

## Stormwater Pollution Prevention Plan (SWPPP) Construction Site Inspection Report

General Information					
<b>Name of Project</b>	[Insert project name]	<b>NPDES ID No.</b>	[Insert NPDES ID number]	<b>Inspection Date</b>	[Insert date of inspection]
<b>Weather conditions during inspection</b>	[Enter the weather conditions occurring during the inspection]	<b>Inspection start time</b>	[Enter the time you started the inspection.]	<b>Inspection end time</b>	[Enter the time you ended the inspection.]
<b>Weather conditions since last inspection; identify any storms and amount of rainfall</b>	[Enter the weather conditions occurring during the inspection]				
<b>Inspector Name, Title &amp; Contact Information</b>	[Enter the inspector's name, title, and contact information (company name, address, email, and phone).]				
<b>Present Phase of Construction</b>	[Specify the current phase of the project.]				
<b>Inspection Location</b>	[If multiple inspections are required for this project, specify location where this inspection is being conducted. If necessary, complete additional forms for each location.]				
<p><b>Inspection Frequency</b> <i>(Note: you may be subject to different inspection frequencies in different areas of the site. Check all that apply)</i></p> <p><b>Standard Frequency:</b></p> <p><input type="checkbox"/> Every 7 days</p> <p><input type="checkbox"/> Every 14 days and within 24 hours of a 0.25" rain or the occurrence of runoff from snowmelt sufficient to cause a discharge</p> <p><b>Increased Frequency:</b></p> <p><input type="checkbox"/> Every 7 days and within 24 hours of a 0.25" rain (for areas of sites discharging to sediment or nutrient-impaired waters or to waters designated as Tier 2, Tier 2.5, or Tier 3)</p> <p><b>Reduced Frequency:</b></p> <p><input type="checkbox"/> Twice during first month, no more than 14 calendar days apart; then once per month after first month; (for stabilized areas)</p> <p><input type="checkbox"/> Twice during first month, no more than 14 calendar days apart; then once more within 24 hours of a 0.25" rain (for stabilized areas on "linear construction sites")</p> <p><input type="checkbox"/> Once per month and within 24 hours of a 0.25" rain (for arid, semi-arid, or drought-stricken areas during seasonally dry periods or during drought)</p> <p><input type="checkbox"/> Once per month (for frozen conditions where earth-disturbing activities are being conducted)</p>					
<p><b>Was this inspection triggered by a 0.25" storm event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>If yes, how did you determined whether a 0.25" storm event has occurred?</b></p> <p><input type="checkbox"/> Rain gauge on site      <input type="checkbox"/> Weather station representative of site. Specify weather station source: [Enter the source for your weather station data.]</p> <p><b>Total rainfall amount that triggered the inspection:</b> [Specify rainfall amount (in inches)]</p> <p><b>Was this inspection triggered by the occurrence of runoff from snowmelt sufficient to cause a discharge?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p>					

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### Unsafe Conditions for Inspection

Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5?  Yes  No

If "yes", complete the following:

- Describe the conditions that prevented you from conducting the inspection in this location: [\[Provide short description of the conditions preventing the inspection.\]](#)
- Location where conditions were found: [\[Specify location\(s\) on the site where unsafe conditions were found.\]](#)

### Condition and Effectiveness of Erosion and Sediment (E&S) Controls (CGP Part 2.2)

Type/Location of E&S Control [insert additional rows if applicable]	Maintenance Needed?*	Corrective Action Required?*	Date on Which Maintenance or Corrective Action First Identified?	Notes
1. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>
2. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>
3. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>
4. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>
5. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>
6. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>
7. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>
8. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>
9. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>
10. <a href="#">[E&amp;S control]</a> <a href="#">[Location]</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<a href="#">[Enter date]</a>	<a href="#">[Enter notes here]</a>

