

**DRY WEATHER SCREENING AND  
VISUAL STORM WATER DISCHARGE EXAMINATION REPORT**

Date of Examination: 7/28/15 Permit No. UTR \_\_\_\_\_

Outfall location or ID number: #24

Nature of Discharge (i.e., runoff, land drain, irrigation or snowmelt) runoff

Type of Monitoring:

|   |   |
|---|---|
| <input checked="" type="checkbox"/> Dry Weather Screening<br>Date of last Rainfall Event: _____ | Wet Weather Screening (Quarterly Min.)<br><input type="checkbox"/> Rainfall Event<br>Date of Rainfall Event: _____<br>Time of Event: _____<br>Precipitation: _____<br><input type="checkbox"/> Unable to collect sample due to adverse conditions or inadequate runoff. |
|---|---|

Visual Quality of Storm Water Discharge: (circle response)

**At Time of Sampling:**

Color: clear brown green rust other: dry

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: None

Probable sources of any observed storm water contamination: \_\_\_\_\_

Name of Examiner ZACH HARVEY Title RSI

Signature [Signature] Date 7/28/15

Revised: 10-15-2010