



LCI-Lineberger Construction, Inc.

EROSION PREVENTION AND SEDIMENT CONTROL SITE INSPECTION FORM

INSPECTION DATE: 10-01-07

INSPECTOR NAME: Mike H. - 502

PROJECT DATA

Project Name: Hunt Springs I.D. Project ID: _____ Permit # _____

Contractor Name: LCI

On-site Responsible Person/CCR(if applicable): MJH

Notice of Construction Filed Yes No _____ (date)

Pre-construction Inspection Yes No _____ (date)

PROJECT INITIATION

- Yes No Are perimeter controls installed?
- Yes No Are perimeter BMP's installed correctly?
- Yes No N/A Detention/sediment basin installed as the first land disturbing activity if applicable

EROSION PREVENTION

- Yes No Is construction following the phasing and sequencing plan?
- Yes No Are Erosion Prevention measures located in the proper places?
- Yes No Are Erosion Prevention measures installed correctly?
- Yes No Are Erosion Prevention measures protecting disturbed areas?

If Erosion Prevention measures are protecting disturbed areas, what are the types of protection:

- Bench Terracing FGM Pipe Slope Drain Stream Bank Stabilization
- Berms Ground Cover Plants Polyacrylamide Surface Roughening
- BFM Hydromulching Outlet Protection Temporary Seeding
- Clearwater Division Mulching Riprap/Aggregate Topsoiling
- ECBs Permanent Seeding Sodding TRMs

Other _____

- Yes No N/A Are drainage conveyances stabilized with vegetation and/or channel lining(IA)
- Yes No N/A Are previously stabilized areas being maintained, if applicable?
- Yes No N/A Has activity on the site been temporarily ceased for 21 days or more
- Yes No N/A If activity has ceased for 21 days or more, have temporary stabilization measures been installed within 14 days?
- Yes No Photo Documentation

SEDIMENT CONTROL

- Yes No N/A Are Sediment Control practices located properly?
- Yes No N/A Are Sediment Control Practices installed properly?
- Yes No N/A Are all soil stockpiles adequately contained?
- Yes No N/A Are Sediment Control measures protecting off site areas?

If Sediment Control measures are protecting off site areas, what are the types of protection:

- Silt Fence Turbidity Curtain Construction Entrance Polyacrylamide Flocculates
- Ditch Check Sediment Berm Sediment Pond Vegetated Filter Strips
- Inlet Protection Sediment Dike Sediment Trap

Other _____

Yes No Photo Documentation

***Inspections must be conducted at least once every 7 days**

OFFSITE IMPACT

Yes No Are there BMP's installed in streams or active channels?
If Yes, have them removed unless specified on the plans and check for permits.

Yes No Is there evidence of work outside the limits of the approved plan?

Yes No NA Is construction being de-watered properly if applicable?

Are there off-site impacts?

<input type="checkbox"/> Waterbody	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe
<input type="checkbox"/> Roadway	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe
<input type="checkbox"/> Adjacent Property	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe
<input type="checkbox"/> Air/Dust	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe
<input type="checkbox"/> Storm Sewer	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe

Yes No Photo Documentation

DOCUMENTATION BY THE PERMITTEE

Yes No Is there a functional rain gauge located on the project site?

Yes No Is there a record of the total rainfall from actual rainfall events?

Yes No Inspections every 7 calendar days and/or within 24 hours of any 1/2" or greater event

Yes No Do EP&SC logs show that action has been taken regarding any current deficiencies?

ENFORCEMENT ACTIVITY

Yes No NA Have the proper actions been taken regarding previous deficiencies or violations if applicable?

What, if any, enforcement activity is required as a result of the inspection?

- No Action
- Negotiated Compliance
- Notice of violation
- Stop work order
- Citation

Required Actions:

Compliance Date: _____

FINAL STABILIZATION

Yes No Have all land disturbing activities at the site ceased?

Yes No Are there any areas of active erosion evident?

Yes No Is there perennial vegetative cover with a density of at least 70% of cover established for the area OR have equivalent measures such as mulches, RECP's, etc. been employed?

