



# City of Albuquerque Stormwater Construction Site Inspection Report

## General Information

Project Name and Location	Chaparral Blount School main parking lot Under and Western Trl		
Site Contact Name & Agency	David Ritchey APS	Contact Phone #	505 <del>246-848</del> 8876
Date of Inspection	7-6-14	Start/End Time	12:20/12:30
Inspector Name, COA Dept.	Curtis Cherne, Stormwater Quality		
Inspector Phone / E-mail	505-924-3420/ccherne@cabq.gov		
Inspector Qualifications	Qualified Compliance Inspector of Stormwater- Stormwater One		
Describe Present Phase of Construction	Stabilized		

## Type of Inspection:

- ☒ Regular
 ☐ During storm event
 ☐ Post-storm event (> 0.5 inch)
 ☐ 311 / Complaint Response
 ☐ Follow-Up

## Weather Information

### Weather at time of this inspection?

Temperature: ~ 90 F°

- ☒ Clear
 ☐ Cloudy
 ☐ Rain
 ☐ Sleet
 ☐ Fog
 ☐ Snowing
 ☐ Windy

### Has there been a storm event since the site was Permitted? ☒ Yes ☐ No

Amount: ☐ < 1/4" ☒ 1/4" to 3/4" ☐ > 3/4" ☐ Snow \_\_\_\_\_"

## Erosion & Sediment Control Inspection

- Entrance / Track-Out NA
- Sediment Controls / Silt Fence, Check Dams, Waddles, etc. f
- Erosion Controls / Mulch, Seed, asphalt, gravel
- Housekeeping/Pollutant Controls NA
- Debris/Pollutants/Sediment in MS4 f
- Notes \_\_\_\_\_

Is site being maintained in compliance with the Drainage Ordinance? ☒ Yes ☐ No

Curtis Cherne 7-6-14  
 Signature Date



## City of Albuquerque Stormwater Construction Site Inspection Report

### General Information

Project Name and Location	<u>Chaparral Blended School K addition</u> <u>Unser and Western Trl</u>		
Site Contact Name & Agency	<u>Daniel Ritchey</u> <u>APS</u>	Contact Phone #	<u>505</u> <u>848-8874</u>
Date of Inspection	<u>7-6-16</u>	Start/End Time	<u>12:20 / 12:30</u>
Inspector Name, COA Dept.	<u>Curtis Cherne, Stormwater Quality</u>		
Inspector Phone / E-mail	<u>505-924-3420/ccherne@cabq.gov</u>		
Inspector Qualifications	<u>Qualified Compliance Inspector of Stormwater- Stormwater One</u>		
Describe Present Phase of Construction	<u>Stabilizing</u>		

### Type of Inspection:

- ☒ Regular    
 • During storm event    
 • Post-storm event (> 0.5 inch)    
 • 311 / Complaint Response    
 • Follow-Up

### Weather Information

#### Weather at time of this inspection?

Temperature: ~ 90 F°

- ☒ Clear    
 • Cloudy    
 • Rain    
 • Sleet    
 • Fog    
 • Snowing    
 • Windy

#### Has there been a storm event since the site was Permitted? • ☒ Yes • No

Amount: • < 1/4"     • 1/4" to 3/4"     • > 3/4"     • Snow \_\_\_\_\_

### Erosion & Sediment Control Inspection

- Entrance / Track-Out MA
- Sediment Controls / Silt Fence, Check Dams, Waddles, etc. MA
- Erosion Controls / Mulch, Seed, gravel, asphalt
- Housekeeping/Pollutant Controls MA
- Debris/Pollutants/Sediment in MS4 MA
- Notes \_\_\_\_\_

Is site being maintained in compliance with the Drainage Ordinance ? • ☒ Yes • No

