

INSPECTION AND MAINTENANCE REPORT FORM

TO BE COMPLETED EVERY 7 DAYS AND WITHIN 24 HOURS OF
A RAINFALL EVENT OF 0.5 INCHES OR MORE

INSPECTOR: JEFF SWIRICK
DATE: 2.18.03

INSPECTOR'S QUALIFICATIONS:

P.E. 40657

DAYS SINCE LAST RAINFALL: 5
AMOUNT OF LAST RAINFALL: 1.5 INCHES

CONDITION STABILIZATION MEASURES

AREA	DATE SINCE LAST DISTURBED	DATE DISTURBED NEXT	STABILIZED? (YES/NO)	STABILIZED WITH	CONDITION
32± AC	10.1.02	NONE PLANNED	YES	SEEDING HAND DUG BERMS	MINOR RIVULETS
ACCESS ROAD	UNKNOWN	NONE PLANNED	YES	JUTE NETTING HAYBALES	GOOD
RD INTX w/ ACCESS ROAD	7.01	NONE PLANNED	YES	STRAW & HAYBALES	EROSION ON UPPER ROAD.

STABILIZATION REQUIRED:

32± AC - REPAIR HAND DUG BERMS.
RD INTX - PACK RIVULETS w/ STRAW & BRUSH
CLEAN SILTS FROM BEHIND HAYBALES.

TO BE PERFORMED BY: OWNER'S REP.
ON OR BEFORE: 2.25.03

STRUCTURAL CONTROLS

DATE: 2.18.03

STRAW WATTLES/BERMS

FROM LOCATION	TO LOCATION	IS BERM STABILIZED?	IS THERE EVIDENCE OF WASHOUT OR OVERTOPPING?
325 AC		YES	MINOR OVERTOPPING.

MAINTENANCE REQUIRED FOR STRAW WATTLES/BERMS:

REPAIR HAND DUG FORMS.

TO BE PERFORMED BY: OWNER'S REP

ON OR BEFORE: 2.25.03

CHEVRONS

DEPTH OF SEDIMENT IN CHEVRONS	CONDITION OF SIDE SLOPES	ANY EVIDENCE OF OVERTOPPING?	CONDITION OF OUTFALL FROM SEDIMENT CONTROL
RD INTX W/ ACCESS ROAD	GOOD	No	CLEAR

MAINTENANCE REQUIRED FOR CHEVRONS:

NONE

TO BE PERFORMED BY: _____

ON OR BEFORE: _____

OTHER CONTROLS

SILT FENCING AND HAYBALES

DEPTH OF SEDIMENT IN CHANNEL	CONDITION OF ENVIROBERMS	ANY EVIDENCE OF UNDERWASHING?	CONDITION OF OUTFALL FROM SEDIMENT CONTROL
0	GOOD	NO	CLEAR

MAINTENANCE REQUIRED FOR ENVIROBERMS:

NONE

TO BE PERFORMED BY: _____

ON OR BEFORE: _____

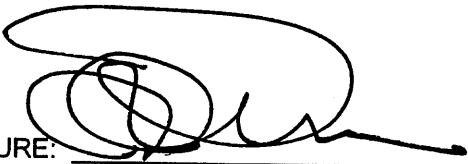
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CHANGES REQUIRED TO THE POLLUTION PREVENTION PLAN:

NONE REQUIRED.

REASONS FOR CHANGES:

I certify under penalty of law that this document and all attachments were prepared under my direction of 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: _____

DATE: _____

2.18.03