

ATTACHMENT 2

Construction

Contents

BMP

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SWPPP Review Checklist

New Mexico State University
[Storm Water Management Program](#)

Background: This checklist is used by New Mexico State University (NMSU) staff for Storm Water Pollution Prevention Plan (SWPPP) reviews. It is provided as a tool to assure the reviewer(s) that the required elements of a SWPPP are included per the 2012 Construction General Permit (CGP). Use of this checklist will help you to determine if the SWPPP is complete.

Review Information

Project Name:	NMSU Project Manager:
Contractor:	SWPPP Date:
Reviewer Name:	Review Date:

SWPPP Information - does the submitted plan contain the following:

Yes	No	N/A
-----	----	-----

[7.2.1 CGP] A stormwater team identified (by name or position), and each person's responsibilities?

[7.2.2 CGP] A descriptive narrative of the project and storm water components?

[7.2.2 CGP] Size of property (in acres)? Total area expected to be disturbed? Maximum area expected to be disturbed at any one time?

[7.2.3 CGP] Is the earth disturbing activity in response to a public emergency?

[7.2.4 CGP] Are the other operators and their areas of control identified?

[7.2.5 CGP] A sequence of the intended construction activities, including start dates and durations for all activities (installation of stormwater control measures; earth work; work cessation periods; soil stabilization; removal of temporary conveyance measures)? Refer to CGP 7.2.5 for details.

[7.2.6 CGP] Legible site map showing all elements as required by CGP 7.2.6?

[7.2.7 CGP] A list and description of all pollutant-generating activities, and the pollutants associated with each activity?

[7.2.8 CGP] Identification of all sources of allowable non-stormwater discharges listed in Part 1.3.d?

[7.2.9 CGP] Identification of all surface water within 50 feet of the project? If so, the SWPP must comply with all components of Part 2.1.2.1, including a description of the compliance alternative selected.

[2.1.2.2 CGP] Install Perimeter Controls

[2.1.2.3 CGP] Minimize Sediment Track-Out

[2.1.2.4 CGP] Control Discharges from Stockpiled Sediment or Soil

[2.1.2.5 CGP] Minimize Dust

[2.1.2.6 CGP] Minimize the Disturbance of Steep Slopes

[2.1.2.7 CGP] Preserve Topsoil

[2.1.2.8 CGP] Minimize Soil Compaction

[2.1.2.9 CGP] Protect Storm Drain Inlets

[2.1.3.1 CGP] Constructed Stormwater Conveyance Channels (may or may not be applicable)



SWPPP Review Checklist

New Mexico State University
[Storm Water Management Program](#)

SWPPP Information (continued) - does the submitted plan contain the following:

Yes No N/A

[7.2.10.1 CGP] Description of stormwater control measures utilized during construction. Ensure the CGP requirements of sections 2.2 and 9.4.1.4 have been met.

[7.2.11.1 CGP] Spill prevention and response procedures that incorporate the requirements of 2.3?

- [2.3.1 CGP] Prohibited Discharges
- [2.3.2 CGP] General Maintenance Requirements
- [2.3.3 CGP] Pollution Prevention Standards (fueling, maintenance, washing, and storage)
- [2.3.4 CGP] Emergency Spill Notification
- [2.3.5 CGP] Fertilizer Discharge Restrictions

[7.2.11.2 CGP] Waste management procedures?

[7.2.12 CGP] Procedures for Inspection (in accordance with Part 4), maintenance, and corrective actions (in accordance with Part 5), including personnel responsible for inspections, inspection schedule, and any checklists or other forms that will be used?

[7.2.13 CGP] Documentation that the required personnel were trained in accordance with Part 6?

[7.2.14 CGP] Documentation of compliance with other federal requirements (Endangered Species Act; Historic Properties; Safe Drinking Water Act)?

[7.2.15 CGP] Signed and dated certification statement in accordance with Appendix I, Part I.11?

[7.2.15 CGP] Once you are notified of your coverage under this permit, you must include the following documents as part of your SWPPP:

7.2.16.1 A copy of your NOI submitted to EPA along with any correspondence exchanged between you and EPA related to coverage under this permit;

7.2.16.2 A copy of the acknowledgment letter you receive from the NOI Processing Center or eNOI system assigning your permit tracking number;

7.2.16.3 A copy of this permit (an electronic copy easily available to the stormwater team is also acceptable).

[7.4.1 CGP] Is SWPP modification addressed? NOTE – addressing SWPPP modification is not a strict requirement of the SWPPP, however modifying based on conditions described in 7.4.1 is a requirement.