Curtis Cherne  
Signature

7-6-16  
Date



## City of Albuquerque Stormwater Construction Site Inspection Report

### General Information

Project Name and Location	Chaparral Elementary School parent parking lot Under and Western Dr		
Site Contact Name & Agency	David Ritchey APS	Contact Phone #	505 848-8874
Date of Inspection	7-6-16	Start/End Time	10:20 / 12:20
Inspector Name, COA Dept.	Curtis Cherne, Stormwater Quality		
Inspector Phone / E-mail	505-924-3420/ccherne@cabq.gov		
Inspector Qualifications	Qualified Compliance Inspector of Stormwater- Stormwater One		
Describe Present Phase of Construction	Stabilize		

### Type of Inspection:

☒ Regular
 • During storm event
 • Post-storm event (> 0.5 inch)
 • 311 / Complaint Response
 • Follow-Up

### Weather Information

Weather at time of this inspection?

Temperature: ~ 90 F°

☒ Clear
 • Cloudy
 • Rain
 • Sleet
 • Fog
 • Snowing
 • Windy

Has there been a storm event since the site was Permitted? • ☒ Yes • No

Amount: • < 1/4" • ☒ 1/4" to 3/4" • > 3/4" • Snow \_\_\_\_\_"


### Erosion & Sediment Control Inspection

- Entrance / Track-Out asphalt
- Sediment Controls / Silt Fence, Check Dams, Waddles, etc. \_\_\_\_\_
- Erosion Controls / Mulch, Seed, asphalt, gravel
- Housekeeping/Pollutant Controls \_\_\_\_\_
- Debris/Pollutants/Sediment in MS4 \_\_\_\_\_
- Notes \_\_\_\_\_

Is site being maintained in compliance with the Drainage Ordinance? • ☒ Yes • No

Curtis Cherne  
Signature

7-6-16  
Date

	
<b>City of Albuquerque</b> <b>Stormwater Construction Site</b> <b>Inspection Report</b>	

<b>Project Name and Location</b> <i>Chaparral ELEM School</i> <i>Wesker Trl and Vaser</i>		<b>Site Contact Name &amp; Agency</b> <i>David R. Ritzky</i> <i>APS</i>	<b>Date of Inspection</b> <i>7-6-15</i>
<b>Inspector Name, COA Dept.</b> <i>Curtis Cherne, Stormwater Quality</i>		<b>Inspector Phone / E-mail</b> <i>505-924-3420/ccherne@cabq.gov</i>	
<b>Inspector Qualifications</b> <i>Stormwater USA</i>		<b>Describe Present Phase of Construction</b> <i>rough grade, pouring curb</i>	
<b>Type of Inspection:</b> <input checked="" type="radio"/> Regular <input type="radio"/> Drive-By/Random <input type="radio"/> During storm event <input type="radio"/> Post-storm event <input type="radio"/> 311 / Complaint Response <input type="radio"/> Follow-Up			

<b>Weather Information</b> Weather at time of this inspection? <input checked="" type="radio"/> Clear <input checked="" type="radio"/> Cloudy <input type="radio"/> Rain <input type="radio"/> Sleet <input type="radio"/> Fog <input type="radio"/> Snowing <input type="radio"/> High Winds <input type="radio"/> Other: _____ Temperature: ~ <i>75</i> °F	
Has there been a storm event since the site was Permitted? <input checked="" type="radio"/> Yes <input type="radio"/> No Amount: <input checked="" type="radio"/> < 1/4" <input type="radio"/> 1/4" to 3/4" <input type="radio"/> > 3/4"    Intensity: <input type="radio"/> Light <input type="radio"/> Med. <input type="radio"/> Hvy. <input type="radio"/> Snow _____	
<b>Erosion &amp; Sediment Control Inspection</b>	

