

**QUARTERLY SITE INSPECTIONS  
BOISE**

PERMIT YEAR (Circle):	2017	2018	2019	2020	2021
INSPECTION PERIOD (Circle)	Quarter 1 Jan-Mar	Quarter 2 Apr-June	Quarter 3 Jul – Sept	Quarter 4 Oct - Dec	

- At least one member of the Pollution Prevention Team must participate in the inspection
- At least one inspection during each calendar year must take place when a stormwater discharge is occurring

**Weather information and a description of any stormwater or non-stormwater discharges occurring at the time of the inspection:** Light rain ground wet

**Any previously unidentified discharges of pollutants from the site? If yes, describe:**

NO

**Any control measures needing maintenance, repairs, or replacement? If yes, describe:**

NO

**Any incidents of noncompliance observed? If yes, describe:**

NO

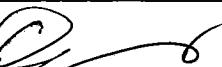
**Any additional control measures needed to comply with the permit requirements? If yes, describe:**

NO

INSPECTOR NAME & SIGNATURE: 	COMPANY: <u>S AIA</u>	INSPECTION DATE AND TIME: <u>2/13/19 10am</u>
---	--------------------------	---

**QUARTERLY STORMWATER SAMPLE VISUAL MONITORING  
BOISE**

OUTFALL NUMBER	FLOATING SOLIDS	SUSPENDED SOLIDS	SETTLED SOLIDS	OIL SHEEN	COLOR	CLARITY	ODOR	FOAM	OTHER
Outfall No. 001	Y/ <input checked="" type="radio"/> N	Y/ <input type="radio"/> N	Y/ <input type="radio"/> N	Y/ <input checked="" type="radio"/> N	clear	clear	None	Y/ <input type="radio"/> N	
<b>List the probable source(s) of any stormwater contamination, and if corrective actions are needed to address the problem:</b>     									

INSPECTOR  
NAME & SIGNATURE: 

COMPANY: S.A.S.

INSPECTION DATE  
AND TIME: 2/13/19 10AM

**Instructions for completing this form**

- Visual assessment must be made of a sample in a clean, clear glass or plastic container and examined in a well-lit area
- Collect the sample within 30 minutes of an actual discharge from a storm event, or document why a sample couldn't be obtained within the first 30 minutes of a discharge
- The sample should be collected at least 3 days after the previous discharge

**Evaluate the sample in a well-lit area for the following parameters:**

**Floating Solids:** Check for solids or liquids floating on the surface. Give a general description of the type of floating solids present in the general comments section for each sample. Identify amount of floating solids (High, Medium, Low, or None).

**Suspended solids:** Record whether or not suspended solids are present floating inside the column of water, not on top

**Settled Solids:** After 30 minutes has passed, give a general description of the type of settled solids present (sand, decayed plant matter, rust particles, etc.) in the general comments section.

**Oil Sheen:** Record whether or not an oil sheen is present.

**Color:** Record the best description of the sample color in the appropriate space on the form.

**Clarity:** This refers to how cloudy the sample is.

**Clear** – Sample doesn't block any light; can be seen through regardless of color.

**Cloudy** – Sample blocks some light; objects not clear but can be identified looking through the sample.

**Very Cloudy** – Sample blocks most light; objects cannot be identified looking through the sample.

**Opaque** – Sample blocks all light; objects cannot be seen when looking through the sample.

**Odor:** Note the presence of any of the following odors if detected, such as gasoline, diesel, oil, solvents, garbage, fishy, sweet/sugary, any other unusual odors not normally present in clean runoff

**Foam:** Describe whether foam is present on the stormwater discharge

**Other:** Record any other observations (e.g. whether the discharge contains any trash or debris, etc.)

**QUARTERLY SITE INSPECTIONS  
BOISE**

PERMIT YEAR (Circle):	2017	2018	2019	2020	2021
INSPECTION PERIOD (Circle)	Quarter 1 Jan-Mar	Quarter 2 Apr-June	Quarter 3 Jul – Sept	Quarter 4 Oct - Dec	

- At least one member of the Pollution Prevention Team must participate in the inspection
- At least one inspection during each calendar year must take place when a stormwater discharge is occurring

**Weather information and a description of any stormwater or non-stormwater discharges occurring at the time of the inspection:** Moderate Rain fall - flowing to Drains

**Any previously unidentified discharges of pollutants from the site? If yes, describe:**

No

**Any control measures needing maintenance, repairs, or replacement? If yes, describe:**

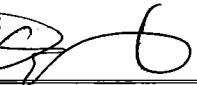
No

**Any incidents of noncompliance observed? If yes, describe:**

No

**Any additional control measures needed to comply with the permit requirements? If yes, describe:**

No

INSPECTOR NAME & SIGNATURE: 	COMPANY: <u>S&amp;A</u>	INSPECTION DATE AND TIME: <u>4/3/19 11:30 AM</u>
---	----------------------------	--