Follow-up Inspection: _____ (date)

Yes No Photo Documentation

NOTES

***Inspections must be conducted at least once every 7 days**



LCI-Lineberger Construction, Inc.

EROSION PREVENTION AND SEDIMENT CONTROL SITE INSPECTION FORM

INSPECTION DATE: 10-08-07

INSPECTOR NAME: Mike Hinson

PROJECT DATA

Project Name: Health Spacing Ind. Project ID: _____ Permit # _____

Contractor Name: LCI

On-site Responsible Person/CCR(if applicable): [Signature]

Notice of Construction Filed Yes No _____ (date)

Pre-construction Inspection Yes No _____ (date)

PROJECT INITIATION

- Yes No Are perimeter controls installed?
- Yes No Are perimeter BMP's installed correctly?
- Yes No NA Detention/sediment basin installed as the first land disturbing activity if applicable

EROSION PREVENTION

- Yes No Is construction following the phasing and sequencing plan?
- Yes No Are Erosion Prevention measures located in the proper places?
- Yes No Are Erosion Prevention measures installed correctly?
- Yes No Are Erosion Prevention measures protecting disturbed areas?

If Erosion Prevention measures are protecting disturbed areas, what are the types of protection:

- Bench Terracing FGM Pipe Slope Drain Stream Bank Stabilization
- Berms Ground Cover Plants Polyacrylamide Surface Roughening
- BFM Hydromulching Outlet Protection Temporary Seeding
- Clearwater Division Mulching Riprap/Aggregate Topsoiling
- ECBs Permanent Seeding Sodding TRMs

Other _____

- Yes No NA Are drainage conveyances stabilized with vegetation and/or channel lining(IA)
- Yes No NA Are previously stabilized areas being maintained, if applicable?
- Yes No NA Has activity on the site been temporarily ceased for 21 days or more
- Yes No NA If activity has ceased for 21 days or more, have temporary stabilization measures been installed within 14 days?
- Yes No Photo Documentation

SEDIMENT CONTROL

- Yes No NA Are Sediment Control practices located properly?
- Yes No NA Are Sediment Control Practices installed properly?
- Yes No NA Are all soil stockpiles adequately contained?
- Yes No NA Are Sediment Control measures protecting off site areas?

If Sediment Control measures are protecting off site areas, what are the types of protection:

- Silt Fence Turbidity Curtain Construction Entrance Polyacrylamide Flocculates
- Ditch Check Sediment Berm Sediment Pond Vegetated Filter Strips
- Inlet Protection Sediment Dike Sediment Trap

Other _____

Yes No Photo Documentation

***Inspections must be conducted at least once every 7 days**



LCI-Lineberger Construction, Inc.

EROSION PREVENTION AND SEDIMENT CONTROL SITE INSPECTION FORM

INSPECTION DATE: 10-15-07

INSPECTOR NAME: Mike Hinson

PROJECT DATA

Project Name: Heath Springs Ind. Project ID: _____ Permit # CCR 101475

Contractor Name: LCI

On-site Responsible Person/CCR(if applicable): M. B. [Signature]

Notice of Construction Filed Yes No _____ (date)

Pre-construction Inspection Yes No _____ (date)

PROJECT INITIATION

- Yes No Are perimeter controls installed?
- Yes No Are perimeter BMP's installed correctly?
- Yes No N/A Detention/sediment basin installed as the first land disturbing activity if applicable

EROSION PREVENTION

- Yes No Is construction following the phasing and sequencing plan?
- Yes No Are Erosion Prevention measures located in the proper places?
- Yes No Are Erosion Prevention measures installed correctly?
- Yes No Are Erosion Prevention measures protecting disturbed areas?

