

## Stormwater Pollution Prevention Plan

### for:

REFLECTIONS SUBDIVISION  
1900 NORTH 5700 EAST  
EDEN, WEBER COUNTY, UTAH

### Operator(s):

Company or Organization:

Name:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

### SWPPP Contact(s):

Company or Organization:

Name:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

### SWPPP Preparation Date:

06/16/2016

*Estimated Project Dates:*

**Project Start Date:** \_\_\_/\_\_\_/\_\_\_\_\_

**Project Completion Date:** \_\_\_/\_\_\_/\_\_\_\_\_

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## SECTION 1: CONTACT INFORMATION/ RESPONSIBLE PARTIES

### 1.1 *Owner(s), Operator, Contractors*

**Owner(s):**

Company or Organization:

Name:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

**Operator(s) & Project Manager(s):**

Company or Organization:

Name:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

Company or Organization:

Name:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

**Site Supervisor(s):**

Company or Organization:

Name:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

Company or Organization:

Name:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

Company or Organization:

**SWPPP Contact(s):**

Company or Organization:

Name:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

**This SWPPP was Prepared by:**

GARDNER ENGINEERING

BRANDON COX

5150 SOUTH 375 EAST

OGDEN, UTAH 84405

PHONE: (801) 476-0202

FAX: (801) 476-0066

**Subcontractor(s):**

Company or Organization:

Name:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

**Emergency 24-Hour Contact:**

Company or Organization:

Name:

Telephone Number:

## **1.2 Storm Water Team**

Role or Responsibility:

Position:

Name:

Telephone Number:

Email:

Role or Responsibility:

Position:

Name:

Telephone Number:

Email:

Role or Responsibility:

Position:

Name:

Telephone Number:

Email:

## SECTION 2: SITE EVALUATION, ASSESSMENT, & PLANNING

### 2.1 Project/Site Information

Project/Site Name: REFLECTION SUBDIVISION

Project Street/Location: 1900 NORTH 5700 EAST

City: EDEN State: UT ZIP Code: \_\_\_\_\_

County or Similar Subdivision: WEBER COUNTY

Latitude/Longitude (Use **one** of three possible formats, and specify method)

Latitude:

Longitude:

1. 41°17 '31.45" N

1. 111°48'39.51" W

Method for determining latitude/longitude:

USGS topographic map (specify scale: \_\_\_\_\_)  EPA Web site  GPS

Other (please specify): GOOGLE EARTH

Is the project located in Indian country?  Yes  No

If yes, name of Reservation, or if not part of a Reservation, indicate "not applicable." \_\_\_\_\_

Is this project considered a federal facility?  Yes  No

UPDES project or permit tracking number\*: \_\_\_\_\_

*\*(This is the unique identifying number assigned to your project by your permitting authority after you have applied for coverage under the appropriate National Pollutant Discharge Elimination System (UPDES) construction general permit.)*

## 2.2 Nature of Construction Activity

Describe the general scope of the work for the project, major phases of construction, etc:  
Construction of a residential home.

What is the function of the construction activity?

Residential     Commercial     Industrial     Road Construction     Linear Utility  
 Other (please specify):

Estimated Project Start Date:                    \_\_\_ / \_\_\_ / \_\_\_\_\_

Estimated Project Completion Date:                    \_\_\_ / \_\_\_ / \_\_\_\_\_

## 2.3 Construction Site Estimates

The following are estimates of the construction site.

Total project area:	25.6 acres
Construction site area to be disturbed:	1.46 acres
Percentage impervious area before construction:	0%
Runoff coefficient before construction:	0.18
Percentage impervious area after construction:	5.7%
Runoff coefficient after construction	0.20

## 2.4 Soils, Slopes, Vegetation, and Current Drainage Patterns

Soil type(s): 90% Brownlee and similar soils, 10% minor components

Slopes (describe current slopes and note any changes due to grading or fill activities): 0% to 3%

Drainage Patterns (describe current drainage patterns and note any changes due to grading or fill activities): Well Drained soils. (3) irrigation ditches exist on the property; the largest that runs the length of the property will be piped and rerouted (noted on Drawing), the one that runs along the frontage will be undisturbed, and the smallest ditch that runs north and south where future road will be located will be filled.

