CONSTRUCTION SITE/STORM-WATER INSPECTION CHECKLIST

Municipal Code Chapter 13.10 Storm Water Management
Engineering Inspection Division

Inspection Description: Initial Visit [ ] Routine Inspection [ ] Follow-Up Inspection [ ]

Storm Event Inspection Type:  None [ ] Pre- [ ] Post [ ]

Inspected By: ___________________________ Date: __________________

Project Superintendent: ___________________________ Date: __________________

Project Type: ___________________________ Location: ___________________________

Name of Contractor's 24-hour Site Contact: ___________________________

Phone: ___________________________

Did Superintendent Receive The BMP Guide Previously:  Yes [ ] No [ ]

If No, Did He/She Receive One Now:  Yes [ ] No [ ]

Is The Weather Triggered Action Plan On-Site and Available:  Yes [ ] No [ ]

Watershed:  __Carlsbad  __San Dieguito

303(d) Listed:  -Sediment  -Bacteria

-Nutrients  -Bacteria

Priority:  High  Medium  Low

Based On:  Pre-Inspection Checklist

DEFINITIONS:

SWPPP: Storm-water Pollution Prevention Plan (>1 acre)  BMP: Best Management Practice

NPDES: National Pollutant Discharge Elimination System

Mark (x) box “Yes” or “No” or “N/A”; if comments, mark (x) box “Comment”.

Yes  No  N/A  Comment  CONSTRUCTION
1. Are all BMPs identified on the SWPPP/Plans installed in the proper location, in accordance to the specifications, and functioning properly?

2. Does the SWPPP/Plans reflect current site conditions?

3. If required, is Dry Season Preparation adequate? (e.g.: Able to implement quickly, materials on-site or close, contractor is monitoring weather, perimeter protection in place.)

4. Does the Contractor have an inspection schedule and documents on-site and readily available?

5. Are Monitoring Reports available, and in compliance?

6. Are all downstream Operational Storm Drain Inlets protected?

7. Are all Natural Drainage Courses in proximity to this project protected?

8. Are all gravel bags, straw bales, and silt fences in place in accordance with the SWPPP/Plans, and are they functioning properly?

9. Are Non-Storm-water BMPs being used? (e.g.: concrete washouts, irrigation runoff, etc.)

10. If present, are all sediment traps/basins functioning properly?

11. Is sediment, debris, or mud being cleaned from public roads and intersections with site access roads? (Tracking BMPs in place.)

12. Are all discharge points free of any significant erosion or sediment transport?

13. If present, are all significant erodible slopes protected from erosion through the implement of acceptable soil stabilization practices? (Rills and Gullies Developing.)

14. Are all material and equipment handling, storage, and maintenance areas clean, and free of spills, leaks, or other deleterious materials?
15. Are all on-site traffic routes, parking, and storage of equipment and supplies restricted to areas designated in the SWPPP/Plans for those uses?

16. Are all locations of temporary soil stockpiles or construction materials in approved areas?

17. Are all seeded or landscaped and irrigation areas properly maintained?

18. Are all BMPs maintained in functional order?

Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I certify that this inspection was conducted in accordance with Solana Beach Municipal Code Section 13.10 Storm Water Management by a City staff representative. Project site representative acknowledges any site violations detected and agrees to take the necessary corrective actions in the timetable given to them by City staff or risk penalties that may include fines.

City Staff Signature _______________________________ Date __________

Project Site Representative Signature _______________________________ Date __________