Jaynes Corp

Jaynes Corp: Presbyterian NMR1002FV, NMR1002GI **Hospital site** improvements



Storm Water Compliance Inspection Form

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

Inspection Type: Routine Permit Tracking #: NMR1002FV, NMR1002GI **Current Weather Conditions:**

Date: 06-22-2021 Inspector Name: Joshua Armijo

Time: 9:11 AM Qualifications: Inspector Date and Amount of Last Recordable Storm Event: 12-10-2020 .28

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	02-04-2020	02-04-2020
Clearing and Grubbing	02-04-2020	02-04-2020
Utility Installation	02-04-2020	
Construction of Structure	09-01-2020	
Final Stabilization		

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	\boxtimes			SWPPP Sign is posted on Mulberry and Silver
Are areas that have been disturbed, but not under construction been properly stabilized?				
Velocity Reduction Devices i.e. Check Dams, Berms, Etc.			\boxtimes	
Silt Fence		\boxtimes		
Wattles/Filter Sock	\boxtimes			
Inlet Protection		\square		
Cut Back Curbs			\boxtimes	
Waste Management	\boxtimes			
Vehicle Tracking Control		\square		Refresh trackout at NW corner of site.
Material Storage	\boxtimes			
Dust Control	\boxtimes			
Street Sweeping			\boxtimes	Sweeping is being done as needed
Construction Washouts i.e. Concrete, Paint, Stucco Etc.	\boxtimes			
Discharge Points	\boxtimes			
Sanitary Stations	\boxtimes			
Stockpiles	\boxtimes			Stockpiles are being actively used.
Other				



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SWPPP Information:

Question	Yes	No	N/A	Comment
Is the SWPPP kept on site?	X			book moved to construction trailer 5/4/21
Was the SWPPP updated at the time of the inspection?	\boxtimes			
Are all certification pages signed?	X			
Are inspector qualifications in the SWPPP?	X			
Is there a copy of the NOI and Acknowledgement letter?	\boxtimes			
Is there a delegation letter in the SWPPP?	\boxtimes			
Was the last inspection/CAL certified?	\boxtimes			

"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: Presbyterian Healthcare Services

Date Name Signature Operator: Lorenzo Garcia Name Date

Signature

Additional Comments:

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Action Log:

Location	Action Type	Action Required	Date Noted	Date Completed	Initials
Silt fence	Maintenance	Silt fence needs to be repaired	03-02-2021		
Silt fence on storage yard south end	Corrective Action	Need silt fence installed	06-15-2021		
South East perimeter	Corrective Action	Silt fence needs to be installed	06-15-2021		
West perimeter	Corrective Action	Need to clean and adjust inlet protection	06-01-2021		
South west entrance	Corrective Action	Inlet protection needs to be replaced and cleaned	06-15-2021		

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Inspector: Joshua Armijo

Name

Signature

06-22-2021

Date



Storm event 12-10-20 .28



2/16/21



2/16/21



2/23/21



2/23/21



3/16/21



3/23/21



3/30/21



4/12/21



5/4/21



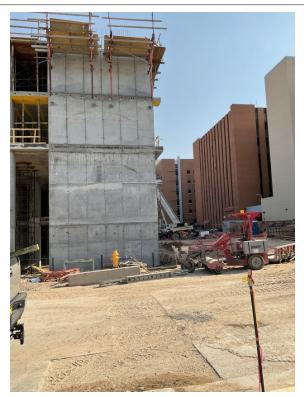
6/1/21



6/8/21



6-15-21



6-22-21