Vegetation: Agriculture vegetation (hay variety)

Other:



## **2.5 Emergency Related Projects**

Emergency-Related Project?  Yes  No

Response to a public emergency (see Part 1.2.1); natural disaster, extreme flooding conditions, etc.

PROVIDE INFORMATION SUBSTANTIATING ITS OCCURRENCE

INSERT DESCRIPTION OF CONSTRUCTION THAT WAS NECESSARY TO REESTABLISH EFFECTED PUBLIC SERVICES

## **2.6 Phase/Sequence of Construction Activity**

Phase I

- Grading and excavation

Phase II

- Utility installation
- Cul-de-sac Construction

## **2.7 Site Features and Sensitive Areas to be Protected**

Irrigation inlets at North and South side of property will be protected.

## **2.8 Maps**

See Appendix A



### 3.2 Non-Stormwater Discharges

List allowable non-stormwater discharges and the measures used to eliminate or reduce them and to prevent them from becoming contaminated:

Authorized Non-Storm Water Discharges	Comments
Line Flushing	
Dust Control	

***BMP Description:***

<b><i>Installation Schedule:</i></b>	
<b><i>Maintenance and Inspection:</i></b>	
<b><i>Responsible Staff:</i></b>	

***BMP Description:***

<b><i>Installation Schedule:</i></b>	
<b><i>Maintenance and Inspection:</i></b>	
<b><i>Responsible Staff:</i></b>	

### 3.3 *Natural Buffers or Equivalent Sediment Controls*

#### **Buffer Compliance Alternatives**

Are there any surface waters within 50 feet of your project's earth disturbances?  YES  NO

Check the compliance alternative that you have chosen:

- I will provide and maintain a 50-foot undisturbed natural buffer.
- I will provide and maintain an undisturbed natural buffer that is less than 50 feet and is supplemented by additional erosion and sediment controls, which in combination achieves the sediment load reduction equivalent to a 50-foot undisturbed natural buffer.
- It is infeasible to provide and maintain an undisturbed natural buffer of any size, therefore I will implement erosion and sediment controls that achieve the sediment load reduction equivalent to a 50-foot undisturbed natural buffer.
- I qualify for one of the exceptions in Part 2.1.2.a.v. (If you have checked this box, provide information on the applicable buffer exception that applies, below.)

#### **Buffer Exceptions**

Which of the following exceptions to the buffer requirements applies to your site?

- There is no discharge of stormwater to the surface water that is located 50 feet from my construction disturbances.
- No natural buffer exists due to preexisting development disturbances that occurred prior to the initiation of planning for this project.
- For a "linear project" (defined in Appendix A), site constraints (e.g., limited right-of-way) make it infeasible for me to meet any of the CGP Part 2.1.2.a.v.3 compliance alternatives. Include documentation here of the following:
- The project qualifies as "small residential lot" construction (defined in Part 2.1.2.a.v.3 and in Appendix D).
  - For Alternative 1 (see Appendix D, Part 2.3.a):
  - For Alternative 2 (see Appendix D, Part 2.3.b):
- Buffer disturbances are authorized under a CWA Section 404 permit.
- Buffer disturbances will occur for the construction of a water-dependent structure or water access area (e.g., pier, boat ramp, and trail).

## SECTION 4: EROSION AND SEDIMENT CONTROLS

### 4.1 Minimize Disturbed Area and Protect Natural Features and Soil

<i>BMP Description: Minimize Footprint</i>	
<input checked="" type="checkbox"/> <i>Permanent</i>	<input type="checkbox"/> <i>Temporary</i>
<i>Installation Schedule:</i>	During Construction
<i>Maintenance and Inspection:</i>	Continuous
<i>Responsible Staff:</i>	

### 4.2 Establish Perimeter Controls and Sediment Barriers

<i>BMP Description: Silt Fence</i>	
<i>Installation Schedule:</i>	Before Construction
<i>Maintenance and Inspection:</i>	Bi-Weekly or after a storm
<i>Responsible Staff:</i>	

