

Industrial SWPPP Template

Introduction

To help you develop a SWPPP that is consistent with the Nevada Industrial Stormwater General Permit (NVR050000), the Nevada Division of Environmental Protection (NDEP) recommends this Industrial SWPPP Template (or, “the Template”). Use of the Template will help ensure that your SWPPP addresses all the necessary elements required in Industrial General Stormwater Permit.

Before completing the Template, make sure you read and understand the requirements in the Industrial General Stormwater Permit. A copy of the permit is available at <http://ndep.nv.gov/bwpc/indperm93.pdf>.

Using the Industrial SWPPP Template

- This Template is designed for use by all facilities eligible for coverage under the Industrial General Permit.
- Complete a SWPPP *before* submitting your Notice of Intent (NOI) for permit coverage.
- Each section includes “instructions” and space for your facility’s specific information. You should read the instructions for each section before you complete that section.
- Some sections may require only a brief description while others may require several pages of explanation.
- Modifications to a SWPPP shall be made within fourteen (14) calendar days after discovery, observation or event requiring a SWPPP modification. Implementation of new or modified BMPs shall be initiated before the next storm event if possible, but no later than sixty (60) calendar days after discovery, or as otherwise provided or approved by NDEP. The amount of time taken to modify a BMP or implement additional BMPs shall be documented in the SWPPP. (Section II.A.6)

PLEASE NOTE: NDEP does not currently require the Permittee to use a registered professional engineer or other qualified professional to prepare the SWPPP. However, the person preparing the SWPPP shall be qualified to ensure all the requirements of the SWPPP are met. (Section II.A.1)

NDEP notes that while every effort has been made to ensure the accuracy of all instructions and guidance contained in the Template, the actual obligations of regulated industrial facilities are determined by the relevant provisions of the permit, not by the Template. In the event of a conflict between the Template and any corresponding provision of the Industrial General Permit, the permit controls. NDEP welcomes comments on the Template at any time and will consider those comments in any future revision of this document.

Stormwater Pollution Prevention Plan

for:

Facility Name: _____

Facility Address: _____

City, State, Zip Code: _____

Facility Telephone Number: _____

SWPPP Contact(s):

Facility Operator: _____

Official Title: _____

Address: _____

City, State, Zip Code: _____

Telephone Number: _____

Fax/Email: _____

SWPPP Preparation Date:

___/___/_____

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SECTION 1: FACILITY DESCRIPTION AND CONTACT INFORMATION

1.1 Facility Information

Instructions:

- You will need the information from this section to complete your NOI.
- Detailed information on determining your site's latitude and longitude can be found at www.epa.gov/npdes/stormwater/latlong.

Facility Information

Name of Facility: _____

Street: _____

City: _____ State: _____ ZIP Code: _____

County or Similar Subdivision: _____

Industrial ID Number: ISW- _____

Latitude/Longitude (Use one of three possible formats, and specify method)

Latitude:

Longitude:

1. ___ ° ___ ' ___ " N (degrees, minutes, seconds)

1. ___ ° ___ ' ___ " W (degrees, minutes, seconds)

2. ___ ° ___ . ___ ' N (degrees, minutes, decimal)

2. ___ ° ___ . ___ ' W (degrees, minutes, decimal)

3. ___ . ___ ° N (decimal)

3. ___ . ___ ° W (decimal)

Method for determining latitude/longitude (check one):

USGS topographic map (specify scale: _____)

EPA Web site

GPS

Other (please specify): _____

Is this facility considered a Federal Facility? Yes No

Estimated area of industrial activity at site exposed to stormwater: _____ (acres)

Discharge Information

Does this facility discharge stormwater into the City Stormwater or Sewer System? Yes No

If yes, name of City: _____

Name(s) of water(s) that receive stormwater from your facility: _____

Are any of your stormwater discharges subject to effluent guidelines? Yes No

If Yes, which guidelines apply? _____

Primary SIC Code: _____

1.2 *Contact Information/Responsible Parties*

Instructions:

- List the facility operator(s), facility owner, and 24 hour emergency contact. Indicate respective responsibilities, where appropriate.
- You will need the information from this section of the Template for your NOI.

