

Oahu Attachment E1 – SWPPP Inspection Report Form for Oahu(SWPPP Section 7.2.12) Rev. 1/28/2015

(See Next Page)

SITE-SPECIFIC BEST MANAGEMENT PRACTICE/STORM WATER POLLUTION PREVENTION INSPECTION AND MAINTENANCE REPORT

DATE: _____ PERMIT NO. _____ ☐ INDIVIDUAL NPDES PERMIT PROJECT (RECEIVING STATE WATERS INSPECTIONS REQUIRED)

PROJECT NO.: _____ PROJECT: _____

☐ PRE-CONSTRUCTION VERIFICATION INSPECTION REPORT PHASE: _____ ☐ INDEPENDENT (THIRD-PARTY) INSPECTION

☐ WEEKLY REPORT ☐ EVENT REPORT _____ INCHES OF RAIN FOR THE PAST 24 HOURS (if rain event) ☐ OTHER _____

BMP Measures and Devices Currently Installed on the Project:

LOCATION	ACTIVITY AND TYPE OF BMP MEASURE/DEVICE	ACTION REQUIRED?		NOTES/COMMENTS
		Y	N	

BMP Deficiencies Found and Corrective Actions Taken:

DATE FOUND	LOCATION	ACTIVITY AND TYPE OF BMP MEASURE/DEVICE	DATE CONTRACTOR NOTIFIED	NOTES/COMMENTS	AMENDMENT REQUIRED? (Y/N)	DATE CORRECTED	ACTION TAKEN - NOTES/COMMENTS

Rev 01/28/15

Page 1 of 2

Project No. _____

Date _____

CHECK ALL THAT ARE APPLICABLE:

☐ There is evidence of a discharge.

☐ There is evidence that a polluted discharge is leaving or has left the project site.

☐ The polluted discharge was contained prior to reaching the storm drain system/receiving waters.

NOTE: If any of the boxes above were checked, fill out HDOT Construction Discharge Report.

Included Attachments: ☐ A. Photographs (Required for BMP Deficiencies)

☐ B. Other attachments

Describe:

Comments/Remarks:

I certify that I am the person who performed the inspection documented above and that all information recorded on this form is a true and accurate representation of what was observed at the construction site recorded above.

Inspector Name and Title

Signature

Date

Rev 01/28/15

Page 2 of 2

Project No.

Date