

COMPREHENSIVE SITE COMPLIANCE EVALUATION

Facility Name: SHELLEY BAF
Inspection Date: 27 Aug. 19
Inspector Name: STEPHEN R. GOODSON

I. SWPPP EVALUATION

Is description of potential pollutant sources in SWPPP current? ✓ Yes No

If no, list other potential pollutants: _____

Is the site map in the SWPPP correct? ✓ Yes No

If no, list necessary changes: _____

Have there been any incidents of noncompliance with this SWPPP or the permit? Yes ✓ No

If yes, describe the incidents: _____

II. SITE INSPECTION

Is there evidence of industrial materials, residue, or trash on the ground that could contaminate or be washed away in stormwater? Yes ✓ No

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If yes, describe material and location: _____

Is there evidence of leaks or spills from industrial equipment, drums, barrels, tanks, or similar containers? Yes ✓ No

If yes, identify source and location: _____

Is there evidence of offsite tracking of industrial materials or sediment where vehicles enter or exit the site? Yes ✓ No

If yes, identify material and location: _____

Is there evidence of tracking or blowing of materials from areas of no exposure to exposed areas? Yes ✓ No

If yes, identify material and location: _____

Is there evidence of pollutants entering the drainage system? Yes ✓ No

If yes, identify pollutant and location: _____

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Has there been any change at the site that increases the potential for pollutants to enter the drainage system?

Yes

No

If yes, identify change and potential pollutant: _____

Are controls to reduce pollutants identified in the SWPPP being implemented and operating correctly?

Yes

No

If no, identify deficiencies: _____

Do the controls that have been implemented appear to be adequate?

Yes

No

If no, identify corrective actions and responsible personnel: _____

III. CERTIFICATION

If no incidents of noncompliance are identified, the site is considered to be in compliance with the Stormwater Pollution Prevention Plan and the permit and the signature below is considered to be certification of compliance.

Inspector Signature (person who conducted evaluation):



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IV. SIGNATURE

"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."

Signature: _____

Name (print): _____

Title: _____

Date: _____