Check any BMPs that have FAILED or REQUIRE MAINTENANCE	
Entrance / Off Tracking <i>NO</i>	Sediment Controls / Silt Fence, Check Dams, Waddles, etc. <i>OK</i>
Erosion Controls / Mulch, Seed, <i>NO</i>	Wind Blown Erosion <i>NO</i>
Housekeeping / Pollutant Controls <i>good</i>	Is site being maintained in compliance with Const. Gen. Permit? <input checked="" type="radio"/> Yes <input type="radio"/> No
Signature: <i>Curtis Cherne</i> Date: <i>7-7-15</i>	



City of Albuquerque  
Planning Department  
Development & Building Services Division  
OPERATOR

Erosion and Sediment Control (ESC) PERMIT APPLICATION

ESC plans and permits are required for any new development and redevelopment site with 1-acre or more of land disturbing area, including projects less than 1-acre that are part of a larger common plan of development.  
(REV 06/2013)

Project Name: Chaparral Elementary School City ESC #: F10-E005 OP  
Date of Application: 7/12/2013 Start Date: 7/25/2013  
Applicant Name: Albuquerque Public Schools  
eNOI #: NMR12AM49  
Legal Description: Tract B, Chaparral Elementary School  
Project Address: 3625 Milne Road NW, Albuquerque, NM 87120  
Number of Project Acres: 15.1267 +/- Number of Disturbed Acres: 7.3 +/-  
General Purpose of Land Disturbing Activity: Building Construction and Related Site Improvements

Owner Information:

Name: David Ritchey Company: Albuquerque Public Schools  
Address: 915 Oak St. SE, Albuquerque, NM 87108  
Office Phone: 505.848.8876 Cell Phone: 505.977.5829 Fax: 505.246.9020  
E-mail: ritchey\_d@aps.edu

Operator (Person with day-to-day Control of activities occurring at the construction site):


Name: Dennis Thompson Company: Shumate Constructors  
Address: 8200 Venice NE, Albuquerque, NM 87122  
Office Phone: 505.856.1412 Cell Phone: 505.991.2597 Fax: 505.856.1375  
E-mail: shumateconstructors@gmail.com

Operator Signature:  Date: 7/12/13

Additional Information:

*The undersigned Applicant hereby agrees to defend, indemnify and hold the City, its officers, and employees harmless from any and all claims, damages or suits of any kind arising directly or indirectly out of commission by the Applicant, or any employee, agent, assign, contractor or subcontractor of the Applicant, in connection with the Applicant's NPDES General Permit and/or City Stormwater Permit.*

To be completed by the City Staff:

Permit Fee (based on size of Project): N/A Permit No: F10-E005  
Date Effective: 7/12/13 Name: Greg Olson Signature:   
Termination Date: \_\_\_\_\_ Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Responsible Party After Termination of This Permit: \_\_\_\_\_  
eNOI # for the responsible Party: \_\_\_\_\_ Permit No: \_\_\_\_\_



# City of Albuquerque

## Planning Department Development & Building Services Division

OWNER

### Erosion and Sediment Control (ESC) PERMIT APPLICATION

ESC plans and permits are required for any new development and redevelopment site with 1-acre or more of land disturbing area, including projects less than 1-acre that are part of a larger common plan of development.

(REV 06/2013)

Project Name: Chaparral Elementary School City ESC #: F10-E005  
Date of Application: 7/11/2013 Start Date: 7/25/2013  
Applicant Name: Albuquerque Public Schools  
eNOI #: NMR 12A 198  
Legal Description: TRACT B, CHAPARRAL ELEMENTARY SCHOOL  
Project Address: 3625 Milne Road NW, Albuq., NM 87120  
Number of Project Acres: 15.1267 +/- Number of Disturbed Acres: 7.3 +/-  
General Purpose of Land Disturbing Activity: Building Construction & Related Site Improv.

