



# City of Albuquerque Stormwater Construction Site Inspection Report

## General Information

|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|-----------------------------------------------|----------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------------|----------------------------------------|------------------------------------|
| ESC File No.                                  | K15E034D                                                                         | Project Name:                        | Springhill Suites                                                          |                                        |                                    |
| NPDES Id. No.                                 | NMR1001RP                                                                        | Location:                            | 1101 Central                                                               |                                        |                                    |
| 11/12/2020                                    | Property Owner                                                                   |                                      | Contractor                                                                 |                                        |                                    |
| Operator                                      | Cedar Investments, LLC CO Argus Dev.                                             |                                      | Jaynes Corp                                                                |                                        |                                    |
| Contact name & title                          | Josh Rogers                                                                      |                                      | Jeff Harper                                                                |                                        |                                    |
| e-mail                                        | <a href="mailto:jrogers@titan-development.com">jrogers@titan-development.com</a> |                                      | <a href="mailto:jeff.harper@jaynescorp.com">jeff.harper@jaynescorp.com</a> |                                        |                                    |
| Contact Phone #                               | 505-998-0163                                                                     |                                      | 250-9351                                                                   |                                        |                                    |
| COA Inspector                                 | Doug Hughes                                                                      |                                      | Start/End Time:                                                            | 2:14PM                                 |                                    |
| Construction Phase:                           | STABILIZED                                                                       |                                      |                                                                            |                                        |                                    |
| Type of Inspection:                           | <input checked="" type="checkbox"/> Regular                                      | <input type="checkbox"/> Storm Event | <input type="checkbox"/> Post Storm Event >0.25"                           | <input type="checkbox"/> 311/Complaint | <input type="checkbox"/> Follow Up |
| Weather at time of inspection?                | Clear                                                                            |                                      | Temperature: ~                                                             | 76                                     |                                    |
| Estimated date of last storm 0.25" or greater | 10/26/2020                                                                       |                                      |                                                                            |                                        |                                    |
| Item Number                                   | Deficiency/ Corrective Action                                                    |                                      |                                                                            |                                        |                                    |
| 1                                             |                                                                                  |                                      |                                                                            |                                        |                                    |
| 2                                             |                                                                                  |                                      |                                                                            |                                        |                                    |
| 3                                             |                                                                                  |                                      |                                                                            |                                        |                                    |
| 4                                             |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               | <div>STABILIZED</div>                                                            |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
|                                               |                                                                                  |                                      |                                                                            |                                        |                                    |
| 2.1                                           | Discharge off site? (Y/N)                                                        | Yes                                  |                                                                            |                                        |                                    |
| 4                                             | Self Inspection Reports                                                          | Requested                            | Latest report Date:                                                        | 4/17/2020                              |                                    |

|        |  |
|--------|--|
| Notes: |  |
|        |  |
|        |  |
|        |  |
|        |  |
|        |  |

City of Albuquerque Stormwater Inspector Signature and date:  
Contact information: Doug Hughes (505) 924-3420  
[jhughes@cabq.gov](mailto:jhughes@cabq.gov)