\* **Note:** The permit differentiates between conditions requiring routine maintenance, and those requiring corrective action. The permit requires maintenance in order to keep controls in effective operating condition. Corrective actions are triggered only for specific conditions, which include: 1) A stormwater control needs repair or

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replacement (beyond routine maintenance) if it is not operating as intended; 2) A stormwater control necessary to comply with the permit was never installed or was installed incorrectly; 3) You become aware that the stormwater controls you have installed and are maintaining are not effective enough for the discharge to meet applicable water quality standards or applicable requirements in Part 3.1; 4) One of the prohibited discharges in Part 1.3 is occurring or has occurred; or 5) EPA requires corrective actions as a result of a permit violation found during an inspection carried out under Part 4.8. If a condition on your site requires a corrective action, you must also fill out a corrective action form found at <https://www.epa.gov/npdes/stormwater-discharges-construction-activities#resources>. See Part 5 of the permit for more information.

Condition and Effectiveness of Pollution Prevention (P2) Practices (CGP Part 2.3)				
Type/Location of P2 Practices [insert additional rows if applicable]	Maintenance Needed?*	Corrective Action Required?*	Date on Which Maintenance or Corrective Action First Identified?	Notes
1. [P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]
2. [P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]
3. [P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]
4. [P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]
5. [P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]
6. [P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]
7. [P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]
8. [P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]
9. [P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]
10.[P2 practice] [Location]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[Enter date]	[Enter notes here]

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Stabilization of Exposed Soil (CGP Part 2.2.14)			
Stabilization Area [insert additional rows if applicable]	Stabilization Method	Have You Initiated Stabilization?	Notes
1. [Specific location that has been stabilized or to be stabilized]	[Specify type of stabilization]	<input type="checkbox"/> Yes [Enter date] <input type="checkbox"/> No	[Enter notes here]
2. [Specific location that has been stabilized or to be stabilized]	[Specify type of stabilization]	<input type="checkbox"/> Yes [Enter date] <input type="checkbox"/> No	[Enter notes here]
3. [Specific location that has been stabilized or to be stabilized]	[Specify type of stabilization]	<input type="checkbox"/> Yes [Enter date] <input type="checkbox"/> No	[Enter notes here]
4. [Specific location that has been stabilized or to be stabilized]	[Specify type of stabilization]	<input type="checkbox"/> Yes [Enter date] <input type="checkbox"/> No	[Enter notes here]
5. [Specific location that has been stabilized or to be stabilized]	[Specify type of stabilization]	<input type="checkbox"/> Yes [Enter date] <input type="checkbox"/> No	[Enter notes here]

Description of Discharges (CGP Part 4.6.6)	
Was a stormwater discharge or other discharge occurring from any part of your site at the time of the inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If "yes", provide the following information for each point of discharge:	
Discharge Location [insert additional discharge locations if applicable]	Observations
1. [Specify locations on the site where a discharge is occurring.]	Describe the discharge: [Enter text here.]  At points of discharge and the channels and banks of surface waters in the immediate vicinity, are there any visible signs of erosion and/or sediment accumulation that can be attributed to your discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No

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	<p>If yes, describe what you see, specify the location(s) where these conditions were found, and indicate whether modification, maintenance, or corrective action is needed to resolve the issue: <a href="#">[Enter text here.]</a></p>
<p>1. <a href="#">[Specify locations on the site where a discharge is occurring.]</a></p>	<p>Describe the discharge: <a href="#">[Enter text here.]</a></p> <p>At points of discharge and the channels and banks of surface waters in the immediate vicinity, are there any visible signs of erosion and/or sediment accumulation that can be attributed to your discharge?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>If yes, describe what you see, specify the location(s) where these conditions were found, and indicate whether modification, maintenance, or corrective action is needed to resolve the issue: <a href="#">[Enter text here.]</a></p>

### Operator Signature and Certification

"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 have no personal knowledge that the information submitted is other than 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."

**Signature of Operator or "Duly Authorized Representative":** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name and Affiliation:** \_\_\_\_\_