

## **INSPECTION REPORT**

# **GENERAL INFORMATION**

DATE OF INSPECTION:	10/14/2019
COMPANY NAME:	Paaru
PROJECT NAME:	Holly Ave Construction
LOCATION:	9100 Holly Ave NE ,Albuquerque,New Mexico,87122
TRACKING NO:	NMR100000
COMPLIANCE EVALUATION:	Satisfactory
TYPE OF INSPECTION:	7Day
START TIME:	9:15 AM
END TIME:	9:30 AM
INSPECTOR'S NAME:	Kasey Anderson
INSPECTOR'S TITLE:	Environmental Inspector
INSPECTOR'S QUALIFICATIONS:	Storm Water Qualified Person
INSPECTOR'S CONTACT:	505-280-7766
PHASE OF CONSTRUCTION:	<ul> <li>Clear and Grub ✓ Excavation ✓ Building (vertical)</li> <li>✓ Rough Grading ☐ Infrastructure ☐ Final Grading</li> <li>☐ Final Stabilization</li> </ul>
WE	ATHER INFORMATION
HAS A STORM EVENT OCCURRED SINCE THE	

LAST INSPECTION?	O Yes	No
WEATHER AT TIME OF THIS INSPECTION:	Clear	
TEMPERATURE:	58	
HAVE ANY DISCHARGES OCCURRED SINCE THE LAST INSPECTION?	Yes	<ul><li>No</li></ul>
ARE ANY DISCHARGES OCCURRING NOW?	Yes	<ul><li>No</li></ul>
ARE ANY PORTIONS OF YOUR SITE UNSAFE TO INSPECT?	Yes	<ul><li>No</li></ul>

## POLLUTION PREVENTION, SEDIMENT AND EROSION CONTROL BMP'S

#	S&E/P2 CONTROLS	MAINTENANCE	CORRECTIVE ACTION	LOCATION	QUANTITY	UNIT	РНОТО
1	SWPPP Plan	None	None	None	0	EA	

### GENERAL SITE INSPECTION ITEMS

#	INSPECTION ITEM	INSPECTOR'S OBSERVATION	ACTION REQUIRED?	NOTES
1	Is the SWPPP signage clearly posted with the correct information and properly displayed at an obvious perimeter location?	• Yes ONo ON/A	◯ Yes	
2	Are steep slope areas not actively being worked properly stabilized?	Yes No N/A	Yes No	
3	Are disturbed areas not actively being worked properly stabilized?	● Yes ○ No ○ N/A	Yes No	
4	Are natural resource areas (e.g. streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	● Yes ○ No ○ N/A	◯ Yes	
5	Are discharge points and receiving waters free of any sediment deposits?	• Yes ONo ON/A	☐ Yes ● No	
6	Is trash/litter from work areas collected and placed in covered dumpsters?	• Yes ONo ON/A	Yes No	
7	Are washout facilities (e.g. paint, stucco, concrete) available, clearly marked and maintained?	● Yes ○ No ○ N/A	Yes No	
8	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks or any other deleterious material?	● Yes ○ No ○ N/A	Yes No	
9	Are materials that are potential stormwater contaminants stored inside or in containers?	• Yes ONo ON/A	Yes No	
10	Are offsite flows entering the construction site?	Yes ● No N/A	◯ Yes ● No	
11	Is there any evidence that pollutants are leaving the site or are not properly contained on site?	Yes ● No N/A	◯ Yes ● No	
12	Are traffic and parking areas restricted so as to reduce soil erosion and dust?	● Yes ○ No ○ N/A	◯ Yes ● No	

#	INSPECTION ITEM	INSPECTOR'S OBSERVATION	ACTION REQUIRED?	NOTES
13	Are non-stormwater discharges properly controlled?	• Yes ONo ON/A	◯ Yes ● No	
14	Is the project being operated in compliance with the SWPPP and with permit conditions at this time?	● Yes ○ No ○ N/A	◯ Yes ● No	
15	Are changes to the SWPPP necessary at this time?	Yes ● No N/A	◯ Yes ● No	
16	Are dust control measures being properly implemented?	● Yes ○ No ○ N/A	○Yes • No	
17	Are the SWPPP documentation and records up to date and accurately reflect the current conditions? (e.g. Site Map, Inspection Reports, Installation Dates)	•Yes No NA	○Yes • No	

#### **CERTIFICATION AND SIGNATURE BY INSPECTOR**

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.

INSPECTED BY: Kas	sey Anderson	DATE:	October 14, 2019	9
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**SIGNATURE AND AFFILIATION:** 

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#### **CERTIFICATION AND SIGNATURE BY PERMITTEE**

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.

PRINT NAME AND TITLE:	,	DATE:
SIGNATURE:		