

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WATER STANDARDS AND FACILITY REGULATION

ANNUAL INSPECTION FORM FOR NPDES PERMITS FOR DISCHARGES OF STORMWATER ASSOCIATED WITH INDUSTRIAL ACTIVITIES

| 1. | Date of Inspection 2 | | 2. | Facility Owner/Operator Name and Address: | | |
|-----|--|----------------------------|------|---|-----------|-------------------|
| 3. | NPDES Permit # | | | | | |
| | | | | | | |
| | | | Tel: | | Fax: | |
| 4. | Facility Address and Location | | | | | |
| | Street | | | | | |
| | Municipality County | | | | | |
| VIS | SUAL INSPECTION | | | | | |
| Pro | ovide the following inform | nation for the storm event | | | | |
| 5. | Duration | | | | | |
| 6. | | † | | | | |
| † | The annual inspection should be conducted after a storm event that is greater than 0.1 inches in magnitude and that occurred at least 72 hours from the previous 0.1 inch storm event. | | | | | |
| 7. | Estimate the time between the previous rain event | | | | | |
| 8. | S. Estimate the total volume (in gallons) for each outfall and report it in item 9. Volume = C x I A, where C is the runoff coefficient (i.e, 0.9 for paved and 0.5 for unpaved) I is the rainfall amount (in ft), and A is the area (square feet) drained to the outfall inspected (convert from cubic feet to gallons by multiplying by 7.481). | | | | | |
| 9. | Estimate the size of the drainage area (in square feet) for each outfall. | | | | | |
| | Outfall # | Drainage Area | | % Paved | % Unpaved | Volume in gallons |
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| Complete the following information for each outfall inspected (items 10 through 15) | | | | | | |
|---|---|--|--|--|--|--|
| VISUAL INSPECTION OF OUTFALL NUMBER | | | | | | |
| 10. | Description of area(s) that drains to outfall. | | | | | |
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| 11. | | | | | | |
| | place to control pollutants from running off-site. | | | | | |
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| 12. | Is there visible flow from the pipe? Yes No (Go to number 14) Pipe Dia. (inches) | | | | | |
| | a. ODOR: Chemical Musty Sewage Rotten Eggs Other | | | | | |
| | b. COLOR: Clear Red Yellow Brown Other | | | | | |
| | c. CLARITY: Clear Cloudy Opaque Suspended Solids Other | | | | | |
| | d. FLOATABLES: Suds Oily Film Garbage Sewage Other | | | | | |
| | e. DEPOSITS/STAINS: None Oily Sediment Other f. VEGETATION: None Normal Excessive Inhibited Other | | | | | |
| 40 | | | | | | |
| 13. | Is there standing water present? Yes No (Go to number 16) a. ODOR: Chemical Musty Sewage Rotten Eggs Other | | | | | |
| | b. COLOR: Clear Red Yellow Brown Other | | | | | |
| | c. CLARITY: Clear Cloudy Opaque Suspended Solids Other | | | | | |
| | d. FLOATABLES: Suds Oily Film Garbage Sewage Other | | | | | |
| | e. DEPOSITS/STAINS: None Oily Sediment Other f. VEGETATION: None Normal Excessive Inhibited Other | | | | | |
| | | | | | | |
| 14. | Is there any evidence of or potential for any pollutant being discharged at this outfall? | | | | | |
| | | | | | | |
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| | If yes, identify substances present in the sediment (if possible). | | | | | |
| | in yes, identify substances present in the sediment (ii possible). | | | | | |
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| 15. | Description of corrective measures taken or planned to remove sediments or debris if found during inspection. Please provide a schedule if actions are planned. | | | | | |
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| COMPREHENSIVE SITE COMPLIANCE EVALUATION | | | | | | |
|--|---|--|--|--|--|--|
| 16. | Do drainage maps reflect current conditions? Yes No | | | | | |
| | If no, provide your comments. Comments: | | | | | |
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| | | | | | | |
| 17. | Based on review of PPC Plan (including Housekeeping Measures), are any changes, corrections or updates necessary? Yes No | | | | | |
| | If yes, provide your comments. Comments: | | | | | |
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| 18. | Have you inspected all structural stormwater controls used to implement the PPC Plan to determine if they are adequate? Yes No If no, provide your comments. Comments: | | | | | |
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| 10 | Have you inspected the entire site to determine if exector and addimentation control messures are adequate? | | | | | |
| 19. | Have you inspected the entire site to determine if erosion and sedimentation control measures are adequate? Yes No If no, provide your comments. Comments: | | | | | |
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| 20. | Summarize corrective actions/measures completed or planned to correct any deficiencies found as a result of the inspection. Please provide a schedule if actions are planned. | | | | | |
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| 21. | Signature of Inspector | | | | | |
| | me of Inspector: | | | | | |
| | e Report Prepared: | | | | | |
| Sig | nature of Inspector: | | | | | |
| 22. | Signature of Owner/Operator of Facility | | | | | |
| Nan | ne/Title Principal Executive Officer Signature Date | | | | | |
| INFO RES AND | ERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE DRMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY SPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE DOCUMENTED INFORMATION IS TRUE, ACCURATE DOCUMENT OF THE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION LUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 Pa. C.S. §4904 (relating to unsworn falsification). | | | | | |



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Who May Use This Form

This form is to be used by all PAG-03 permit holders to comply with the (1) annual inspection requirement in Section A.2.b.(1) concerning Appendix J facilities, and (2) Comprehensive Site Compliance Evaluation and Record Keeping requirement in Section C.3.c. of the General Permit. This form may also be used for facilities with individual NPDES permits.

Completing the Form

One form must be completed for each facility or site. Please address all applicable questions and provide documentation to support the responses.

Permittees required to comply with Appendix J of the General Permit are eligible to conduct an Annual Inspection in lieu of monitoring. The Annual Inspection shall include visual inspection of all outfalls and a Comprehensive Site Compliance Evaluation. Complete items 10 through 15 for each outfall inspected. Where possible, visual inspection shall identify substances present in the sediment. The Annual Inspection/Certification must identify area(s) contributing pollutant(s) to stormwater discharge(s) and evaluate whether measures to reduce pollutant loadings identified in the PPC Plan are adequate and properly implemented in accordance with terms of the General Permit or whether additional control measures are necessary. Any deficiencies found during the inspection are to be corrected promptly in accordance with Part C.3.c.(2) of the General Permit.

Permittees that need to comply with requirements other than Appendix J of the General Permit must use this form to comply with Comprehensive Site Evaluation and Recordkeeping requirement of the General Permit.

Where to File This Form

When an annual inspection is conducted in lieu of monitoring, the permittee shall submit a completed and signed Annual Inspection Form, postmarked no later than 28 days after completion of the inspection to the appropriate DEP regional office. All other permittees shall retain the completed and signed form as part of the PPC Plan.