#### Operator (Person with day-to-day Control of activities occurring at the construction site):

Name: Dennis Thompson Company: Shumate Constructors  
Address: 8200 Venice Ave. NE, Albuq., NM 87122  
Office Phone: 505-856-1412 Cell Phone: 505.991.2597 Fax: 505.856.1375  
E-mail: shumateconstructors@gmail.com

#### Owner Information:


Name: David Ritchey Company: Albuq. Public Schools  
Address: 915 Oak St. SE, Albuq. NM 87108  
Office Phone: 505.848.8876 Cell Phone: 505.977.5829 Fax: 505.246.9020  
E-mail: ritchey-d@aps.edu  
Owner Signature: [Signature] Date: 7/11/2013

#### Additional Information:

The undersigned Applicant hereby agrees to defend, indemnify and hold the City, its officers, and employees harmless from any and all claims, damages or suits of any kind arising directly or indirectly out of commission by the Applicant, or any employee, agent, assign, contractor or subcontractor of the Applicant, in connection with the Applicant's NPDES General Permit and/or City Stormwater Permit.

#### To be completed by the City Staff:

Permit Fee (based on size of Project): N/A Permit No: F10-E005  
Date Effective: 7/11/13 Name: Grag Olson, P.E. Signature: [Signature] 7/11/13  
Termination Date: \_\_\_\_\_ Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Responsible Party After Termination of This Permit: \_\_\_\_\_  
eNOI # for the responsible Party: \_\_\_\_\_ Permit No: \_\_\_\_\_

NPDES FORM 3510-9		UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460 NOTICE OF INTENT (NOI) FOR STORMWATER DISCHARGES ASSOCIATED WITH CONSTRUCTION ACTIVITY UNDER AN NPDES GENERAL PERMIT	Form Approved. OMB Nos. 2040-0004
<p>Submission of this Notice of Intent (NOI) constitutes notice that the operator identified in Section II of this form requests authorization to discharge pursuant to the NPDES Construction General Permit (CGP) permit number identified in Section I of this form. Submission of this NOI also constitutes notice that the operator identified in Section II of this form meets the eligibility requirements of Parts 1.1 and 1.2 of the CGP for the project identified in Section III of this form. Permit coverage is required prior to commencement of construction activity until you are eligible to terminate coverage as detailed in Part 8 of the CGP. To obtain authorization, you must submit a complete and accurate NOI form. Discharges are not authorized if your NOI is incomplete or inaccurate or if you were never eligible for permit coverage. Refer to the instructions at the end of this form.</p>			
<b>I. Approval to Use Paper NOI Form</b>			
<p>Have you been given approval from the Regional Office to use this paper NOI form*? <input type="checkbox"/> Yes <input type="checkbox"/> NO</p> <p>If yes, provide the reason you need to use this paper form, the name of the EPA Regional Office staff person who approved your use of this form, and the date of approval:</p> <p>Reason for using paper form:</p> <p>Name of EPA staff person:</p> <p>Date approval obtained:</p> <p>* Note: You are required to obtain approval from the applicable Regional Office prior to using this paper NOI form.</p>			
<b>II. Permit Information:</b> <span style="float: right;">Tracking Number (EPA Use Only) NMR12A198</span>			
<p>Permit Number: <u>NMR120000</u> (see Appendix B of the CGP for the list of eligible permit numbers)</p>			
<b>III. Operator Information</b>			
<p>Name: <u>ALBUQUERQUE PUBLIC SCHOOLS</u></p> <p>Phone: <u>5058488876</u> Fax (Optional): <u>5052469020</u></p> <p>Email: <u>RITCHEY_D@APS.EDU</u></p> <p>IRS Employer Identification Number (EIN): <u>85-6000101</u></p> <p>Point of Contact (First Name, Middle Initial, Last Name): <u>DAVID RITCHEY</u></p> <p>Mailing Address:</p> <p>Street: <u>915 OAK STREET SE</u></p> <p>City: <u>ALBUQUERQUE</u> State: <u>NM</u> Zip: <u>87106</u></p> <p>NOI Preparer (Complete if NOI was prepared by someone other than the certifier):</p> <p>Prepared by (First Name, Middle Initial, Last Name): <u>JEFFREY G MORTENSEN</u></p> <p>Organization: <u>High Mesa Consulting Group</u></p> <p>Phone: <u>5053454250</u> Fax (Optional): <u>5053454254</u></p> <p>E-mail: <u>JMORTENSEN@HIGHMESACG.COM</u></p>			



Describe the methods you used to complete the above table: Please refer to the Source(s) in the above table.