### 4.3 Retain Sediment On-Site

<i>BMP Description: Dust Control</i>	
<i>Installation Schedule:</i>	Throughout Construction
<i>Maintenance and Inspection:</i>	As Necessary (water truck)
<i>Responsible Staff:</i>	

<i>BMP Description: Silt Fence</i>	
<i>Installation Schedule:</i>	Prior to construction
<i>Maintenance and Inspection:</i>	Bi-Weekly and after storm event
<i>Responsible Staff:</i>	

#### 4.4 Establish Stabilized Construction Exits

<i>BMP Description: Tracking Pad</i>	
<i>Installation Schedule:</i>	Prior to Construction
<i>Maintenance and Inspection:</i>	Bi-Weekly and following any storm event
<i>Responsible Staff:</i>	

#### 4.5 Protect Slopes

<i>BMP Description: Erosion Control Blankets</i>	
<i>Installation Schedule:</i>	Post Grading
<i>Maintenance and Inspection:</i>	As Needed
<i>Responsible Staff:</i>	

#### 4.6 Stockpiled Sediment or Soil

<i>BMP Description: Silt Fence</i>	
<i>Installation Schedule:</i>	Before Construction
<i>Maintenance and Inspection:</i>	Bi-Weekly and after a storm
<i>Responsible Staff:</i>	

#### 4.7 Minimize Dust

<i>BMP Description: Dust Control</i>	
<i>Installation Schedule:</i>	Throughout Construction
<i>Maintenance and Inspection:</i>	As necessary (water truck)
<i>Responsible Staff:</i>	

## 4.8 Topsoil

### *BMP Description: Stockpile Topsoil*

<i>Installation Schedule:</i>	Initial Grading
<i>Maintenance and Inspection:</i>	Topsoil will be removed and stockpiled where possible
<i>Responsible Staff:</i>	

## 4.9 Soil Compaction

### *BMP Description: Stabilization*

<i>Installation Schedule:</i>	Throughout Construction
<i>Maintenance and Inspection:</i>	Disturbed area will be stabilized as needed during construction. Final stabilization will include finished landscaping.
<i>Responsible Staff:</i>	

## 4.10 High Altitude/Heavy Snows

Date Snow is Expected	Date of High Altitude/Heavy Snow Conditions BMPs to be Installed	Date of First Heavy Snow
November	Scheduled:	
	Actual:	

### *BMP Description:*

<i>Installation Schedule:</i>	
<i>Maintenance and Inspection:</i>	
<i>Responsible Staff:</i>	

### *BMP Description:*

<i>Installation Schedule:</i>	
<i>Maintenance and Inspection:</i>	
<i>Responsible Staff:</i>	

#### **4.11 Linear Activities**

Description of why perimeter controls are not practicable.

**This is not a linear project.**

#### **4.12 Chemical Treatment**

##### **Soil Types**

List all the soil types (including soil types expected to be found in fill material) that are expected to be exposed during construction and that will be discharged to locations where chemicals will be applied:

##### **Treatment Chemicals**

List all treatment chemicals that will be used at the site and explain why these chemicals are suited to the soil characteristics:

Describe the dosage of all treatment chemicals you will use at the site or the methodology you will use to determine dosage:

Provide information from any applicable Material Safety Data Sheets (MSDS):

Describe how each of the chemicals will be stored:

Include references to applicable state or local requirements affecting the use of treatment chemicals, and copies of applicable manufacturer's specifications regarding the use of your specific treatment chemicals and/or chemical treatment systems:

##### **Special Controls for Cationic Treatment Chemicals (if applicable)**

If you have been authorized by your applicable Regional Office to use cationic treatment chemicals, include the official EPA authorization letter or other communication, and identify the specific controls and implementation procedures you are required to implement to ensure that your use of cationic treatment chemicals will not lead to a violation of water quality standards:

##### **Schematic Drawings of Stormwater Controls/Chemical Treatment Systems**

Provide schematic drawings of any chemically-enhanced stormwater controls or chemical treatment systems to be used for application of treatment chemicals:

##### **Training**

Describe the training that personnel who handle and apply chemicals have received prior to permit coverage, or will receive prior to the use of treatment chemicals:



### 4.13 Stabilize Soils

***BMP Description: Natural Re-Vegetation***

<input checked="" type="checkbox"/> <b><i>Permanent</i></b> <input type="checkbox"/> <b><i>Temporary</i></b>	
<b><i>Installation Schedule:</i></b>	After Construction
<b><i>Maintenance and Inspection:</i></b>	N/A
<b><i>Responsible Staff:</i></b>	

***BMP Description: Post Construction Landscaping***

<input checked="" type="checkbox"/> <b><i>Permanent</i></b> <input type="checkbox"/> <b><i>Temporary</i></b>	
<b><i>Installation Schedule:</i></b>	After construction activities on individual lots
<b><i>Maintenance and Inspection:</i></b>	N/A
<b><i>Responsible Staff:</i></b>	

### 4.14 Final Stabilization

***BMP Description: Natural Re-Vegetation***

<b><i>Installation Schedule:</i></b>	After Construction
<b><i>Maintenance and Inspection:</i></b>	N/A
<b><i>Responsible Staff:</i></b>	

***BMP Description: Post Construction Landscaping***

<b><i>Installation Schedule:</i></b>	After Construction activities on individual lots
<b><i>Maintenance and Inspection:</i></b>	N/A
<b><i>Responsible Staff:</i></b>	

## SECTION 5: POLLUTION PREVENTION

### 5.1 Spill Prevention and Response

<i>BMP Description: Spill Kits</i>	
<i>Installation Schedule:</i>	Have them Available if a spill should occur
<i>Maintenance and Inspection:</i>	Bi-Weekly
<i>Responsible Staff:</i>	

Any discharges in 24 hours equal to or in excess of the reportable quantities listed in 40 CFR 117, 40 CFR 110, and 40 CFR 302 will be reported to the National Response Center and the Division of Water Quality (DWQ) as soon as practical after knowledge of the spill is known to the permittees. The permittee shall submit within 14 calendar days of knowledge of the release a written description of: the release (including the type and estimate of the amount of material released), the date that such release occurred, the circumstances leading to the release, and measures taken and/or planned to be taken to the Division of Water Quality (DWQ), 288 North 1460 West, P.O. Box 144870, Salt Lake City, Utah 84114-4870. The Storm Water Pollution Prevention Plan must be modified within 14 calendar days of knowledge of the release to provide a description of the release, the circumstances leading to the release, and the date of the release. In addition, the plan must be reviewed to identify measures to prevent the reoccurrence of such releases and to respond to such releases, and the plan must be modified where appropriate.

<b>Agency</b>	<b>Phone Number</b>
National Response Center	(800) 424-8802
Division of Water Quality ( DWQ) 24-Hr Reporting	(801)-231-1769 (801) 536-4123
Utah Department of Health Emergency Response	(801) 580-6681

<b>Material</b>	<b>Media Released To</b>	<b>Reportable Quantity</b>
Engine oil, fuel, hydraulic & brake fluid	Land	25 gallons
Paints, solvents, thinners	Land	100 lbs (13 gallons)
Engine oil, fuel, hydraulic & brake fluid	Water	Visible Sheen
Antifreeze, battery acid, gasoline, engine degreasers	Air, Land, Water	100 lbs (13 gallons)
Refrigerant	Air	1 lb

## 5.2 Construction and Domestic Waste

### *BMP Description: Site Dumpster*

<i>Installation Schedule:</i>	Available during construction
<i>Maintenance and Inspection:</i>	Empty as Needed
<i>Responsible Staff:</i>	

### *BMP Description: Portable Toilet*

<i>Installation Schedule:</i>	Available during construction
<i>Maintenance and Inspection:</i>	Weekly/Empty as needed
<i>Responsible Staff:</i>	

## 5.3 Washing of Applicators and Containers used for Concrete, Paint or Other Materials

### *BMP Description: Concrete Washout*

<i>Installation Schedule:</i>	Prior to pouring of concrete
<i>Maintenance and Inspection:</i>	Bi-weekly and following any storm event. Clean and properly dispose as needed
<i>Responsible Staff:</i>	

