

## SWPPP COMPLIANCE INSPECTION FORM



Project Name:	ame: Washinton Heights Baptist Church		Address:		1770 East 6200 South		Date: 9-3-12			
Owner:	Private	Contractor (Ge	Contractor (Gen/Sub):		Sam Barber		Start time: 10:00 AM			
Site Contact:	Sam Barb	er	Phone:	801	-544-6971	Stop time				
UPDES Permit #:	CAN DO S CONTROL OF THE SAME O									
Date of last rain ever	nt: 9/1/2012				Rainfall (in):		0.41"			
Inspected By (Print):		helle Pfeaster	Local Juri	sdiction or County:	tannan (m).	Wahas	(2)			_
			7			Weber				-
Reason for Inspectio	n: Scheduled SW sampling	Complaint/Tip (Rar (S) State		eceiving Waters:		Weber	River			_
Code (circle): SW non-sampling Inspector Code (circle): Type Code (circle): 1 - Municipal 2 - Industrial 3 - State										
~		N, SEDIMENT AND H	OUSEKER	PING BMP's IN	FORMAT	ION		YES	NO	N/A
1. Is the SWPPP on		SWPPP location posted in a						1.20	X	NIA
						onore unicy:		_	x	-
Are erosion control, sediment control, and good housekeeping BMP's installed on the site as shown in the SWPPP?     Byper in the SWPPP been updated to reflect the current site conditions (modifications dated & initialed on site map, new BMPs on site map, discontinued).										-
BMPs crossed off site map, new BMP details & spec's in SWPPP, SWPPP amendment Log, etc.)?									X	
4. Are on-site inspections being performed and recorded by a qualified person on a weekly or biweekly basis, reporting items required by permit? (Inspector name &qualifications, weather, problems/repairs, corrective action, new BMPs, removed BMPs, discharges, etc.)									X	
5. Have all corrective action items from previous inspections been addressed and documented within the time frame allotted by the inspector?									x	
6. Are SW flows entering and leaving the construction site controlled, managed, or diverted around the site? (e.g. perimeter controls, berms, silt fence,										х
upgradient boundary diversion, down gradient boundary sediment control, etc.)  7. Is there evidence of sediment discharge such as mud flows or soil deposits from the construction site in downstream locations?										_
8. Is there evidence of sediment discharge such as mud flows or soil deposits from the construction site in downstream locations?								-	X	-
Is there soil, construction material, landscaping items, or other debris piled on impervious surfaces (roads, drives) that could be washed with SW to a									х	-
storm drain or water body?  10. Is there a need to repair, maintain, or improve erosion control BMPs (temporary stabilization, erosion blankets, mulch, vegetated strips, rip rap, surface								X		
		e erosion control BMPs (temper	orary stabilizat	tion, erosion blankets	, mulch, veget	ated strips, rip rap	o, surface		x	
roughening, pipe slope drain, dust control, etc)?  11. Is there a need to repair, maintain, or improve sediment control BMPs (silt fence, check dams, fiber rolls, sediment trap/basin, inlet protection, waddles,										
straw bails, curb cut-								X		
12. Is there a need to	repair, maintain, or improve	good housekeeping controls ling areas, concrete wash ou	(clean track o	out pad, sweeping, co	nstruction ma	terials manageme	ent,		х	
		onstruction activities for 14 to				ozen ground)?		$\rightarrow$	х	
		d should be installed or not no						x	^	-
		NTS AND CORRECT			PP COMPI	IANCE				
		cribe (in general terms) what need to install. Include the to verify inspections or	e the date when	corrections are made.					pecific	BMPs
some items that requ	ire attention: the piles of dirt	and debris on the asphalt cou	uld be washed	I into the storm drain	system with er	nough rain, the ou	tlet structure			
in the pond has lost it	t's grate and needs to be clea	aned, fiber rolls on a couple of	atch basins ne	eed to be cleaned, sta	abilization on t	he site is coming	along nicely			
e Verening and the second and the second		emoving some unnecessary I	Transcores				,			
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						7 F 2.				-
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										_
Inspector, please li	st all applicable SEV code	es:								_
		ttachments were prepared under	my direction or s	supervision in accordance	e with a system	designed to assure	that qualified	personn	el prope	erly
	to the best of my knowledge and	d on my inquiry of the person or p d belief true, accurate, and compl								V .
Inspector:	Rochelle Pfeaster		Project Manage	ar/BSI	00/0//	XIN	(/	-,5-	-17	
Inspector:	(Print Name)		Project Manage (Title)	i//\oi	JU EU V	(Signature)			Date)	
								0	- 0	
Operator:	Sam Barber		Contact Pers	son	emailed to:	sam@barberbroth	ners.com	4-1	3-1	2
	(Print Name)		(Title)			(Signature)		1 "(	Date)	