Facility Operator (s):

Name:

Address:

City, State, Zip Code:

Telephone Number:

Email address:

Fax number:

Facility Owner (s):

Name:

Address:

City, State, Zip Code:

Telephone Number:

Email address:

Fax number:

SWPPP Contact:

Name:

Telephone number:

Email address:

Fax number:

1.3 Stormwater Pollution Prevention Team

Instructions (see Part II.A.8):

- Identify the staff members (by name or title) that comprise the facility's stormwater pollution prevention team as well as their individual responsibilities.
- Your stormwater pollution prevention team is responsible for assisting the facility manager in developing and revising the facility's SWPPP, implementing and maintaining control measures/BMPs, and taking corrective actions where required. Each member of the stormwater pollution prevention team must have ready access to either an electronic or paper copy of applicable portions of the Permit and your SWPPP.

The intent of the Stormwater Pollution Prevention Team is ensuring coverage in case there is a storm event and to know what needs to be done in order to cover for those who are absent during a storm event.

Staff Names	Individual Responsibilities

1.4 Activities at the Facility

Instructions (Section II.B.1.b.(i)):

- Provide a general description of the nature of the industrial activities at your facility.

1.5 General Location Map

Instructions (Section II.B.1.c):

- Provide a general location map (e.g., U.S. Geological Survey (USGS) quadrangle map) with enough detail to identify the location of your facility and all receiving waters for your stormwater discharges (Attachment A).

Include a copy of the general location map for this facility in Attachment A. (Try the Google Maps tool at google.com)

1.6 Site Map

Instructions (Section II.B.1.d):

- Include a map showing the following information. *The site map shall be included as Attachment B.*
 - the size of the property in acres;
 - the location and extent of significant structures and impervious surfaces;
 - directions of stormwater flow (use arrows);
 - locations of all existing structural control measures;
 - locations of all receiving waters in the immediate vicinity of your facility, indicating if any of the waters are impaired and, if so, whether the waters have TMDLs established for them;
 - locations of all stormwater conveyances including ditches, pipes, and swales;
 - locations of potential pollutant sources identified under MSGP, Part 5.1.3.2;
 - locations where significant spills or leaks identified under MSGP, Part 5.1.3.3 have occurred;
 - locations of all stormwater monitoring points;
 - locations of stormwater inlets and outfalls, with a unique identification code for each outfall (e.g., Outfall No. 1, No. 2, etc), indicating if you are treating one or more outfalls as “substantially identical” under MSGP, Parts 4.2.3, 5.1.5.2, and 6.1.1, and an approximate outline of the areas draining to each outfall;
 - municipal separate storm sewer systems, where your stormwater discharges to them;
 - locations and descriptions of all non-stormwater discharges identified under MSGP, Part 2.1.2.10;
 - locations of the following activities where such activities are exposed to precipitation:
 - fueling stations;
 - vehicle and equipment maintenance and/or cleaning areas;
 - loading/unloading areas;
 - locations used for the treatment, storage, or disposal of wastes;
 - liquid storage tanks;
 - processing and storage areas;
 - immediate access roads and rail lines used or traveled by carriers of raw materials, manufactured products, waste material, or by-products used or created by the facility;
 - transfer areas for substances in bulk;
 - machinery; and
 - locations and sources of run-on to your site from adjacent property that contains significant quantities of pollutants.

This map is used as a quick guide to the lay-out of the property and where everything is located. It does not have to be to scale and can be hand drawn.

SECTION 2: POTENTIAL POLLUTANT SOURCES

2.1 *Non-Stormwater Discharges Documentation*

Instructions (Section II.B.1.e):

- The questions below require you to provide documentation of the following:
 - o Your evaluation for the presence of non-stormwater discharges at your site; and
 - o Your elimination of any unauthorized non-stormwater discharges.

See Form A.

