



## Storm Water Compliance Inspection Form

PO Box 400  
Los Lunas, NM 87042  
www.greenglobenm.com

**Inspection Type:** Routine

**Date:** 07-17-2020

**Time:** 12:55 PM

**Permit Tracking #:** NMR1002LX, NMR1002M0

**Inspector Name:** Mario Alderete

**Qualifications:** Inspector

**Current Weather Conditions:**  
Thunderstorms (Isolated)

**Date and Amount of Last Recordable Storm Event:** 03-13-2020 .50

### Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation		
Clearing and Grubbing	01-04-2020	
Utility Installation		
Construction of Structure	06-01-2020	
Final Stabilization		

### Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are areas that have been disturbed, but not under construction been properly stabilized?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Velocity Reduction Devices i.e. Check Dams, Berms, Etc.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Silt Fence	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Perimeter control
Wattles/Filter Sock	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inlet Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cut Back Curbs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Waste Management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Vehicle Tracking Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Material Storage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Dust Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water truck on site
Street Sweeping	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Construction Washouts i.e. Concrete, Paint, Stucco Etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Discharge Points	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Sanitary Stations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Stockpiles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Site looks good!

SWPPP Information:

Question	Yes	No	N/A	Comment
Is the SWPPP kept on site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Was the SWPPP updated at the time of the inspection?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are all certification pages signed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are inspector qualifications in the SWPPP?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a copy of the NOI and Acknowledgement letter?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a delegation letter in the SWPPP?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Was the last inspection/CAL certified?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

"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."

Owner: First Financial Credit Union

Name

Signature

Date

Operator: Sean Crain

Name

Signature

Date

Additional Comments:




Action Log:

Location	Action Type	Action Required	Date Noted	Date Completed	Initials
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Inspector: Mario Alderete



07-17-2020

NameSignatureDate