

way 14 days

## Development & Commercial Stormwater Construction Site Inspection Report

General Information			
Project Name	Buglo Apartments		
Owners/Operators Name	Sharif Rabadi / Mohammad Tahat		
Date of Inspection	6/25/2021	Start Time	8:00 am
Inspector's Name(s)	Mohammad Tahat		
Inspector's Title(s)	Inspector / Self inspection		
Inspector's Contact Information	5756500380		
Inspector's Qualifications			
<b>Type of Inspection:</b> <input checked="" type="checkbox"/> Regular <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? NO If yes, provide: Storm Start Date:                      Approximate Amount of Precipitation (in):			
<b>Weather at time of this inspection?</b> <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Other:			
Have any discharges occurred since the last inspection? NO If yes, describe: What did the water look like at the time of the discharge? Clear <input type="checkbox"/> Partly turbid <input type="checkbox"/> Very turbid			
Are there any discharges at the time of inspection? NO If yes, describe: What did the water look like at the time of the discharge? Clear <input type="checkbox"/> Partly turbid <input type="checkbox"/> Very turbid			
1. Is a rain gage installed on site? NO    Where is it located? 2. Has the Rain Event page been filled out? NO 3. Are there MSDS sheets on site? No    Where are they located? call 5756500380 4. Has the SWPPP been signed on the certification page? Yes    What companies have signed? owner 5. Have the delegation letters been signed? yes    What companies have signed? owner 6. Has a delegation of authority been filled out for who is signing the inspection reports? yes    Who is signing the inspection reports? Mohammad Tahat 7. Has the "Chemical On Site" form been filled out? No 8. Is there a spill kit on site? NO    Where is it located? 9. Have they done any training for the supervisors or others? 10. Was the inspector able to train any one on this visit?    Who did you speak with?			
Are the SWPPP and inspections available on site?	No	The SWPPP book and inspections are located at Office - call 5756500380	
Notes			
1. The fence on the south boundayneed to be changed on the map to match current location because it more appropriate.			
2.			
3.			

1	Are the BMPs shown on the map?	yes	
2	Were there changes to the SWPPP?	yes	the fence on the south should be changed on the map
3	Has the SWPPP been updated?	NO	Inspection Plus is working on it
4	Were the changes to the SWPPP implemented within 7 days?	yes	

	New BMPs needed	Notes
1		
2		
3		
4		
5		

#### Overall Site Issues

*A list of corrective actions will be supplied with this inspection.*

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes.
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	yes		
2	Are natural resource areas (e.g., streams, Arroyos, mature trees, etc.) protected with barriers or similar BMPs?	NA		
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	yes		
4	Are discharge points and receiving waters free of any sediment deposits?	yes		
5	Are storm drain inlets properly protected?	yes		
6	Is the construction exit preventing sediment from being tracked into the street?	NA		
7	Is trash/litter from work areas collected and placed in dumpsters?	Yes		
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	NA		

Date:

Project:

## Corrective Action Log

[illegible]



*1/4" Rain*

Date: \_\_\_\_\_

**After Rain Event Construction Compliance Inspection For**

**Contractor:** \_\_\_\_\_

**Site:** \_\_\_\_\_

**Conducted By:** \_\_\_\_\_

**Time of visit:** \_\_\_\_\_

**Part 1: Walk through the facility and look for signs of erosion control measures that may have failed or been damaged from the recent rainfall event.**

<b>a. Site Inspection</b>	<b>Y</b>	<b>N</b>	<b>Notes</b>
1. Are there any erosion control structures damaged from the rain event?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are there signs of new ruts or gullies from the rain event?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are there signs of significant amounts of mud in the street or outfalls from the rainfall event?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are there any conditions that need immediate attention?	<input type="checkbox"/>	<input type="checkbox"/>	

**Part 2: Inspection report summary.**

<b>b. Inspection Report Summary</b>	<b>Information/Comments</b>
1. Name of Inspector	
2. Qualifications of Inspector	Training and work experience – see inspector qualification page in the SWPPP
3. Measures/Areas Inspected	
4. Observed Conditions.	
5. Changes Necessary to the SWPPP.	
6. Were there any discharges?	
What did the water look like at the time of the discharge?	
7. Clear <input type="checkbox"/> Partly sandy <input type="checkbox"/> Very sandy	
8. Was Inspection Conducted Within 24 Hours of Last Rainfall Over 1/4"? How much did it rain?	

**"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."**

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_ Title: Inspector

SWPPP Management Signature \_\_\_\_\_ Date: \_\_\_\_\_