2.2 *Industrial Activity and Associated Pollutants*

Instructions (Section II.B.1.h.(i)-(i).(b)):

- Include a list of industrial activities exposed to stormwater (e.g., material storage; equipment/vehicle fueling, maintenance, and cleaning; cutting steel beams) and the pollutants or pollutant constituents (e.g., motor oil, fuel, battery acid, and cleaning solvents) associated with these activities.
- In your list of pollutants associated with your industrial activities, include all significant materials that have been handled, treated, stored, or disposed, and that have been exposed to stormwater in the 3 years prior to the date you prepare your SWPPP.

This section is meant to describe areas at your facility where industrial materials or activities are exposed to stormwater or from which allowable non-stormwater discharges are released. (Section II.B.1.h)

Industrial Activity	Associated Pollutants

2.3 Spills and Leaks

Instructions (Section II.B.1.h.(i).(c)):

- Include the following in this section:
 - o **Potential spills and leaks:** A description of where potential spills and leaks could occur at your site that could contribute pollutants to your stormwater discharge, and specify which outfall(s) are likely to be affected by such spills and leaks.
 - o **Past spills and leaks:** A description of significant spills and leaks in the past 3 years of oil or toxic or hazardous pollutants that actually occurred at exposed areas, or that drained to a stormwater conveyance.
- *Note: Significant spills and leaks include, but are not limited to, releases of oil or hazardous substances in excess of quantities that are reportable under CWA Section 311 (see 40 CFR 110.6 and 40 CFR 117.21) or Section 102 of the Comprehensive Environmental Response, Compensation and Liability Act (CERCLA), 42 USC §9602.*

Areas of Site Where Potential Spills/Leaks Could Occur

Location	Outfalls

Refer to Form B for Description of Past Spills and/or Leaks

SECTION 3: STORMWATER CONTROL MEASURES

3.1 *Non-Stormwater Discharges*

Instructions (Section II.B.1.i):

- Certification that all discharges have been tested or evaluated for the presence of non-stormwater, and that all unauthorized discharges have been eliminated. Describe how you eliminated any unauthorized non-stormwater discharges at your site if identified.

Refer to Form A that records Non-Stormwater Discharges associated with this Facility.

3.2 *Minimize Exposure*

Instructions (Section II.B.1.j.(i)):

- Describe any structural controls or practices used to minimize the exposure of industrial activities to rain, snow, snowmelt, and runoff. Describe where the controls or practices are being implemented at your site.

3.3 *Erosion and Sediment Controls*

Instructions (Section II.B.1.k):

Describe structural or non-structural controls used at your site to stabilize exposed areas and contain runoff to minimize onsite erosion and potential offsite discharges of sediment. Describe the location at your site where each control will be implemented.

3.4 Structural Controls & Maintenance

Instructions (Section II.B.1.m & II.B.1.m (i-ii)):

- Describe controls used at your site to divert, infiltrate, reuse, contain, or otherwise reduce stormwater runoff. Describe the location at your site where each control will be implemented.
- Describe the maintenance program for controls on the site. Include maintenance frequencies and record findings.

See Form C for Control Measure Maintenance and Industrial Equipment Maintenance Records.

3.5 Good Housekeeping

Instructions (Section II.B.1.n):

Describe any practices you are implementing to keep exposed areas of your site clean. Describe where each practice is being implemented at your site. Include here your schedule for: (1) regular pickup and disposal of waste materials, and (2) routine inspections for leaks and of the condition of drums, tanks, and containers.

3.6 *Spill Prevention and Response*

Instructions (Section II.B.1.o):

- Describe any structural controls or procedures used to minimize the potential for leaks, spills, and other releases. You must implement the following at a minimum:
 - Procedures for plainly labeling containers (e.g., “Used Oil,” “Spent Solvents,” “Fertilizers and Pesticides,” etc.) that could be susceptible to spillage or leakage to encourage proper handling and facilitate rapid response if spills or leaks occur;
 - Preventative measures such as barriers between material storage and traffic areas, secondary containment provisions, and procedures for material storage and handling;
 - Procedures for expeditiously stopping, containing, and cleaning up leaks, spills, and other releases; and
 - Procedures for notification of appropriate facility personnel, emergency response agencies, and regulatory agencies.

