#### SECTION 1: CONTACT INFORMATION/RESPONSIBLE PARTIES

## 1.1 Operator(s) / Subcontractor(s)

#### **Instructions:**

- Identify the operator(s) who will be engaged in construction activities at the site. Indicate respective responsibilities, where appropriate. Also include the 24-hour emergency contact.
- List subcontractors expected to work on-site. Notify subcontractors of stormwater requirements applicable to their work.

# Operator(s):

Insert Company or Organization Name: State of Hawaii, Dept. of Transportation, Highways Division

Insert Name: Steven Yoshida, P.E.

Insert Address: 601 Kamokila Blvd, Rm 602

Insert City, State, Zip Code: Kapolei, HI 96707

Insert Telephone Number: 808-692-7682

Insert Fax/Email: 808-692-7690/Steven. Yoshida@hawaii.gov

Insert area of control (if more than one operator at site):

# **Subcontractor(s):**

Information to be documented prior to the start of construction.

Insert Company or Organization Name: \

Insert Name: \

Insert Address: \

Insert City, State, Zip Code: \

Insert Telephone Number: \

Insert Fax/Email: \

Insert area of control (if more than one operator at site):

## **Emergency 24-Hour Contact:**

Information to be documented prior to the start of construction.

Insert Company or Organization Name:

Insert Name:

Insert Telephone Number:

See Appendix D – Subcontractor Certifications/Agreements

# 1.2 Stormwater Team

#### **Instructions:**

- Identify the staff members (by name or position) that comprise the project's stormwater team as well as their individual responsibilities. At a minimum the stormwater team is comprised of individuals who are responsible for overseeing the development of the SWPPP, any later modifications to it, and for compliance with the requirements in this permit (i.e., installing and maintaining stormwater controls, conducting site inspections, and taking corrective actions where required).
- Each member of the stormwater team must have ready access to either an electronic or paper copy of your SWPPP.

Information to be documented prior to the start of construction.
Insert Role or Responsibility:
Insert Position:
Insert Name:
Insert Telephone Number:
Insert Email:
Information to be documented prior to the start of construction.
Insert Role or Responsibility:
Insert Position:
Insert Name:
Insert Telephone Number:
Insert Email:
Information to be documented prior to the start of construction.
Insert Role or Responsibility:
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