#### VI. Chemical Treatment Information

Will you use polymers, flocculants, or other treatment chemicals at your construction site?

☐ Yes ☒ No

If yes, will you use cationic treatment chemicals\* at your construction site?

☐ Yes ☐ No

If yes, have you been authorized to use cationic treatment chemicals by your applicable EPA Regional Office in advance of filing your NOI\*?

☐ Yes ☐ No

If you have been authorized to use cationic treatment chemicals by your applicable EPA Regional Office, attach a copy of your authorization letter and include documentation of the appropriate controls and implementation procedures designed to ensure that your use of cationic treatment chemicals will not lead to a violation of water quality standards.

Please indicate the treatment chemicals that you will use:

\* Note: You are ineligible for coverage under this permit unless you notify your applicable EPA Regional Office in advance and the EPA office authorizes coverage under this permit after you have included appropriate controls and implementation procedures designed to ensure that your use of cationic treatment chemicals will not lead to a violation of water quality standards.

#### VII. Stormwater Pollution Prevention Plan (SWPPP) Information

Has the SWPPP been prepared in advance of filing this NOI?

☒ Yes ☐ No

##### SWPPP Contact Information:

First Name, Middle Initial, Last Name: DAVID RITCHEY

Organization: ALBUQUERQUE PUBLIC SCHOOLS

Phone: 5058488810

Fax (Optional): 5052469020

E-mail: CROFT@APS.EDU

#### VIII. Endangered Species Protection

Using the instructions in Appendix D of the CGP, under which criterion listed in Appendix D are you eligible for coverage under this permit (only check 1 box)?

☐ A ☐ B ☐ C ☐ D ☒ E ☐ F

Provide a brief summary of the basis for criterion selection listed in Appendix D (e.g., communication with U.S. Fish and Wildlife Service or National Marine Fisheries Service, specific study): Communication with US Fish & Wildlife Service requesting information

If you select criterion B, provide the Tracking Number from the other operator's notification of authorization under this permit:

If you select criterion C, you must attach a copy of your site map (see Part 7.2.6 of the permit), and you must answer the following questions:

What federally-listed species or federally-designated critical habitat are located in your "action area":

What is the distance between your site and the listed species or critical habitat (miles):

If you select criterion D, E, or F, attach copies of any letters or other communications between you and the U.S. Fish and Wildlife Service or National Marine Fisheries Service.

#### IX. Historic Preservation

Are you installing any stormwater controls as described in Appendix E that require subsurface earth disturbance? (Appendix E, Step 1)

☒ Yes ☐ No

If yes, have prior surveys or evaluations conducted on the site have already determined historic properties do not exist, or that prior disturbances have precluded the existence of historic properties? (Appendix E, Step 2)

☒ Yes ☐ No

If no, have you determined that your installation of subsurface earth-disturbing stormwater controls will have no effect on historic properties? (Appendix E, Step 3)

☐ Yes ☒ No

If no, did the SHPO, THPO, or other tribal representative (whichever applies) respond to you within the 15 calendar days to indicate whether the subsurface earth disturbances caused by the installation of stormwater controls affect historic properties? (Appendix E, Step 4)

☐ Yes ☒ No

If yes, describe the nature of their response:





You are here: [Permits Landing Page](#) [2012 CGP](#) [2012 CGP Details](#)

# 2012 Construction General Permit eNOI Detail

[Quick Jump to Other Permits](#)

