

**INSPECTION REPORT**

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Date: \_\_\_\_\_ Inspector: \_\_\_\_\_ Others Present: \_\_\_\_\_

Weather information since the last inspection.

Date: \_\_\_\_\_ Inches of Precipitation: \_\_\_\_\_ Discharges: \_\_\_\_\_ Y/N \_\_\_\_\_

Location(s) of discharges of sediment or other pollutants from site: \_\_\_\_\_

Location(s) of BMP's that need to be maintained: \_\_\_\_\_

Location(s) of BMP's that failed to operate as designed or were inadequate: \_\_\_\_\_

Location(s) where additional BMP's are needed: \_\_\_\_\_

Corrective action required changes to SWPPP and dates of implementation: \_\_\_\_\_

CERTIFICATION STATEMENT: 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 property gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage this 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 the fine and imprisonment for knowing violations.

  
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Inspector