If Erosion Prevention measures are protecting disturbed areas, what are the types of protection:

- Bench Terracing FGM Pipe Slope Drain Stream Bank Stabilization
- Berms Ground Cover Plants Polyacrylamide Surface Roughening
- BFM Hydromulching Outlet Protection Temporary Seeding
- Clearwater Division Mulching Riprap/Aggregate Topsoiling
- ECBs Permanent Seeding Sodding TRMs

Other _____

- Yes No N/A Are drainage conveyances stabilized with vegetation and/or channel lining(IA)
- Yes No N/A Are previously stabilized areas being maintained, if applicable?
- Yes No N/A Has activity on the site been temporarily ceased for 21 days or more
- Yes No N/A If activity has ceased for 21 days or more, have temporary stabilization measures been installed within 14 days?
- Yes No Photo Documentation

SEDIMENT CONTROL

- Yes No N/A Are Sediment Control practices located properly?
- Yes No N/A Are Sediment Control Practices installed properly?
- Yes No N/A Are all soil stockpiles adequately contained?
- Yes No N/A Are Sediment Control measures protecting off site areas?

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- Silt Fence Turbidity Curtain Construction Entrance Polyacrylamide Flocculates
- Ditch Check Sediment Berm Sediment Pond Vegetated Filter Strips
- Inlet Protection Sediment Dike Sediment Trap

Other _____

Yes No Photo Documentation

***Inspections must be conducted at least once every 7 days**

OFFSITE IMPACT

- Yes No Are there BMP's installed in streams or active channels?
If Yes, have them removed unless specified on the plans and check for permits.
- Yes No Is there evidence of work outside the limits of the approved plan?
- Yes No N/A Is construction being de-watered properly if applicable?

Are there off-site impacts?

- | | | | | |
|--|--|----------------------------------|--|---------------------------------|
| <input type="checkbox"/> Waterbody | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Roadway | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Adjacent Property | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Air/Dust | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Storm Sewer | <input checked="" type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Photo Documentation | | | |

DOCUMENTATION BY THE PERMITTEE

- Yes No Is there a functional rain gauge located on the project site?
- Yes No Is there a record of the total rainfall from actual rainfall events?
- Yes No Inspections every 7 calendar days and/or within 24 hours of any 1/2" or greater event
- Yes No Do EP&SC logs show that action has been taken regarding any current deficiencies?

ENFORCEMENT ACTIVITY

- Yes No N/A Have the proper actions been taken regarding previous deficiencies or violations if applicable?

What, if any, enforcement activity is required as a result of the inspection?

- No Action
- Negotiated Compliance
- Notice of violation
- Stop work order
- Citation

Required Actions:

Compliance Date: _____

FINAL STABILIZATION

- Yes No Have all land disturbing activities at the site ceased?
- Yes No Are there any areas of active erosion evident?
- Yes No Is there perennial vegetative cover with a density of at least 70% of cover established for the area OR have equivalent measures such as mulches, RECP's, etc. been employed?

Follow-up Inspection: _____ (date)

- Yes No Photo Documentation

NOTES

***Inspections must be conducted at least once every 7 days**



LCI-Lineberger Construction, Inc.

EROSION PREVENTION AND SEDIMENT CONTROL SITE INSPECTION FORM

INSPECTION DATE: 10-22-2007

INSPECTOR NAME: CHUCK ROWE

PROJECT DATA

Project Name: Helm Springs Ind. Park Project ID: _____ Permit # SCP 10E 475

Contractor Name: LCI

On-site Responsible Person/CCR(if applicable): _____

Notice of Construction Filed Yes No _____ (date)

Pre-construction Inspection Yes No _____ (date)

PROJECT INITIATION

Yes No Are perimeter controls installed?

Yes No Are perimeter BMP's installed correctly?

Yes No NA Detention/sediment basin installed as the first land disturbing activity if applicable

EROSION PREVENTION

Yes No Is construction following the phasing and sequencing plan?

Yes No Are Erosion Prevention measures located in the proper places?

Yes No Are Erosion Prevention measures installed correctly?

Yes No Are Erosion Prevention measures protecting disturbed areas?

