <input type="checkbox"/> N/A | | |
| 2. Is the concrete washout area completely contained? <input type="checkbox"/> Yes <input type="checkbox"/> No ¹ <input type="checkbox"/> N/A | | |
| 3. Is the concrete washout area marked with a sign? <input type="checkbox"/> Yes <input type="checkbox"/> No ¹ <input type="checkbox"/> N/A | | |
| 4. All concrete washing on Project site is occurring at any designated washout? <input type="checkbox"/> Yes <input type="checkbox"/> No ¹ <input type="checkbox"/> N/A | | |

Part H. Hazardous and Solid Wastes

| Review waste management practices at the project site. | Corrective Actions (CA) (² Corrective actions are required for any question where "No" is indicated.) | CA Completed (Date, Time, Person) |
|--|--|--------------------------------------|
| 1. Are all materials that can leach pollutants under cover? <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 2. Is there any evidence of runoff or drainage from solid waste containers? <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 3. Has access been restricted to onsite hazardous materials? <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 4. Does on-site fueling only occur in a contained area? <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |
| 5. Is all site litter and debris being collected for proper management off-site? <input type="checkbox"/> Yes <input type="checkbox"/> No ² <input type="checkbox"/> N/A | | |

Additional Comments