**QUARTERLY STORMWATER SAMPLE VISUAL MONITORING  
BOISE**

OUTFALL NUMBER	FLOATING SOLIDS	SUSPENDED SOLIDS	SETTLED SOLIDS	OIL SHEEN	COLOR	CLARITY	ODOR	FOAM	OTHER
Outfall No. 001	Y/N	Y/N	Y/N	Y/N	clear	clear	None	Y/N	
<b>List the probable source(s) of any stormwater contamination, and if corrective actions are needed to address the problem:</b>      									
INSPECTOR NAME & SIGNATURE: 		COMPANY: Soia			INSPECTION DATE AND TIME: 7/3/19 11:30 AM				

**Instructions for completing this form**

- Visual assessment must be made of a sample in a clean, clear glass or plastic container and examined in a well-lit area
- Collect the sample within 30 minutes of an actual discharge from a storm event, or document why a sample couldn't be obtained within the first 30 minutes of a discharge
- The sample should be collected at least 3 days after the previous discharge

**Evaluate the sample in a well-lit area for the following parameters:**

**Floating Solids:** Check for solids or liquids floating on the surface. Give a general description of the type of floating solids present in the general comments section for each sample. Identify amount of floating solids (High, Medium, Low, or None).

**Suspended solids:** Record whether or not suspended solids are present floating inside the column of water, not on top

**Settled Solids:** After 30 minutes has passed, give a general description of the type of settled solids present (sand, decayed plant matter, rust particles, etc.) in the general comments section.

**Oil Sheen:** Record whether or not an oil sheen is present.

**Color:** Record the best description of the sample color in the appropriate space on the form.

**Clarity:** This refers to how cloudy the sample is.

**Clear** – Sample doesn't block any light; can be seen through regardless of color.

**Cloudy** – Sample blocks some light; objects not clear but can be identified looking through the sample.

**Very Cloudy** – Sample blocks most light; objects cannot be identified looking through the sample.

**Opaque** – Sample blocks all light; objects cannot be seen when looking through the sample.

**Odor:** Note the presence of any of the following odors if detected, such as gasoline, diesel, oil, solvents, garbage, fishy, sweet/sugary, any other unusual odors not normally present in clean runoff

**Foam:** Describe whether foam is present on the stormwater discharge

**Other:** Record any other observations (e.g. whether the discharge contains any trash or debris, etc.)

**QUARTERLY SITE INSPECTIONS  
BOISE**

PERMIT YEAR (Circle):	2017	2018	2019	2020	2021
INSPECTION PERIOD (Circle)	Quarter 1 Jan-Mar	Quarter 2 Apr-June	Quarter 3 Jul-Sept	Quarter 4 Oct - Dec	

- At least one member of the Pollution Prevention Team must participate in the inspection
- At least one inspection during each calendar year must take place when a stormwater discharge is occurring

**Weather information and a description of any stormwater or non-stormwater discharges occurring at the time of the inspection:** Rainfall - flowing to Drains

**Any previously unidentified discharges of pollutants from the site? If yes, describe:**

No

**Any control measures needing maintenance, repairs, or replacement? If yes, describe:**

No

**Any incidents of noncompliance observed? If yes, describe:**

No

**Any additional control measures needed to comply with the permit requirements? If yes, describe:**

No

INSPECTOR NAME  
& SIGNATURE:



COMPANY:

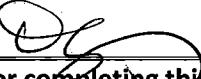
Sauer

INSPECTION DATE 9/6/19  
AND TIME: 11:45 AM

**QUARTERLY STORMWATER SAMPLE VISUAL MONITORING  
BOISE**

OUTFALL NUMBER	FLOATING SOLIDS	SUSPENDED SOLIDS	SETTLED SOLIDS	OIL SHEEN	COLOR	CLARITY	ODOR	FOAM	OTHER
Outfall No. 001	Y/ <input checked="" type="radio"/>	Y/ <input type="radio"/>	Y/ <input type="radio"/>	Y/ <input type="radio"/>	clear	clear	no	Y/ <input type="radio"/>	

**List the probable source(s) of any stormwater contamination, and if corrective actions are needed to address the problem:**  
None

INSPECTOR NAME & SIGNATURE: 	COMPANY: Saia	INSPECTION DATE 9/6/19 AND TIME: 11:45 AM
---	---------------	--

**Instructions for completing this form**

- Visual assessment must be made of a sample in a clean, clear glass or plastic container and examined in a well-lit area
- Collect the sample within 30 minutes of an actual discharge from a storm event, or document why a sample couldn't be obtained within the first 30 minutes of a discharge
- The sample should be collected at least 3 days after the previous discharge

**Evaluate the sample in a well-lit area for the following parameters:**

**Floating Solids:** Check for solids or liquids floating on the surface. Give a general description of the type of floating solids present in the general comments section for each sample. Identify amount of floating solids (High, Medium, Low, or None).

