NOTE: 2016 Protocol - Maximum of one SSWR per permit

PROPRIETARY COMPANY MATERIAL



Date & Time: 10-11-2020 at 9:07 AM

NATIONAL STORM WATER QUALITY PROGRAM SITE INSPECTION REPORT (SIR)

For use on most PulteGroup Sites as of 01/01/2016

| Commu | nity Name: | Pulte: Campo Del Nor | te, Albuquerque, NM 87113 NPI | DES: NMR1001LO | | | |
|----------------------|-----------------------|------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------|--|
| | | (Include Site Name, Ci | ty, State, Zip Code and NPDES/0 | Construction Storm Water Perm | it Number) | | |
| Master Site List ID: | | 1261 | Inspection performed by: Tim Slatunas, CISEC, Green Globe Environmental | | | | |
| | | | | (Print No | ame, Company, and Title / Qua | lifications) | |
| Stages | of Construction: | (check all that apply) | Land Development Land and Vertical | Inactive | Vertical Construction | Post-Construction | |
| Type of | Inspection: | (check all that apply) | Routine Inspection Other: | Storm-Event Related | Final Site Inspection | | |
| I. | SWPPP - Respon | d to all Questions | | | | | |
| Item | • | • | | | Yes | No | |
| A | Was the SWPPP acce | essible at the time of the inspect | ion? | | $\overline{\boxtimes}$ | If "No," then an Action | |
| В | Is the SSWR correct | ly identified in the SWPPP? | | | | Item is required. | |
| С | Does the SWPPP ref | flect the current stage of develop | ment? | | $\overline{\boxtimes}$ | Describe all Action Items on the reverse side of this sheet. (Section IV) | |
| D | Have all SIR action | Items identified on the precedin | g reports been resolved? | | $\overline{\boxtimes}$ | | |
| E | Is NSQP Signage po | osted and in compliance with NS | SQP requirements? | | | | |
| II. | Estimated date of | most recent Storm Event Th | at triggered an Inspection:07 | <u>-25-2020</u> | | | |
| | Provide rainfall info | ormation as required by the App | licable Permit: <u>.5 Inches</u> | | | e storm-event related Inspection required by the Applicable Permit) | |
| III. | Site BMP Inspecti | ion | Not | | | | |
| <u>Item</u> | SWPPP Items | | <u>Applicable</u> | <u>Acceptable</u> | Action Item | Assigned To | |
| Erosion | 1 Control | | | | | | |
| 1 | Protection of Distur | bed Areas | \boxtimes | | | | |
| 2 | Slope Protection | | | | | | |
| 3 | Vegetation / Revege | etation | \boxtimes | | | | |
| 4 | Velocity Reduction | Devices / Outlet Protection | | \boxtimes | | | |
| Sedime | ent Control | | | | | | |
| 5 | Check Dams (rock, g | gravel, other) | | \boxtimes | | | |
| 6 | Silt Fence | | | \boxtimes | | | |
| 7 | Berms, Dikes, Straw | Wattles | | | | | |
| 8 | Detention Basins/Se | ediment Traps | oxtimes | | | | |
| 9 | Stockpiles Protected | d/Stabilized | \boxtimes | | | | |
| 10 | Storm Water Inlet Pr | rotection | | \boxtimes | | | |
| Housel | keeping / Trade Con | npliance | | | | | |
| 11 | Waste and Trash Ma | nagement | | \boxtimes | | | |
| 12 | Spill and Leak Preve | ention | | $egin{array}{c} egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}$ | | | |
| 13 | Sanitary Stations | | | \boxtimes | | | |
| 14 | Concrete and Consti | ruction Washouts | | \boxtimes | | | |
| 15 | Material Use and Po | tential Contaminate Storage | | | <u> </u> | | |
| 16 | Equipment Storage | | \boxtimes | | <u> </u> | | |
| 17 | Construction Exits | and Entrances | | Ŭ | <u> </u> | | |
| 18 | Dust Control | | | | <u> </u> | | |
| 19 | Street Sweeping | | | \bowtie | □ . | | |

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|-------------|--------------------------------------------|-------------------|-------------------|----------------------|--------------------|----------|
| <u>Item</u> | SWPPP Items (continued) | <u>Applicable</u> | <u>Acceptable</u> | Action Item | Assigned | To |
| Other | | | | | | |
| 20 | Non-Storm Water Flow | \boxtimes | | | | |
| 21 | Site's Weathering of Storm Events | \boxtimes | | | | |
| 22 | Site Discharge Points | | \boxtimes | | | |
| 23 | BMP Provider Performance | | \boxtimes | | | |
| IV. | Action Items | | | V. Responsive Action | Completion | |
| Item | Location and Responsive Action to be taken | | | Date Noted | Date of Completion | Initials |

SIR must be reviewed and signed below by SSWR - Not Delegable: I certify under penalty of law that Sections I-V of this document and all attachments were prepared by me or 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 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. In the event there are no Action Items in this report that have remained unresolved for a period in excess of that allowed by the Applicable Construction General Permit, I further certify under penalty of law that this Site is in compliance with the SWPPP and the Applicable Construction General Permit. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations. Certification applies to the area under the supervision of the SSWR signing this report.

Certified By: (Third Party Inspector if required by the Applicable Permit)

Attach additional sheet(s) of SIR addendum if necessary

Certified By: (SSWR - Must be a PulteGroup Employee)

| | | Tim Slatunas | | | | |
|----------------------------------------------------------------------------------------------------------------|--|-------------------------------|------|--|--|--|
| Site Storm Water Representative - Print Name and Title | | Inspector - Print Name | | | | |
| | | TAMMM | | | | |
| Site Storm Water Representative Signature (Use Ink) Date | | Inspector Signature (Use Ink) | Date | | | |
| VI. Justification for non-completion of Responsive Actions | | | | | | |
| Describe why any Responsive Actions were not corrected within the permit required time period (if applicable). | | | | | | |
| | | | | | | |

N/A

Attach additional sheet(s) if necessary