If Erosion Prevention measures are protecting disturbed areas, what are the types of protection:

Bench Terracing FGM Pipe Slope Drain Stream Bank Stabilization

Berms Ground Cover Plants Polyacrylamide Surface Roughening

BFM Hydromulching Outlet Protection Temporary Seeding

Clearwater Division Mulching Riprap/Aggregate Topsoiling

ECBs Permanent Seeding Sodding TRMs

Other _____

Yes No NA Are drainage conveyances stabilized with vegetation and/or channel lining(IA)

Yes No NA Are previously stabilized areas being maintained, if applicable?

Yes No NA Has activity on the site been temporarily ceased for 21 days or more

Yes No NA If activity has ceased for 21 days or more, have temporary stabilization measures been installed within 14 days?

Yes No Photo Documentation

SEDIMENT CONTROL

Yes No NA Are Sediment Control practices located properly?

Yes No NA Are Sediment Control Practices installed properly?

Yes No NA Are all soil stockpiles adequately contained?

Yes No NA Are Sediment Control measures protecting off site areas?

If Sediment Control measures are protecting off site areas, what are the types of protection:

Silt Fence Turbidity Curtain Construction Entrance Polyacrylamide Flocculates

Ditch Check Sediment Berm Sediment Pond Vegetated Filter Strips

Inlet Protection Sediment Dike Sediment Trap

Other _____

Yes No Photo Documentation

***Inspections must be conducted at least once every 7 days**

OFFSITE IMPACT

- Yes No Are there BMP's installed in streams or active channels?
 If Yes, have them removed unless specified on the plans and check for permits.
 Yes No Is there evidence of work outside the limits of the approved plan?
 Yes No NA Is construction being de-watered properly if applicable?

Are there off-site impacts?

- | | | | | |
|---|-------------------------------|---|--|---------------------------------|
| <input type="checkbox"/> Waterbody | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input checked="" type="checkbox"/> Roadway | <input type="checkbox"/> None | <input checked="" type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Adjacent Property | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Air/Dust | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Storm Sewer | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
- Yes No Photo Documentation

DOCUMENTATION BY THE PERMITTEE

- Yes No Is there a functional rain gauge located on the project site?
 Yes No Is there a record of the total rainfall from actual rainfall events?
 Yes No Inspections every 7 calendar days and/or within 24 hours of any 1/2" or greater event
 Yes No Do EP&SC logs show that action has been taken regarding any current deficiencies?

ENFORCEMENT ACTIVITY

- Yes No NA Have the proper actions been taken regarding previous deficiencies or violations if applicable?

What, if any, enforcement activity is required as a result of the inspection?

- No Action
 Negotiated Compliance
 Notice of violation
 Stop work order
 Citation

Required Actions:

Compliance Date: _____

FINAL STABILIZATION

- Yes No Have all land disturbing activities at the site ceased?
 Yes No Are there any areas of active erosion evident?
 Yes No Is there perennial vegetative cover with a density of at least 70% of cover established for the area OR have equivalent measures such as mulches, RECP's, etc. been employed?
 Follow-up Inspection: _____ (date)

Yes No Photo Documentation

NOTES

Construction Entrance has been covered up and needs to be lengthened

***Inspections must be conducted at least once every 7 days**



LCL-Lineberger Construction, Inc.

EROSION PREVENTION AND SEDIMENT CONTROL SITE INSPECTION FORM

INSPECTION DATE: 10-26-2007

INSPECTOR NAME: CHRIS POWE

PROJECT DATA

Project Name: HEATH SPRAWLS JWD. PARK Project ID: _____ Permit # SCR 112 F 475

Contractor Name: LCL

On-site Responsible Person/CCR(if applicable): _____

Notice of Construction Filed Yes No _____ (date)

Pre-construction Inspection Yes No _____ (date)

PROJECT INITIATION

Yes No Are perimeter controls installed?

Yes No Are perimeter BMP's installed correctly?

Yes No NA Detention/sediment basin installed as the first land disturbing activity if applicable

EROSION PREVENTION

Yes No Is construction following the phasing and sequencing plan?

Yes No Are Erosion Prevention measures located in the proper places?

Yes No Are Erosion Prevention measures installed correctly?

Yes No Are Erosion Prevention measures protecting disturbed areas?