SWPPP Review Checklist

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[Storm Water Management Program](#)

Note any SWPPP deficiencies here (add pages if needed):

SWPPP Approved? YES NO CONDITIONAL (pending correction of above deficiencies)

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SWPPP Review Checklist

New Mexico State University
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Background: This checklist is used by New Mexico State University (NMSU) staff for Storm Water Pollution Prevention Plan (SWPPP) reviews. It is provided as a tool to assure the reviewer(s) that the required elements of a SWPPP are included per the 2012 Construction General Permit (CGP). Use of this checklist will help you to determine if the SWPPP is complete.

Review Information

Project Name: **NMSU Undergraduate Learning Center (ULC)** NMSU Project Manager: **Heidi Frohnapfel**
 Contractor: **Bradbury Stamm Construction** SWPPP Date: **July 24, 2014**
 Reviewer Name: **Jack Kirby** Review Date: **August 26, 2014**

SWPPP Information - does the submitted plan contain the following:

Yes No N/A

- | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [7.2.1 CGP] A stormwater team identified (by name or position), and each person's responsibilities? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [7.2.2 CGP] A descriptive narrative of the project and storm water components? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [7.2.2 CGP] Size of property (in acres)? Total area expected to be disturbed? Maximum area expected to be disturbed at any one time? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | [7.2.3 CGP] Is the earth disturbing activity in response to a public emergency? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | [7.2.4 CGP] Are the other operators and their areas of control identified? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | [7.2.5 CGP] A sequence of the intended construction activities, including start dates and durations for all activities (installation of stormwater control measures; earth work; work cessation periods; soil stabilization; removal of temporary conveyance measures)? Refer to CGP 7.2.5 for details. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [7.2.6 CGP] Legible site map showing all elements as required by CGP 7.2.6? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [7.2.7 CGP] A list and description of all pollutant-generating activities, and the pollutants associated with each activity? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [7.2.8 CGP] Identification of all sources of allowable non-stormwater discharges listed in Part 1.3.d? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | [7.2.9 CGP] Identification of all surface water within 50 feet of the project? If so, the SWPPP must comply with all components of Part 2.1.2.1, including a description of the compliance alternative selected. |
| | | | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [2.1.2.2 CGP] Install Perimeter Controls |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [2.1.2.3 CGP] Minimize Sediment Track-Out |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [2.1.2.4 CGP] Control Discharges from Stockpiled Sediment or Soil |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [2.1.2.5 CGP] Minimize Dust |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [2.1.2.6 CGP] Minimize the Disturbance of Steep Slopes |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [2.1.2.7 CGP] Preserve Topsoil |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | [2.1.2.8 CGP] Minimize Soil Compaction |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | [2.1.2.9 CGP] Protect Storm Drain Inlets |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | [2.1.3.1 CGP] Constructed Stormwater Conveyance Channels (may or may not be applicable) |



SWPPP Review Checklist

New Mexico State University
[Storm Water Management Program](#)

SWPPP Information (continued) - does the submitted plan contain the following:

Yes	No	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[7.2.10.1 CGP] Description of stormwater control measures utilized during construction. Ensure the CGP requirements of sections 2.2 and 9.4.1.4 have been met.

[7.2.11.1 CGP] Spill prevention and response procedures that incorporate the requirements of 2.3?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[2.3.1 CGP] Prohibited Discharges

[2.3.2 CGP] General Maintenance Requirements

[2.3.3 CGP] Pollution Prevention Standards (fueling, maintenance, washing, and storage)

[2.3.4 CGP] Emergency Spill Notification

[2.3.5 CGP] Fertilizer Discharge Restrictions

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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[7.2.11.2 CGP] Waste management procedures?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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[7.2.12 CGP] Procedures for Inspection (in accordance with Part 4), maintenance, and corrective actions (in accordance with Part 5), including personnel responsible for inspections, inspection schedule, and any checklists or other forms that will be used?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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[7.2.13 CGP] Documentation that the required personnel were trained in accordance with Part 6?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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[7.2.14 CGP] Documentation of compliance with other federal requirements (Endangered Species Act; Historic Properties; Safe Drinking Water Act)?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------	--------------------------	--------------------------

[7.2.15 CGP] Signed and dated certification statement in accordance with Appendix I, Part I.11?