Describe where each control is to be located or where applicable procedures will be implemented.

- Note: Some facilities may be required to develop a Spill Prevention Control and Countermeasure (SPCC) plan under a separate regulatory program (40 CFR 112). If you are required to develop an SPCC plan, or you already have one, you should include references to the relevant requirements from your plan.

3.7 Waste, Garbage and Floatable Debris

Instructions (Section II.B.1.p.(iv)):

- Describe controls and procedures that will be used at your site to minimize discharges of waste, garbage, and floatable debris. Describe the location at your site where each control and/or procedure will be implemented.

3.8 Dust Generation and Vehicle Tracking of Industrial Materials

Instructions (Section II.B.1.p.(v)):

- Describe controls and procedures you will use at your site to minimize the generation of dust and off-site tracking of raw, final, or waste materials. Describe the location at your site where each control and/or procedures will be implemented.

3.9 Salt Storage Piles or Piles Containing Salt

Instructions (Section II.B.1.p.(vii)):

If applicable, describe structures at your site that either cover or enclose salt storage piles or piles containing salt, or that prevent the discharge of stormwater from such piles. Also, describe any controls or procedures used to minimize exposure resulting from adding to or removing materials from the pile. Describe the location at your site where each control and/or procedure will be implemented.

3.10 *BMP Maintenance*

Instructions (Section II.B.1.q):

- Describe procedures (1) to maintain industrial equipment so that spills/leaks are avoided, and (2) to maintain any of your site's control measures in effective operating condition. Include the schedule you will follow for such maintenance activities. Describe where each applicable procedure is being implemented at the site.

3.11 *Employee Training*

Instructions (Section II.B.1.r):

- Describe your plan for training the employees who work in areas where industrial materials or activities are exposed to stormwater, or who are responsible for implementing activities necessary to meet the conditions of the Permit, including all members of your Pollution Prevention Team. Included in your description must be the frequency of training (note: recommended at least one time per year), and the schedule you will follow.

Refer to Form D for Employee Training Record Form.

3.12 *Records*

- Records for each element shall be included and maintained as an attachment to the SWPPP. Records shall document and describe maintenance activities, inspections, spills, discharge quality, employee training activities, employee education activities, and other events relative to each element in "Structural Control Measures". (Section II.B.1.s)

Attach Records to the back of the SWPPP.

SECTION 4: INSPECTIONS

Instructions Section III.A.1:

- Describe your procedures for performing the three types of inspections required by this permit, including:
 - Periodic Inspections (Section III.A.1); Form E
 - Quarterly visual assessment of stormwater discharges (Section III.A.2); Form F and
 - Comprehensive site inspections (Section III.A.3). Form G
- Attachments E and F include sample routine facility inspection and quarterly visual assessment forms. Appendix I includes a comprehensive site inspection form.

For the routine facility inspections and the comprehensive site inspections to be performed at your site, include a description of the following:

- The names of the person(s), or the positions of the person(s), responsible for inspection:
- The schedules to be used for conducting inspections. Include here any tentative schedule that will be used for facilities in climates with irregular stormwater runoff discharges:
- Specific areas of the facility to be inspected, including schedules for specific outfalls:

For the quarterly visual assessments to be performed at your site, include a description of the following:

- The names of the person(s), or the positions of the person(s), responsible for inspection:
- The schedules to be used for conducting inspections. Include here any tentative schedule that will be used for facilities in climates with irregular stormwater runoff discharges:
- Specific areas of the facility to be inspected, including schedules for specific outfalls:

SECTION 5: MONITORING

Instructions (See Part III):

