SWPPP COMPLIANCE INSPECTION FORM

Uintah

Project Name: Peek Home	Address: 2848 E Bybee Dr.	Date: 4/10/14
Owner: Scott Sessions	Contractor (Gen/Sub): Scotts Home Construction	Start time:
Site Contact: Scott Sessions	Phone: (801) 725-0002	Stop time:
UPDES Permit #: UTR363595 Expiration: 5/15/14	Weather: Sunny Cloudy Raining Snowing Other:	
Date of last rain event:	Duration:	Approx. Rainfall (in):
Inspected By (Print):	Local Jurisdiction or County: Weber County	
Reason for Inspection: Scheduled Complaint/Tip Random	Receiving Waters: Great Salt Lake	
Inspection Code (circle): SW sampling / SW non-sampling	Inspector Code (circle): (S) State (L) Local	Type Code (circle): 1 - Municipal 2 - Industrial 3 - State

SWPPP, EROSION, SEDIMENT AND HOUSEKEEPING BMP's INFORMATION	YES	NO	N/A
1. Is the SWPPP on site and accessible, or is the SWPPP location posted in an obvious place and reasonably accessible (in a short time)?		X	
2. Are erosion control, sediment control, and good housekeeping BMP's installed on the site as shown in the SWPPP?			X
3. Has 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, upgradient boundary diversion, down gradient boundary sediment control, etc.)		X	
7. Is there evidence of sediment discharge such as mud flows or soil deposits from the construction site in downstream locations?		X	
8. Is there evidence of vehicles tracking soil off the construction site?		X	
9. Is there soil, construction material, landscaping items, or other debris piled on impervious surfaces (roads, drives) that could be washed with SW to a storm drain or water body?		X	
10. Is there a need to repair, maintain, or improve erosion control BMPs (temporary stabilization, erosion blankets, mulch, vegetated strips, rip rap, surface roughening, pipe slope drain, dust control, etc)?		X	
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-back, etc?		X	
12. Is there a need to repair, maintain, or improve good housekeeping controls (clean track out pad, sweeping, construction materials management, litter/trash control, port-o-potties staked down, fueling areas, concrete wash out area, proper curb ramps, spill prevention, etc)?		X	
13. Are there disturbed areas that have not had construction activities for 14 to 21 days without stabilization? (except snow or frozen ground)?		X	
14. Are there places where BMPs are needed and should be installed or not needed and should be removed?		X	

COMMENTS AND CORRECTIVE ACTIONS FOR SWPPP COMPLIANCE

Identify the problem and its location. If appropriate, describe (in general terms) what needs to be completed. However, only if qualified (e.g., you are a designer) should you be mandating specific BMPs to install. Include the date when corrections are made.

Inspector, please list all applicable SEV codes:

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.

Inspector:	(Print Name)	(Title)	(Signature)	(Date)
	ZACH HARVEY	RST		4/10/14

Operator:	(Print Name)	(Title)	(Signature)	(Date)
	Scott Sessions	Emailed to: mel1945@gmail.com		

modified 8/12/10