

Replace
with logo

UPDES STORM WATER EVALUATION FORM FOR STORMWATER SYSTEM OPERATIONS AND MAINTENANCE COMPLIANCE

Site Name:		Inspection Date:		Stormwater System #	
Site Address:					
Facility/Owner Contact Information					
	NAME		PHONE #		E-MAIL
CONTACT:					
CONTACT:					
BUSINESS TYPE: INSTITUTION <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> HOA <input type="checkbox"/>					
Items Inspected	Checked		Maintenance		Write Observations and Remarks on maintenance issues to be corrected by the property owner.
	Yes	No	Required	Not Required	
1. SITE DRAWINGS current w/Plan					
2. Operator O&M Plan Awareness					
3. REPORT, DOCUMENTATION (General compliance/maintenance)					
4. DUMPING EVIDENCE (Piles, stains, smells near inlets)					
5. SPILL EVIDENCE (Soiled areas, history of spill kit use)					
6. GENERAL SITE EXPOSURE (Long term stockpiles, uncovered unmaintained equipment/storage)					
7. OTHER POLLUTION SOURCES					
8. GENERAL MAINTENANCE STATUS			Measure sediment/debris/volume, Maintenance records/ Soil Conditions		
Inlet/Outlet					
Water Conveyance Systems					
Manholes					
Manufactured Treatment Devices					
Regulation Retention Systems					
Surface LID Systems (Low Impact Development)					
Flood Control Systems					
Parking/Pavements					
Waste Collection					
Landscaping					
9. OTHER SITE SOP ITEMS					
Notes:					
Inspector:					
Print Name	Title		Signature		Date