## 5.4 Establish Proper Building Material Staging Areas

### *BMP Description: Staging Area*

<i>Installation Schedule:</i>	Prior to construction
<i>Maintenance and Inspection:</i>	Bi-weekly and following any storm event. Control runoff from staging area as needed
<i>Responsible Staff:</i>	

## 5.5 Establish Proper Equipment/Vehicle Fueling and Maintenance Practices

### *BMP Description: Spill Kits*

<i>Installation Schedule:</i>	Have them available if a spill should occur
<i>Maintenance and Inspection:</i>	Bi-weekly
<i>Responsible Staff:</i>	

### *BMP Description: Fuel and Maintain in Areas Away from Inlets*

<i>Installation Schedule:</i>	Prior to and throughout construction
<i>Maintenance and Inspection:</i>	Perform maintenance off site to extent practicable
<i>Responsible Staff:</i>	

## 5.6 Control Equipment/Vehicle Washing

### *BMP Description: NO Washing of Construction Vehicles Allowed*

<i>Installation Schedule:</i>	On going
<i>Maintenance and Inspection:</i>	
<i>Responsible Staff:</i>	

## 5.7 Pesticides, Herbicides, Insecticides, Fertilizers, and Landscape Materials

### *BMP Description: Staging Area*

<i>Installation Schedule:</i>	Prior to construction
<i>Maintenance and Inspection:</i>	Bi-weekly and following any storm even. Control runoff from staging area as needed
<i>Responsible Staff:</i>	

## 5.8 Other Pollution Prevention Practices

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***BMP Description:***

<b><i>Installation Schedule:</i></b>	
<b><i>Maintenance and Inspection:</i></b>	
<b><i>Responsible Staff:</i></b>	

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***BMP Description:***

<b><i>Installation Schedule:</i></b>	
<b><i>Maintenance and Inspection:</i></b>	
<b><i>Responsible Staff:</i></b>	

## SECTION 6: INSPECTIONS & CORRECTIVE ACTIONS

### 6.1 *Inspections*

**1. *Inspection Personnel:*** Identify the person(s) who will be responsible for conducting inspections and describe their qualifications:

**2. *Inspection Schedule and Procedures:***

Describe the inspection schedules and procedures you have developed for your site (include frequency of inspections for each BMP or group of BMPs, indicate when you will inspect, e.g., before/during/and after rain events, spot inspections):

Describe the general procedures for correcting problems when they are identified. Include responsible staff and time frames for making corrections:

Attach a copy of the inspection report you will use for your site.

Reduction in Inspection Frequency (if applicable)

For the reduction in inspections resulting from stabilization:

For reduction in inspections due to frozen conditions:

### 6.2 *Corrective Actions*

Corrective Action Log: *See Appendix*

### 6.3 *Delegation of Authority*

**Duly Authorized Representative(s) or Position(s):**

Company or Organization:

Name:

Position:

Address:

City, State, Zip Code:

Telephone Number:

Fax/Email:

*See Appendix K*

## SECTION 7: TRAINING AND RECORDKEEPING

### **7.1 Training**

Individual(s) Responsible for Training:

Describe Training Conducted:

- General stormwater and BMP awareness training for staff and subcontractors:
  
- Detailed training for staff and subcontractors with specific stormwater responsibilities:

<b>Training Attendee Name</b>	<b>Title of Training</b>	<b>Duration</b>	<b>Date of Training</b>

Additional training documentation should be included in Appendix J.

### **7.2 Recordkeeping**

Records will be retained for a minimum period of at least 3 years after the permit is terminated.

Date(s) when major grading activities occur:

Date(s) when construction activities temporarily or permanently cease on a portion of the site:

Date(s) when an area is either temporarily or permanently stabilized:

### **7.3 Log of Changes to the SWPPP**

Log of changes and updates to the SWPPP  
*See Appendix*



## SECTION 8: WATER QUALITY

### 8.1 UIC Class 5 Injection Wells

- French Drain
- Commercially Manufactured pre-cast or pre-built subsurface infiltration system
- Drywell(s), seepage pit(s), improved sinkhole(s)

Description of your Class V Injection Well:

DWQ contact information:

Name:

Date:

Additional information:

Local Requirements:

### 8.2 Discharge Information

Does your project/site discharge stormwater into a Municipal Separate Storm Sewer System (MS4)?  Yes  No

List the MS4 that receives the discharge from the construction project:

Are there any surface waters that are located within 50 feet of your construction disturbances?

