

INSPECTION REPORT

GENERAL INFORMATION

DATE OF INSPECTION:	1/20/2020		
COMPANY NAME:	Paaru		
PROJECT NAME:	Holly Ave Construction		
LOCATION:	9100 Holly Ave NE ,Albuquerque,New Mexico,87122		
TRACKING NO:	NMR100000		
COMPLIANCE EVALUATION:	Marginal		
TYPE OF INSPECTION:	7Day		
START TIME:	8:05 AM		
END TIME:	8:15 AM		
INSPECTOR'S NAME:	Gaylen Barnett		
INSPECTOR'S TITLE:	Environmental Compliance Manager		
INSPECTOR'S QUALIFICATIONS:	Storm Water Qualified Person		
INSPECTOR'S CONTACT:	505-620-2036		
PHASE OF CONSTRUCTION:	 Clear and Grub ✓ Excavation ✓ Building (vertical) Rough Grading ✓ Infrastructure ☐ Final Grading Final Stabilization 		
WEA	ATHER INFORMATION		
HAS A STORM EVENT OCCURRED SINCE THE LAST INSPECTION?	○ Yes		

LAST INSPECTION?	O Yes	No
WEATHER AT TIME OF THIS INSPECTION:	Clear	
TEMPERATURE:	33	
HAVE ANY DISCHARGES OCCURRED SINCE THE LAST INSPECTION?	Yes	No
ARE ANY DISCHARGES OCCURRING NOW?	Yes	No
ARE ANY PORTIONS OF YOUR SITE UNSAFE TO INSPECT?	Yes	No

POLLUTION PREVENTION, SEDIMENT AND EROSION CONTROL BMP'S

#	S&E/P2 CONTROLS	MAINTENANCE	CORRECTIVE ACTION	LOCATION	QUANTITY	UNIT	рното
1	Silt Fence	None	Repair	Repair silt fence along east and west boundaries	100	LF	

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 ● No	
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 ● No	
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 ONo ON/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	

#	INSPECTION ITEM	INSPECTOR'S OBSERVATION	ACTION REQUIRED?	NOTES
12	Are traffic and parking areas restricted so as to reduce soil erosion and dust?	● Yes ○ No ○ N/A	○Yes • No	
13	Are non-stormwater discharges properly controlled?	● Yes ○ No ○ N/A	◯ Yes ● No	
14	Is the project being operated in compliance with the SWPPP and with permit conditions at this time?	• Yes ONo ON/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 ONO N/A	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:	Gavlen Barnett	DATE: January 20, 2020

SIGNATURE AND AFFILIATION: Residence of the control of the control

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:		