If Erosion Prevention measures are protecting disturbed areas, what are the types of protection:

Bench Terracing FGM Pipe Slope Drain Stream Bank Stabilization

Berms Ground Cover Plants Polyacrylamide Surface Roughening

BFM Hydromulching Outlet Protection Temporary Seeding

Clearwater Division Mulching Riprap/Aggregate Topsoiling

ECBs Permanent Seeding Sodding TRMs

Other _____

Yes No NA Are drainage conveyances stabilized with vegetation and/or channel lining(IA)

Yes No NA Are previously stabilized areas being maintained, if applicable?

Yes No NA Has activity on the site been temporarily ceased for 21 days or more

Yes No NA If activity has ceased for 21 days or more, have temporary stabilization measures been installed within 14 days?

Yes No Photo Documentation

SEDIMENT CONTROL

Yes No NA Are Sediment Control practices located properly?

Yes No NA Are Sediment Control Practices installed properly?

Yes No NA Are all soil stockpiles adequately contained?

Yes No NA Are Sediment Control measures protecting off site areas?

If Sediment Control measures are protecting off site areas, what are the types of protection:

Silt Fence Turbidity Curtain Construction Entrance Polyacrylamide Flocculates

Ditch Check Sediment Berm Sediment Pond Vegetated Filter Strips

Inlet Protection Sediment Dike Sediment Trap

Other _____

Yes No Photo Documentation

***Inspections must be conducted at least once every 7 days**

OFFSITE IMPACT

- Yes No Are there BMP's installed in streams or active channels?
 If Yes, have them removed unless specified on the plans and check for permits.
- Yes No Is there evidence of work outside the limits of the approved plan?
- Yes No NA Is construction being de-watered properly if applicable?

Are there off-site impacts?

- | | | | | |
|--|-------------------------------|---|--|---------------------------------|
| <input type="checkbox"/> Waterbody | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input checked="" type="checkbox"/> Roadway | <input type="checkbox"/> None | <input checked="" type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Adjacent Property | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Air/Dust | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Storm Sewer | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Photo Documentation | | | |

DOCUMENTATION BY THE PERMITTEE

- Yes No Is there a functional rain gauge located on the project site?
- Yes No Is there a record of the total rainfall from actual rainfall events?
- Yes No Inspections every 7 calendar days and/or within 24 hours of any 1/2" or greater event
- Yes No Do EP&SC logs show that action has been taken regarding any current deficiencies?

ENFORCEMENT ACTIVITY

- Yes No NA Have the proper actions been taken regarding previous deficiencies or violations if applicable?

What, if any, enforcement activity is required as a result of the inspection?

- No Action
- Negotiated Compliance
- Notice of violation
- Stop work order
- Citation

Required Actions:

Compliance Date: _____

FINAL STABILIZATION

- Yes No Have all land disturbing activities at the site ceased?
- Yes No Are there any areas of active erosion evident?
- Yes No Is there perennial vegetative cover with a density of at least 70% of cover established for the area OR have equivalent measures such as mulches, RECP's, etc. been employed?
- Follow-up Inspection: _____ (date)

Yes No Photo Documentation

NOTES

Has been raining the last couple of days
 Site is wet, but no sediment has left the site
 Inspector Monday will tell more about what impacts
 need to be made

***Inspections must be conducted at least once every 7 days**



LCI-Lineberger Construction, Inc.

EROSION PREVENTION AND SEDIMENT CONTROL SITE INSPECTION FORM

INSPECTION DATE: 10-29-2007

INSPECTOR NAME: CHRIS ROWE

PROJECT DATA

Project Name: Death Springs Pipeline Project ID: _____ Permit # SCR10E475
 Contractor Name: _____
 On-site Responsible Person/CCR(if applicable): _____
 Notice of Construction Filed Yes No _____ (date)
 Pre-construction Inspection Yes No _____ (date)

PROJECT INITIATION

Yes No Are perimeter controls installed?
 Yes No Are perimeter BMP's installed correctly?
 Yes No NA Detention/sediment basin installed as the first land disturbing activity if applicable

EROSION PREVENTION

Yes No Is construction following the phasing and sequencing plan?
 Yes No Are Erosion Prevention measures located in the proper places?
 Yes No Are Erosion Prevention measures installed correctly?
 Yes No Are Erosion Prevention measures protecting disturbed areas?