Yes  No

List the water body:

### 8.3 Receiving Waters

**Table 1 – Names of Receiving Waters** (see <http://wq.deq.utah.gov>)

Name(s) of the first surface water that receives stormwater directly from your site and/or from the MS4. (note: multiple rows provided where your site has more than one point of discharge that flows to different surface waters)
<b>1. Pineview Reservoir</b>
<b>2.</b>
<b>3.</b>
<b>4.</b>
<b>5.</b>
<b>6.</b>

### 8.4 Impaired Waters

(see <http://wq.deq.utah.gov> look in the bottom half of the left hand column)

	Is this surface water listed as "impaired"?	If you answered yes, then answer the following:		
		What pollutant(s) are causing the impairment?	Has a TMDL been completed?	Pollutant(s) for which there is a TMDL
1.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Dissolved Oxygen, Phosphorus, Temperature	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Dissolved oxygen and phosphorus</u>
2.	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
4.	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
5.	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
6.	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

### 8.5 High Water Quality

**Table 3 – High Water Quality**

(see <http://wq.deq.utah.gov> look in the bottom half of the left hand column)

	Is this surface water designated as High Water Quality? (see Appendix C)	If you answered yes, specify which category the surface water is designated as?
1.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2
2.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2
3.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2
4.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2
5.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2
6.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2

### 8.6 Dewatering Practices

<b>BMP Description: Divert Ditch Water</b>	
<b>Installation Schedule:</b>	Prior and During construction
<b>Maintenance and Inspection:</b>	As Needed
<b>Responsible Staff:</b>	

### **8.7 Control Stormwater Flowing onto and through the Project**

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***BMP Description: Diversion, Ditches, Berms***

<b><i>Installation Schedule:</i></b>	Grading phase
<b><i>Maintenance and Inspection:</i></b>	Bi-weekly during construction
<b><i>Responsible Staff:</i></b>	

### **8.8 Protect Storm Drain Inlets**

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***BMP Description: Inlet Protection***

<b><i>Installation Schedule:</i></b>	Prior to Construction
<b><i>Maintenance and Inspection:</i></b>	Bi-weekly and after storm event
<b><i>Responsible Staff:</i></b>	

## SECTION 9: POST-CONSTRUCTION BMPs

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***BMP Description: Landscaping / Re-Vegetation***

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<b><i>Installation Schedule:</i></b>	After Construction
<b><i>Maintenance and Inspection:</i></b>	N/A
<b><i>Responsible Staff:</i></b>	

## SECTION 10: CERTIFICATION

***Professional/SWPPP Author***

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.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **SWPPP APPENDICES**

Attach the following documentation to the SWPPP:

***Appendix A – General Location Map***

***Appendix B – Site Maps***

***Appendix C – Construction General Permit***

***Appendix D – NOI and Acknowledgement Letter from EPA/State/MS4***

***Appendix E – Inspection Reports***

***Appendix F – Corrective Action Log (or in Part 5.3)***

***Appendix G – SWPPP Amendment Log (or in Part 6.2)***

***Appendix H – Subcontractor Certifications/Agreements***

***Appendix I – Grading and Stabilization Activities Log (or in Part 6.1)***

***Appendix J – Training Log***

***Appendix K – Delegation of Authority***

***Appendix L – Additional Information (i.e., Other permits such as dewatering, stream alteration, wetland; and out of date swppp documents)***

***Appendix M – BMP Specifications***



## Appendix B – Site Map

## Appendix C – Construction General Permit



## Appendix D – NOI and Acknowledgement Letter From EPA/State/MS4

## Appendix E – Inspection Reports

### Erosion and Sediment Control Inspection and Corrective Action Report

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Site Name and Location: \_\_\_\_\_

