

DRY WEATHER SCREENING AND VISUAL STORM WATER DISCHARGE EXAMINATION REPORT

Date of Examination: 8/21/13 Permit No. UTR 090022
 Outfall location or ID number: #40
 Nature of Discharge (i.e., runoff, land drain, irrigation or snowmelt) runoff

Type of Monitoring:

<input checked="" type="checkbox"/> Dry Weather Screening Date of last Rainfall Event: <u>2+ weeks</u>	Wet Weather Screening (Quarterly Min.) <input type="checkbox"/> Rainfall Event Date of Rainfall Event: _____ Time of Event: _____ Precipitation: _____ <input type="checkbox"/> Unable to collect sample due to adverse conditions or inadequate runoff.
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Visual Quality of Storm Water Discharge: (circle response)

At Time of Sampling: Color: clear brown green rust other: no water
 Odor: Yes / No
 Clarity:
 Floating Solids: Yes / No
 Foam: Yes / No

After One Hour of Settling:
 Settled Solids: Yes / No
 Suspended Solids: Yes / No
 Oil Sheen: Yes / No

Other obvious indicators of storm water pollution: _____

Probable sources of any observed storm water contamination: _____

Name of Examiner Zach Harvey Title RSI
 Signature [Signature] Date 8/21/13
 Revised: 10-15-2010