- Describe your procedures for conducting inspections and monitoring specified by the Industrial General Permit, where applicable to your facility, including:
 - General Monitoring Requirements (Section III.A.4)
 - Representative Storm Events (Section III.A.4.a)
 - Representative Discharges from Similar Outfalls (Section III.A.4.b)
 - Sampling Data (Section III.A.4.c) **only for Category 1 facilities**
- Depending on the type of facility you operate, and the sampling requirements to which you are subject, you must collect and analyze stormwater samples and document monitoring activities consistent with the procedures described in Section III.A.4 (Category 1 facilities). Note: All monitoring must be conducted in accordance with the relevant sampling and analysis requirements at 40 CFR Part 136. Include in your description procedures for ensuring compliance with these requirements.
- If you plan to use the substantially identical outfall exception Section III.A.4.b and/or your quarterly visual assessment requirements in Section III.A.2, you must include the following documentation:
 - Location of each of the substantially identical outfalls;
 - Description of the general industrial activities conducted in the drainage area of each outfall;
 - Description of the control measures implemented in the drainage area of each outfall;
 - Description of the exposed materials located in the drainage area of each outfall that are likely to be significant contributors of pollutants to stormwater discharges;
 - An estimate of the runoff coefficient of the drainage areas (low = under 40%; medium = 40 to 65%; high = above 65%); and
 - Why the outfalls are expected to discharge substantially identical effluents.

For each type of monitoring, your SWPPP must include a description of:

1. **Sample Location(s).** Describe where samples will be collected, including any determination that two or more outfalls are substantially identical.
2. **Monitoring Schedules.** Include the schedule you will follow for monitoring your stormwater discharge, including where applicable any alternate monitoring periods to be used for facilities in climates with irregular stormwater runoff.
3. **Procedures.** Describe procedures you will follow for collecting samples, including responsible staff who will be involved, logistics for taking and handling samples, laboratory to be used, etc.

Note: It may be helpful to create a table with columns corresponding to # 1 - 3 above for each type of monitoring you are required to conduct.

Substantially identical outfall exception (if applicable)

If you plan to use the substantially identical outfall exception for your benchmark monitoring and/or quarterly visual assessment requirements, include the following information here to substantiate your claim that these outfalls are substantially identical:

- Location of each of the substantially identical outfalls:
- Description of the general industrial activities conducted in the drainage area of each outfall:
- Description of the control measures implemented in the drainage area of each outfall:
- Description of the exposed materials located in the drainage area of each outfall that are likely to be significant contributors of pollutants to stormwater discharges:
- An estimate of the runoff coefficient of the drainage areas (low=under 40%; medium=40 to 65%; high =above 65%):
- Why the outfalls are expected to discharge substantially identical effluents:

SECTION 7: SWPPP MODIFICATIONS

Instructions:

Your SWPPP is a “living” document and is required to be modified and updated, as necessary, in response to corrective actions. See Section II.B.1.s.(i).

- For any other SWPPP modification, you should keep a log with a description of the modification, the name of the person making it, and the date and signature of that person.

Refer to Attachment C for SWPPP Log Form

SECTION 6: SWPPP CERTIFICATION

Instructions (Section IV.B.1.d):

- The following certification statement must be signed and dated by a person who meets the requirements of Section IV.B.1.b.

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.

Name: _____ Title: _____

Signature: _____ Date: _____

SWPPP APPENDICES

Attach the following documentation to the SWPPP:

Attachment A – General Location Map

Attachment B – Site Map

Attachment C – SWPPP Amendment Log

Form A – Non-Stormwater Discharge Evaluation

Form B – Significant spills, leaks or other releases

Form C – Maintenance

Form D – Employee Education Log

Form E – Periodic Inspection

Form F – Quarterly Visual Monitoring

Form G – Comprehensive Site Evaluation

SWPPP Amendment Log

Appendix C

Instructions:
Include in your records:
— A log of the date and description of any amendments to your SWPPP.

Amend. No.	Description of the Amendment	Date of Amendment	Amendment Prepared by [Name(s) and Title]
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			

Non-Stormwater Discharge Evaluation

Form C

- Date of evaluation: _____

- Description of the evaluation criteria used:

- List of the outfalls or onsite drainage points that were directly observed during the evaluation:

- Different types of non-stormwater discharge(s) and source locations:

- Action(s) taken, such as a list of control measures used to eliminate unauthorized discharge(s), if any were identified. For example, a floor drain was sealed, a sink drain was re-routed to sanitary, or an NPDES permit application was submitted for an unauthorized cooling water discharge:

Significant spills, leaks or other releases

Form B

Instructions:

- Include the descriptions and dates of any incidences of significant spills, leaks, or other releases that resulted in discharges of pollutants to waters of the U.S., through stormwater or otherwise; the circumstances leading to the release and actions taken in response to the release; and measures taken to prevent the recurrence of such releases (see Part 2.1.2.4 of the 2008 MSGP).
- Provide information, as shown below, for each incident, and attach additional documentation (e.g., photos, spill cleanup records) as necessary. Repeat as necessary by copying and pasting the fields below.

