

DAILY STORMWATER SITE INSPECTION REPORT

CEM-2031 (NEW 9/2011)

Page 1 of 3

| | | |
|---|---|--|
| PROJECT INFORMATION NAME AND SITE ADDRESS | CONTRACT NUMBER/CO/RTE/PM | |
| | PROJECT IDENTIFIER NUMBER | |
| | WDID NUMBER | |
| CONTRACTOR NAME AND ADDRESS | PROJECT SITE WATER POLLUTION CONTROL <input type="checkbox"/> WPCP <input type="checkbox"/> SWPPP | SWPPP PROJECT SITE RISK LEVEL <input type="checkbox"/> Risk Level 1 <input type="checkbox"/> Risk Level 2 <input type="checkbox"/> Risk Level 3 |
| Submitted by contractor (print and sign name) | | Date |
| Water pollution control manager name and company name | Phone number | |
| | Emergency (24/7) phone number | |

General Information

| | |
|------------------|--------------------|
| Inspector's Name | Date of Inspection |
|------------------|--------------------|

| | | |
|---|--|---|
| Weather condition <input type="checkbox"/> Clear <input type="checkbox"/> Partly cloudy <input type="checkbox"/> Cloudy | Precipitation condition <input type="checkbox"/> None <input type="checkbox"/> Misty <input type="checkbox"/> Light rain <input type="checkbox"/> Rain <input type="checkbox"/> Heavy rain <input type="checkbox"/> Hail <input type="checkbox"/> Snow | Wind Condition <input type="checkbox"/> None <input type="checkbox"/> Less than 5 mph <input type="checkbox"/> Greater than 5 mph |
|---|--|---|

| | |
|---|--|
| Construction Phase <input type="checkbox"/> Highway construction <input type="checkbox"/> Plant establishment <input type="checkbox"/> Suspension of work (inactive site) | Site Information _____ Acres total project area _____ Acres total project disturbed soil area _____ Acres current phase disturbed soil area _____ Acres current phase inactive disturbed soil |
|---|--|

| BMPs Requiring Daily Inspection | SWPPP required BMP | Activity in progress today | BMP's Requiring Daily Inspection | SWPPP required BMP | Activity in progress today |
|---|--------------------------|----------------------------|---|--------------------------|----------------------------|
| Hazardous Materials and Waste Storage | <input type="checkbox"/> | <input type="checkbox"/> | Vehicles and Equipment Storage | <input type="checkbox"/> | <input type="checkbox"/> |
| Hazardous waste generated within last 24 hours? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | Vehicles and Equipment Fueling | <input type="checkbox"/> | <input type="checkbox"/> |
| Hazardous waste inventory updated? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | Vehicles and Equipment Maintenance | <input type="checkbox"/> | <input type="checkbox"/> |
| Hazardous Waste Transportation and Disposal | <input type="checkbox"/> | <input type="checkbox"/> | Vehicles and Equipment Cleaning | <input type="checkbox"/> | <input type="checkbox"/> |
| Hazardous Materials Delivery | <input type="checkbox"/> | <input type="checkbox"/> | Dewatering | <input type="checkbox"/> | <input type="checkbox"/> |
| Tracking Controls | <input type="checkbox"/> | <input type="checkbox"/> | Pile Driving | <input type="checkbox"/> | <input type="checkbox"/> |
| Waste Management | <input type="checkbox"/> | <input type="checkbox"/> | Materials and Equipment Use Over Water | <input type="checkbox"/> | <input type="checkbox"/> |
| Temporary Concrete Washout | <input type="checkbox"/> | <input type="checkbox"/> | Structures Demolition / Removal Over or Adjacent to Water | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | Active Treatment System | <input type="checkbox"/> | <input type="checkbox"/> |

BMPs for activities shown as non-active require weekly inspection.
 Do you want to perform a weekly inspection today? Yes No

ADA Notice

For individuals with sensory disabilities, this document is available in alternate formats. For information call (916) 654-6410 or TDD (916) 654-3880 or write Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.

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Site Inspection of Best Management Practices

If the inspection form does not contain enough lines for all locations, attach more pages for the BMP so that all locations are inspected and reported.

| Activity | Observations and Comments |
|--|---------------------------|
| Hazardous Materials and Waste Storage <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Hazardous Waste Storage Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Hazardous Material Delivery and Storage <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Hazardous Waste Disposal and Transportation <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Tracking Controls Access Roads <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Waste Management <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Temporary Concrete Washouts <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Vehicle and Equipment Storage Areas <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Vehicle and Equipment Fueling <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Vehicle and Equipment Maintenance <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Vehicle and Equipment Cleaning <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Dewatering <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Pile Driving <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Material and Equipment Use Over Water <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Structure Demolition or Removal Over or Adjacent to Water <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |
| Active Treatment System <input type="checkbox"/> Yes <input type="checkbox"/> No | Not Needed |

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Daily Stormwater Inspection Report Certification

I certify under penalty of law that this Stormwater Inspection Report was completed in accordance with the General Permit. The information contained in this inspection report was gathered from a field site inspection. I am aware that Section 309 (c)(4) of the Clean Water Act (CWA) provides for significant penalties, including fines and imprisonment for knowingly submitting false material statement, representation or certification.

| | |
|---------------------------|-----------------------|
| Stormwater Inspector Name | Date Report Completed |
|---------------------------|-----------------------|

Stormwater Inspector Signature

I certify under penalty of law that this Stormwater Inspection Report was performed in accordance with the General Permit by me or under my direction or supervision. The information contained in this inspection report was gathered and evaluated by qualified personnel before submittal. Based on my review of the information and inquiry of those who gathered and evaluated the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

I am aware that Section 309 (c)(4) of the Clean Water Act (CWA) provides for significant penalties, including fines and imprisonment for knowingly submitting false material statement, representation, or certification.

| | |
|--------------------------------------|------|
| Water Pollution Control Manager Name | Date |
|--------------------------------------|------|

Water Pollution Control Manager Signature

Daily Stormwater Inspection Report Acceptance

| | |
|--------------------------------------|------|
| Accepted by Resident Engineer (Name) | Date |
|--------------------------------------|------|

Resident Engineer Signature

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General Information

- If the inspection form does not contain enough lines to report all locations on a jobsite, attach additional copies of the form page to report that all locations have been inspected.
- Required actions reported on this form must also be reported on form CEM-2035, "Stormwater Site Inspection Report Corrective Actions Summary."
- Locations identified where BMPs are failing or have other shortcomings require repairs or design changes within 72 hours of identification and complete BMP repairs or other changes as soon as possible.

FORM

- Contract Number/Co/Rte/PM
For local agency encroachment permit projects write the encroachment permit number in the Contract Number field.
- Project Identifier Number
Caltrans projects starting July 1, 2010, will have a Project Identifier Number. For projects without a project identifier number, write N/A in the field.
- WDID Number
For projects with Water Pollution Control Program, enter "WPCP" in this field.