## **SWPPP/SWMP Compliance Evaluation Form**

Site Name:					Date of Evaluation:					Page _	of	
Completed	by:			Existing Weather Conditions:								
Rainfall Event	Date Began	Duration (Hours)	Amount (Inches)	Rainfall Event	Date Began	Duration (Hours)	Amount (Inches)	Rainfall Event	Date Began	Duration (Hours)	Amount (Inches)	
1				2	_			3				

				1	
	CWDDD/CWMD Information	YES	NO	N/A	Comments
1.	SWPPP/SWMP Information  For a nonlinear project, is a sign or other notice:				
'-	<ul> <li>Posted conspicuously near the main entrance of the construction site or if not feasible,</li> </ul>				
	<ul> <li>Posted in a local public building such as the town hall or public library</li> </ul>				
	For linear projects, is a sign or other notice posted at a publicly accessible location near the active part of the construction project?				
	$\sqrt{}$ Is a copy of the permit attached?	***************************************			
	√ Is the current location of the SWPPP/SWMP and names and telephone numbers of a contact person for scheduling viewing times shown?				
2.	Does a copy of the SWPPP/SWMP and accompanying sediment and erosion control drawings exist on the construction site?				
	$\sqrt{}$ Is the discharge permit on the construction site?				
	√ Is the discharge permit acknowledgement letter on the construction site?				
	√ Are the SWPPP/SWMP and/or accompanying sediment and erosion control drawings updated and documented?				
3.	Do inspection records exist on the construction sites?				
	√ Has the frequency of inspections occurred as specified in the SWPPP/SWMP?				
	√ Have all previous inspection items been addressed and documented within seven (7) calendar days after an inspection?				
4.	Do climatic records exist since the last inspection?				
	BMP/Housekeeping Information				
5.	Are offsite flows entering the construction site?				
6.	Is there evidence of, or the potential for, increased pollutant (e.g., sediment, fuel, concrete waste, portable toilet waste, etc.) loading to enter the storm water conveyance system due to lack of maintenance or improper BMP installation?				If yes, see attached detail report
7.	Do installation, repair and/or maintenance of <u>sediment</u> control BMPs need to occur?				If yes, see attached detail report
8.	Do installation, repair and/or maintenance of <u>erosion</u> control BMPs need to occur?				If yes, see attached detail report
9.	Is there evidence of sediment discharging off the construction site and onto downstream locations?				If yes, see attached detail report
10.	Are vehicles tracking sediment off the construction site?				If yes, see attached detail report
11.	If applicable, is soil, construction material, landscaping items, or other debris evident on the streets?				If yes, see attached detail report
12.	Do locations exist where consideration of installing additional BMPs not found in the SWPPP/SWMP should occur?				If yes, see attached detail report
13.	Do locations exist where consideration of removing existing BMPs identified and shown in the SWPPP/SWMP can occur?				If yes, see attached detail report
14.	Does your site evaluation indicate a need to possibly update and document the SWPPP/SWMP report and accompanying sediment and erosion control drawings within the next seven (7) days?				If yes, see attached detail report

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Completed by:		_		
Detail Report:	Identify the problem and its location. If app However, only if qualified (e.g., you are a d	propriate, describe (in general terms) what needs to be complete lesigner) should you be mandating specific BMPs to install.	ed.	Date done (with initials)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
(Prir	nt Inspector Name)	(Signature)	Date:	
Title/Qualification of				
partnership or	of the following statements must be significant sole proprietorship), principal executive right duly authorized representative.	gned by a corporate officer (for corporations), general e officer or ranking elected official (for municipality, sta	partner or p	roprietor (for other public
I certify under pen qualified personne directly responsible	alty of law that this document and all attachments I properly gathered and evaluated the information of for gathering the information, the information sub-	s were prepared under my direction or supervision in accordance with a submitted. Based on my inquiry of the person or persons who mana mitted is, to the best of my knowledge and belief, true, accurate, and consibility of fine and imprisonment for knowing violations.	age the system, o	or those persons
	(Print Name)	(Signature)	Date:	
	nly when no incidents of non-compliance /SWMP and any accompanying discharge p	e conditions are identified by this report: I certify the consermit.	struction site is	in compliance
			Date:	
Title or Position:	(Print Name)	(Signature)		