If Erosion Prevention measures are protecting disturbed areas, what are the types of protection:

- Bench Terracing
- Berms
- BFM
- Clearwater Division
- ECBs
- FGM
- Ground Cover Plants
- Hydromulching
- Mulching
- Permanent Seeding
- Pipe Slope Drain
- Polyacrylamide
- Outlet Protection
- Riprap/Aggregate
- Sodding
- Stream Bank Stabilization
- Surface Roughening
- Temporary Seeding
- Topsoiling
- TRMs
- Other _____

Yes No NA Are drainage conveyances stabilized with vegetation and/or channel lining(IA)
 Yes No NA Are previously stabilized areas being maintained, if applicable?
 Yes No NA Has activity on the site been temporarily ceased for 21 days or more
 Yes No NA If activity has ceased for 21 days or more, have temporary stabilization measures been installed within 14 days?

Yes No Photo Documentation

SEDIMENT CONTROL

Yes No NA Are Sediment Control practices located properly?
 Yes No NA Are Sediment Control Practices installed properly?
 Yes No NA Are all soil stockpiles adequately contained?
 Yes No NA Are Sediment Control measures protecting off site areas?

If Sediment Control measures are protecting off site areas, what are the types of protection:

- Silt Fence
- Ditch Check
- Inlet Protection
- Turbidity Curtain
- Sediment Berm
- Sediment Dike
- Construction Entrance
- Sediment Pond
- Sediment Trap
- Polyacrylamide Flocculates
- Vegetated Filter Strips
- Other _____

Yes No Photo Documentation

***Inspections must be conducted at least once every 7 days**

OFFSITE IMPACT

Yes No Are there BMP's installed in streams or active channels?
 If Yes, have them removed unless specified on the plans and check for permits.

Yes No Is there evidence of work outside the limits of the approved plan?

Yes No NA Is construction being de-watered properly if applicable?

Are there off-site impacts?

<input type="checkbox"/> Waterbody	<input type="checkbox"/> None	<input type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe
<input checked="" type="checkbox"/> Roadway	<input type="checkbox"/> None	<input checked="" type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe
<input type="checkbox"/> Adjacent Property	<input type="checkbox"/> None	<input type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe
<input type="checkbox"/> Air/Dust	<input type="checkbox"/> None	<input type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe
<input type="checkbox"/> Storm Sewer	<input type="checkbox"/> None	<input type="checkbox"/> Minimal	<input type="checkbox"/> Needs Attention	<input type="checkbox"/> Severe

Yes No Photo Documentation

DOCUMENTATION BY THE PERMITTEE

Yes No Is there a functional rain gauge located on the project site?

Yes No Is there a record of the total rainfall from actual rainfall events?

Yes No Inspections every 7 calendar days and/or within 24 hours of any 1/2" or greater event

Yes No Do EP&SC logs show that action has been taken regarding any current deficiencies?

ENFORCEMENT ACTIVITY

Yes No NA Have the proper actions been taken regarding previous deficiencies or violations if applicable?

What, if any, enforcement activity is required as a result of the inspection?

- No Action
- Negotiated Compliance
- Notice of violation
- Stop work order
- Citation



Required Actions:

Compliance Date: _____

FINAL STABILIZATION

Yes No Have all land disturbing activities at the site ceased?

Yes No Are there any areas of active erosion evident?

Yes No Is there perennial vegetative cover with a density of at least 70% of cover established for the area OR have equivalent measures such as mulches, RECP's, etc. been employed?

Follow-up Inspection: _____ (date)

Yes No Photo Documentation

NOTES

Construction entrance needs to be lengthened
 check dam and outlet need sediment removal
 Inlet protection needs to be fixed

***Inspections must be conducted at least once every 7 days**