Current Weather Conditions: \_\_\_\_\_ Last Rain Event >.5": \_\_\_\_\_

Site Description: \_\_\_\_\_

BMP Designation	O.K.	Not O.K.	BMP Condition, Corrective Action.
<b>Construction Access</b> Is the tracking pad Preventing sediment from Being tracked into the Street?			
<b>Washout facility</b> Are washout facilities (e.g. Paint, stucco, concrete) Available , clearly marked And maintained?			
<b>Portable Toilet</b> Is the portable toilet placed Behind the sidewalk or at Least 10' away from the Street properly anchored?			
<b>Perimeter Control</b> Clearing Limits Marked? Silt Fences?			
<b>Inlet, Curb and Gutter Check Dam Sediment Protection</b> Rock bags?			
<b>Waste Disposal</b> Is trash/litter from work Areas collected in a dumpsters or removed from the site daily			
<b>Street Sweeping And Dust Control</b>			
<b>Other BMP Maintenance</b>			

# Appendix F – Corrective Action Log

Project Name:  
SWPPP Contact:

Inspection Date	Inspector Name(s)	Description of BMP Deficiency	Corrective Action Needed (including planned date/responsible person)	Date Action Taken/Responsible person



## Appendix H – Subcontractor Certifications/Agreements

### SUBCONTRACTOR CERTIFICATION STORMWATER POLLUTION PREVENTION PLAN

Project Number: \_\_\_\_\_

Project Title: \_\_\_\_\_

Operator(s): \_\_\_\_\_

As a subcontractor, you are required to comply with the Stormwater Pollution Prevention Plan (SWPPP) for any work that you perform on-site. Any person or group who violates any condition of the SWPPP may be subject to substantial penalties or loss of contract. You are encouraged to advise each of your employees working on this project of the requirements of the SWPPP. A copy of the SWPPP is available for your review at the office trailer.

Each subcontractor engaged in activities at the construction site that could impact stormwater must be identified and sign the following certification statement:

**I certify under the penalty of law that I have read and understand the terms and conditions of the SWPPP for the above designated project and agree to follow the BMPs and practices described in the SWPPP.**

This certification is hereby signed in reference to the above named project:

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Type of construction service to be provided: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

# Appendix I – Grading and Stabilization Activities Log

Project Name:  
SWPPP Contact:

Date Grading Activity Initiated	Description of Grading Activity	Date Grading Activity Ceased (Indicate Temporary or Permanent)	Date When Stabilization Measures are Initiated	Description of Stabilization Measure and Location

## Appendix J – SWPPP Training Log

### Stormwater Pollution Prevention Training Log

Project Name: \_\_\_\_\_

Project Location: \_\_\_\_\_

Instructor's Name(s): \_\_\_\_\_

Instructor's Title(s): \_\_\_\_\_

Course Location: \_\_\_\_\_ Date: \_\_\_\_\_

Course Length (hours): \_\_\_\_\_

Stormwater Training Topic: *(check as appropriate)*

- Erosion Control BMPs       Emergency Procedures  
 Sediment Control BMPs       Good Housekeeping BMPs  
 Non-Stormwater BMPs

Specific Training Objective: \_\_\_\_\_  
\_\_\_\_\_

Attendee Roster: *(attach additional pages as necessary)*

No.	Name of Attendee	Company
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

## Appendix K – Delegation of Authority Form

### Delegation of Authority

I, \_\_\_\_\_ (name), hereby designate the person or specifically described position below to be a duly authorized representative for the purpose of overseeing compliance with environmental requirements, including the Construction General Permit, at the \_\_\_\_\_ construction site. The designee is authorized to sign any reports, stormwater pollution prevention plans and all other documents required by the permit.

\_\_\_\_\_ (name of person or position)  
\_\_\_\_\_ (company)  
\_\_\_\_\_ (address)  
\_\_\_\_\_ (city, state, zip)  
\_\_\_\_\_ (phone)

By signing this authorization, I confirm that I meet the requirements to make such a designation as set forth in \_\_\_\_\_ (Reference State Permit), and that the designee above meets the definition of a “duly authorized representative” as set forth in \_\_\_\_\_ (Reference State Permit).

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.

**Name:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



Appendix L – Additional Information (i.e. Documentation; other permits such as dewatering, stream alteration, wetland; and out of date SWPPP documents)

## Appendix M – BMP Specifications