Details for NMR12A198

## General Information

Project / Site Name:	CHAPARRAL ES MULTI-PURPOSA FIELD, WL EXT & BUSBAY
Current Status:	Active
Tracking Number:	NMR12A198
Permit Type:	NOI

## Interview Page Answers

Is your project/site located in Indian Country Lands?	N/A
Are you requesting coverage under this NOI as a 'federal operator' as defined in Appendix A?	N/A

## Operator Information

Operator's Name:	ALBUQUERQUE PUBLIC SCHOOLS
Street:	915 OAK STREET SE
City:	ALBUQUERQUE
State:	New Mexico
Zip Code:	87106
Point of Contact Name:	DAVID RITCHEY
Phone Number:	5058488876
Operator Email:	RITCHEY_D@APS.EDU
Fax:	5052469020
IRS Employer Identification Number (EIN):	856000101

## Project / Facility Information

Project / Site Name:	CHAPARRAL ES MULTI-PURPOSA FIELD, WL EXT & BUSBAY
Street:	6325 MILNE ROAD NW
City:	ALBUQUERQUE
State:	New Mexico
Zip Code:	87120
Project / Facility on Indian Land?	N/A
Reservation Name:	N/A

## Additional Project Information

[Feedback](#)

Does your project/site discharge stormwater into a Municipal Separate Storm Sewer System (MS4)? **Yes**

Are there any surface waters within 50 feet of your project's earth disturbances? **Yes**

If a TMDL has been approved or established, identify the title or reference of the TMDL document: **Rio Grande (Isleta Pueblo bnd to Alameda Bridge), 20.6.4.105, TMDL for e. coli (2010).**

#### Impaired Surface Waters to Which you Discharge

Surface water(s) to which you discharge	Impaired Water	Listed Water Pollutant(s)	Tier 2, 2.5 or 3	Source	TMDL Name and Pollutant
RIO GRANDE	Yes	PATHOGENS;TOTAL TOXI		WWW.NMENV.STATE.NM.US/SWQB/tmdl/LIST	
RIO GRANDE	Yes	PATHOGENS;		EPA/MY WATERS MAPPER	
RIO GRANDE	Yes	PATHOGENS;		EPA/MY WATERS MAPPER	
RIO GRANDE	Yes	PATHOGENS;		EPA/MY WATERS MAPPER	

#### Historic Preservation

Is your project/site located on a property of religious or cultural significance to an Indian tribe? Are you installing any stormwater controls as described in Appendix E that require? (Appendix E, Step 1): **Yes**

If yes, have prior surveys or evaluations conducted on the site have already determined historic properties do not exist, or that prior disturbances have precluded the existence of historic properties? (Appendix E, Step 2): **Yes**

If no, have you determined that your installation of subsurface earth-disturbing stormwater controls will have no effect on historic properties? (Appendix E, Step 3): **N/A**

If no, did the SHPO, THPO, or other tribal representative (whichever applies) respond to you within the 15 calendar days to indicate whether the subsurface earth disturbances caused by the installation of stormwater controls affect historic properties? (Appendix E, Step 4) **N/A**

If yes, describe the nature of their response: **N/A**

#### Certifier Information

Name: **LIZANN CROFT**  
Title: **N/A**  
Email: **CROFT@APS.EDU**  
Certified Date: **04/11/2012**

#### Preparer Information

Name: **JEFFREY G MORTENSEN**  
Phone: **5053454250**  
Fax: **5053454254**  
Organization: **High Mesa Consulting Group**  
Email: **JMORTENSEN@HIGHMESACG.COM**

#### Corresponding Documents

File Name	File Size	File Section	Date Uploaded	Download
Fish & Wildlife Letter.pdf	2705123	ESA Section	11-APR-12	<a href="#">Download</a>
Fish & Wildlife Letter.pdf	2705123	ESA Section	11-APR-12	<a href="#">Download</a>
Fish & Wildlife Letter.pdf	2705123	ESA Section	11-APR-12	<a href="#">Download</a>

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