Date of incident:

Location of incident:

Description of incident:

Circumstances leading to release:

Actions taken in response to release:

Measures taken to prevent recurrence:

Date of incident:

Location of incident:

Description of incident:

Circumstances leading to release:

Actions taken in response to release:

Measures taken to prevent recurrence:

Date of incident:

Location of incident:

Description of incident:

Circumstances leading to release:

Actions taken in response to release:

Measures taken to prevent recurrence:

Date of incident:

Location of incident:

Description of incident:

Circumstances leading to release:

Actions taken in response to release:

Measures taken to prevent recurrence:

Maintenance for Control Measures, Equipment & Systems

Form D

Instructions:

- Include in your records documentation of maintenance and repairs of control measures and industrial equipment, including:
 - the control measure/equipment maintained,
 - date(s) of regular maintenance,
 - date(s) of discovery of areas in need of repair/replacement, and for repairs,
 - date(s) that the control measure/equipment was returned to full function, and
 - the justification for any extended maintenance/repair schedules (see Part 2.1.2.3 of the 2008 MSGP).

- Provide information, as shown below, to document your maintenance activities for each control measure and industrial equipment. Repeat as necessary by copying and pasting the information below for additional control measures.

Control Measure Maintenance Records (copy information below for each control measure)

Control Measure:

Regular Maintenance Activities:

Regular Maintenance Schedule:

Date of Action:

Reason for Action: Regular Maintenance Discovery of Problem

If Problem,

- Description of Action Required:
- Date Control Measure Returned to Full Function:
- Justification for Extended Schedule, if applicable:

Notes:

Industrial Equipment and Systems Maintenance Records (copy information below for each industrial equipment/system)

Industrial Equipment/Systems:

Regular Maintenance Activities:

Regular Maintenance Schedule:

Date of Action:

Reason for Action: Regular Maintenance Discovery of Problem

If Problem,

- Description of Action Required:
- Date Industrial Equipment Returned to Full Function:
- Justification for Extended Schedule, if applicable:

Notes:

Employee training

Form E

Instructions:

- Keep records of employee training, including the date of the training (see Part 2.1.2.9 of the 2008 MSGP).
- For in-person training, consider using the tables below to document your employee trainings. For computer-based or other types of training, keep similar records on who was trained and the type of training conducted.

Training Date:	
Training Description:	
Trainer:	
Employee(s) trained	Employee signature

Training Date:	
Training Description:	
Trainer:	
Employee(s) trained	Employee signature

Training Date:	
Training Description:	
Trainer:	
Employee(s) trained	Employee signature

Periodic Inspection Reports

Form F

Instructions:

- Include in your records copies of all routine facility inspection reports completed for the facility.
- The sample inspection report is consistent with the requirements in Parts 4.1 of the 2008 MSGP relating to routine facility inspections. Facilities subject to State industrial stormwater permits may also find this form useful. If your permitting authority provides you with an inspection report, use that form.

Using the Sample Routine Facility Inspection Report

- This inspection report is designed to be customized according to the specific control measures and activities at your facility. For ease of use, you should take a copy of your site plan and number all of the stormwater control measures and areas of industrial activity that will be inspected. A brief description of the control measures and areas that were inspected should then be listed in the site-specific section of the inspection report.
- You can complete the items in the “General Information” section that will remain constant, such as the facility name, NPDES tracking number, and inspector (if you only use one inspector). Print out multiple copies of this customized inspection report to use during your inspections.
- When conducting the inspection, walk the site by following your site map and numbered control measures/areas of industrial activity to be inspected. Also note whether the “Areas of Industrial Materials or Activities exposed to stormwater” have been addressed (customize this list according to the conditions at your facility). Note any required corrective actions and the date and responsible person for the correction.