**Suspended solids:** Record whether or not suspended solids are present floating inside the column of water, not on top

**Settled Solids:** After 30 minutes has passed, give a general description of the type of settled solids present (sand, decayed plant matter, rust particles, etc.) in the general comments section.

**Oil Sheen:** Record whether or not an oil sheen is present.

**Color:** Record the best description of the sample color in the appropriate space on the form.

**Clarity:** This refers to how cloudy the sample is.

**Clear** – Sample doesn't block any light; can be seen through regardless of color.

**Cloudy** – Sample blocks some light; objects not clear but can be identified looking through the sample.

**Very Cloudy** – Sample blocks most light; objects cannot be identified looking through the sample.

**Opaque** – Sample blocks all light; objects cannot be seen when looking through the sample.

**Odor:** Note the presence of any of the following odors if detected, such as gasoline, diesel, oil, solvents, garbage, fishy, sweet/sugary, any other unusual odors not normally present in clean runoff

**Foam:** Describe whether foam is present on the stormwater discharge

**Other:** Record any other observations (e.g. whether the discharge contains any trash or debris, etc.)

**QUARTERLY SITE INSPECTIONS**  
**BOISE**

PERMIT YEAR (Circle):	2017	2018	2019	2020	2021
INSPECTION PERIOD (Circle)	Quarter 1 Jan-Mar	Quarter 2 Apr-June	Quarter 3 Jul – Sept	Quarter 4 Oct - Dec	

- At least one member of the Pollution Prevention Team must participate in the inspection
- At least one inspection during each calendar year must take place when a stormwater discharge is occurring

**Weather information and a description of any stormwater or non-stormwater discharges occurring at the time of the inspection:** *Rain*

**Any previously unidentified discharges of pollutants from the site? If yes, describe:**

*No*

**Any control measures needing maintenance, repairs, or replacement? If yes, describe:**

*No*

**Any incidents of noncompliance observed? If yes, describe:**

*No*

**Any additional control measures needed to comply with the permit requirements? If yes, describe:**

*No*

INSPECTOR NAME & SIGNATURE: <i>OG</i>	COMPANY: <i>Seia</i>	INSPECTION DATE AND TIME: <i>12/12/19 11AM</i>
--	----------------------	---

**QUARTERLY STORMWATER SAMPLE VISUAL MONITORING  
BOISE**

OUTFALL NUMBER	FLOATING SOLIDS	SUSPENDED SOLIDS	SETTLED SOLIDS	OIL SHEEN	COLOR	CLARITY	ODOR	FOAM	OTHER
Outfall No. 001	Y / N	Y / N	Y / N	Y / N	Clear	Clear	No	Y / N	

**List the probable source(s) of any stormwater contamination, and if corrective actions are needed to address the problem:**

None

INSPECTOR NAME & SIGNATURE: 	COMPANY: Satis	INSPECTION DATE AND TIME: 12/12/19 11 AM
--	----------------	---

**Instructions for completing this form**

- Visual assessment must be made of a sample in a clean, clear glass or plastic container and examined in a well-lit area
- Collect the sample within 30 minutes of an actual discharge from a storm event, or document why a sample couldn't be obtained within the first 30 minutes of a discharge
- The sample should be collected at least 3 days after the previous discharge

**Evaluate the sample in a well-lit area for the following parameters:**

**Floating Solids:** Check for solids or liquids floating on the surface. Give a general description of the type of floating solids present in the general comments section for each sample. Identify amount of floating solids (High, Medium, Low, or None).

**Suspended solids:** Record whether or not suspended solids are present floating inside the column of water, not on top

**Settled Solids:** After 30 minutes has passed, give a general description of the type of settled solids present (sand, decayed plant matter, rust particles, etc.) in the general comments section.

**Oil Sheen:** Record whether or not an oil sheen is present.

**Color:** Record the best description of the sample color in the appropriate space on the form.

**Clarity:** This refers to how cloudy the sample is.

**Clear** – Sample doesn't block any light; can be seen through regardless of color.

**Cloudy** – Sample blocks some light; objects not clear but can be identified looking through the sample.

**Very Cloudy** – Sample blocks most light; objects cannot be identified looking through the sample.

**Opaque** – Sample blocks all light; objects cannot be seen when looking through the sample.

**Odor:** Note the presence of any of the following odors if detected, such as gasoline, diesel, oil, solvents, garbage, fishy, sweet/sugary, any other unusual odors not normally present in clean runoff

**Foam:** Describe whether foam is present on the stormwater discharge

**Other:** Record any other observations (e.g. whether the discharge contains any trash or debris, etc.)