Areas of Industrial Materials or Activities exposed to stormwater

Below are some general areas that should be assessed during routine inspections. Customize this list as needed for the specific types of industrial materials or activities at your facility.

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
1	Material loading/unloading and storage areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Equipment operations and maintenance areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Fueling areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Outdoor vehicle and equipment washing areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Waste handling and disposal areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Erodible areas/construction	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	Non-stormwater/ illicit connections	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	Salt storage piles or pile containing salt	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9	Dust generation and vehicle tracking	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance observed and not described above:

Additional Control Measures

Describe any additional control measures needed to comply with the permit requirements:

Notes

Use this space for any additional notes or observations from the inspection:

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 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.”

Print name and title: _____

Signature: _____ **Date:** _____

Quarterly Visual Assessment Reports

Form G

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Name of Facility:

Outfall Name: "Substantially Identical Outfall"? No Yes (identify substantially identical outfalls):

Person(s)/Title(s) collecting sample:

Person(s)/Title(s) examining sample:

Date & Time Discharge Began:

Date & Time Sample Collected:

Date & Time Sample Examined:

Substitute Sample? No Yes (identify quarter/year when sample was originally scheduled to be collected):

Nature of Discharge: Rainfall Snowmelt

If rainfall: Rainfall Amount: ___ inches Previous Storm Ended > 72 hours Yes No* (explain):
Before Start of This Storm?

Parameter

Color None Other (describe):

Odor None Musty Sewage Sulfur Sour Petroleum/Gas _____
 Solvents Other (describe):

Clarity Clear Slightly Cloudy Cloudy Opaque Other

Floating Solids No Yes (describe):

Settled Solids** No Yes (describe):

Suspended Solids No Yes (describe):

Foam (gently shake sample) No Yes (describe):

Oil Sheen None Flecks Globs Sheen Slick
 Other (describe):

Other Obvious Indicators No Yes (describe):
of Stormwater Pollution

* The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

** Observe for settled solids after allowing the sample to sit for approximately one-half hour.

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).

Certification by Facility Responsible Official (Refer to MSGP Subpart 11 Appendix B for Signatory Requirements)

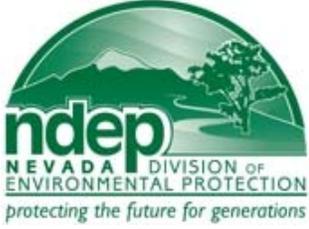
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage 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.

A. Name:

B. Title:

C. Signature:

D. Date Signed:



Nevada Division of Environmental Protection
Bureau of Water Pollution Control
Industrial Stormwater Program

Comprehensive Evaluation Form

A. GENERAL INFORMATION

1. Facility Name:			
3. Facility Physical Address:			
a. Street:			
b. City:	c. State:	d. Zip Code:	
4. Lead Inspectors Name:			Title:
Additional Inspectors Name(s):			Title:
5. Contact Person:			Title:
Phone:	Ext.	E-mail:	
6. Inspection Date:			

B. GENERAL INSPECTION FINDINGS

1. As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to stormwater? YES NO

If NO, describe why not:

NOTE: Complete Section C of this form for each industrial activity area inspected and included in your SWPPP or as newly identified in B.2 or B.3 below where pollutants may be exposed to stormwater.

2. Did this inspection identify any stormwater or non-stormwater outfalls not previously identified in your SWPPP? YES NO

If YES, for each location, describe the sources of those stormwater and non-stormwater discharges and any associated control measures in place:

3. Did this inspection identify any sources of stormwater or non-stormwater discharges not previously identified in your SWPPP? YES NO

If YES, describe these sources of stormwater or non-stormwater pollutants expected to be present in these discharges, and any control measures in place:

<p>4. Did you review stormwater monitoring data as part of this inspection to identify potential pollutant hot spots? YES NO NA, no monitoring performed</p> <p>If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:</p>	
<p>5. Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measures to prevent scouring:</p>	
<p>6. Have you taken or do you plan to take any corrective actions, as specified in Part 3 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection?</p> <p>YES NO</p>	
<p>If YES, how many conditions requiring review for correction action as specified in Parts 3.1 and 3.2 were addressed by these corrective actions?</p>	
<p>NOTE: Complete the attached Corrective Action Form (Section D) for each condition identified, including any conditions identified as a result of this comprehensive stormwater inspection.</p>	

C. INDUSTRIAL ACTIVITY AREA SPECIFIC FINDINGS

Complete one block for each industrial activity area where pollutants may be exposed to stormwater. Copy this page for additional industrial activity areas.

In reviewing each area, you should consider:

- Industrial materials, residue, or trash that may have or could come into contact with stormwater;
- Leaks or spills from industrial equipment, drums, tanks, and other containers;
- Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and
- Tracking or blowing of raw, final, or waste materials from areas of no exposure to exposed areas.

INDUSTRIAL ACTIVITY AREA _____:

1. Brief Description:

2. Are any control measures in need of maintenance or repair? YES NO

3. Have any control measures failed and require replacement? YES NO

4. Are any additional/revised control measures necessary in this area? YES NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

INDUSTRIAL ACTIVITY AREA _____:

1. Brief Description:

2. Are any control measures in need of maintenance or repair? YES NO

3. Have any control measures failed and require replacement? YES NO

4. Are any additional/revised c necessary in this area? YES NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

INDUSTRIAL ACTIVITY AREA _____:

Brief Description:

2. Are any control measures in need of maintenance or repair? YES NO

3. Have any control measures failed and require replacement? YES NO

4. Are any additional/revised BMPs necessary in this area? YES NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

INDUSTRIAL ACTIVITY AREA _____:

1. Brief Description:

2. Are any control measures in need of maintenance or repair? YES NO

3. Have any control measures failed and require replacement? YES NO

4. Are any additional/revised BMPs necessary in this area? YES NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

INDUSTRIAL ACTIVITY AREA _____:

1. Brief Description:

2. Are any control measures in need of maintenance or repair? YES NO

3. Have any control measures failed and require replacement? YES NO

4. Are any additional/revised BMPs necessary in this area? YES NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

INDUSTRIAL ACTIVITY AREA _____:

1. Brief Description:

2. Are any control measures in need of maintenance or repair? YES NO

3. Have any control measures failed and require replacement? YES NO

4. Are any additional/revised BMPs necessary in this area? YES NO

If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)

D. CORRECTIVE ACTIONS

Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.

Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.

1. Corrective Action # _____ of _____ for this reporting period.

2. Is this corrective action:

An update on a corrective action from a previous annual report; or

A new corrective action?

3. Identify the condition(s) triggering the need for this review:

Unauthorized release or discharge

Numeric effluent limitation exceedance

Control measures inadequate to meet applicable water quality standards

Control measures inadequate to meet non-numeric effluent limitations

Control measures not properly operated or maintained

Change in facility operations necessitated change in control measures

Average benchmark value exceedance

Other (describe): _____

4. Briefly describe the nature of the problem identified:

5. Date problem identified:

6. How problem was identified:

Comprehensive site inspection

Quarterly visual assessment

Routine facility inspection

Benchmark monitoring

Notification by EPA or State or local authorities

Other (describe): _____

7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:

8. Did/will this corrective action require modification of your SWPPP? YES NO

9. Date corrective action initiated:

10. Date correction action completed: or expected to be completed:

11. If corrective action not yet completed, provide the status of corrective action at the time of the comprehensive site inspection and describe any remaining steps (including timeframes associated with each step) necessary to complete corrective action:

E. ANNUAL REPORT CERTIFICATION

1. Compliance Certification

Do you certify that your annual inspection has met the requirements of Part 4.2 of the permit, and that, based upon the results of this inspection, to the best of your knowledge, you are in compliance with the permit? YES NO

If NO, summarize why you are not in compliance with the permit:

2. Annual Report Certification

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.

Authorized Representative Printed Name:		Title:	
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Signature:		Date Signed:	
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