[7.2.15 CGP] Once you are notified of your coverage under this permit, you must include the following documents as part of your SWPPP:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------	--------------------------	--------------------------

7.2.16.1 A copy of your NOI submitted to EPA along with any correspondence exchanged between you and EPA related to coverage under this permit;

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------	--------------------------	--------------------------

7.2.16.2 A copy of the acknowledgment letter you receive from the NOI Processing Center or eNOI system assigning your permit tracking number;

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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7.2.16.3 A copy of this permit (an electronic copy easily available to the stormwater team is also acceptable).

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------	--------------------------	--------------------------

[7.4.1 CGP] Is SWPPP modification addressed? NOTE – addressing SWPPP modification is not a strict requirement of the SWPPP, however modifying based on conditions described in 7.4.1 is a requirement.



SWPPP Review Checklist

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Note any SWPPP deficiencies here (add pages if needed):

1.) Per 7.2.5 of the Construction General Permit (see the 6th item on page 1), the sequence and estimated dates of activities are required, however were not included. As addressed in section 1.3, this SWPPP will be updated. Recommendation to NMSU Project Manager: follow through to ensure the revised SWPP is on site once these dates are known.

SWPPP Approved? YES NO CONDITIONAL (pending correction of above deficiencies)

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Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	3/17/14	Start/End Time	9:30
Inspector's Name(s)	Rachel Bustos		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Start Potholing		
Type of Inspection:			
<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____		Temperature: <u>50</u>	
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	Straw wattle	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	To Be installed
2	Sediment Track Out	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	NIA
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

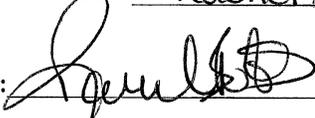
Non-Compliance

Describe any incidents of non-compliance not described above:

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: Rachel Bustos President

Signature:  Date: 3/17/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	3/31	Start/End Time	11:00
Inspector's Name(s)	Rachel		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	24" Water Installation		
Type of Inspection:			
<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds <input type="checkbox"/> Other: _____ Temperature: <u>66</u>			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	wattle	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	exit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sweep College Drive
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sweep College
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

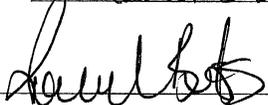
Non-Compliance

Describe any incidents of non-compliance not described above:

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: Rachel Bustos

Signature:  Date: 3/31/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	4/14/14	Start/End Time	2:00
Inspector's Name(s)	Rachel		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Stewart Crossing		
Type of Inspection:			
<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds <input type="checkbox"/> Other: _____ Temperature: _____			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	Wattles	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Sediment tracking	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Keep Street Cleaned until patching on Wednesday
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mountain Steward
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Rachel Bustos President

Signature:  Date: 4/14/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	4/28/14	Start/End Time	7:30
Inspector's Name(s)	Rachel Bostas		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	24" installation		
Type of Inspection:			
<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: 50			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	wattles	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	exit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Rachel Bustos President

Signature:  Date: 4/28/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	5/12/14	Start/End Time	11:30
Inspector's Name(s)	Rachael		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Water Installation Near Well 17		
Type of Inspection:			
<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds <input type="checkbox"/> Other: _____ Temperature: _____			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	Wattles	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Exit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

CERTIFICATION STATEMENT

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Print name and title: Rachel Bustos President

Signature:  Date: 5/12/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	5/22/14	Start/End Time	
Inspector's Name(s)	Rachel		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	No Work On Site		
Type of Inspection:			
<input type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: _____			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Are discharge points and receiving waters free of any sediment deposits?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Rachel Bustos

Signature:  Date: 5/26/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	12/19/14	Start/End Time	7:30
Inspector's Name(s)	Rachel		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Irrigation System		
Type of Inspection:			
<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: 75			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Started Entering/Exiting off College - Maintained
2	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
3	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mountain College Dr.
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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:

Rachel Bustos President

Signature:



Date:

10/9/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	6/23/14	Start/End Time	
Inspector's Name(s)	Rachel		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	No Work on Project		
Type of Inspection:			
<input type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: _____			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

BMP #	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Are discharge points and receiving waters free of any sediment deposits?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Rachel Bustos President

Signature:  Date: 11/23/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	7/2/14	Start/End Time	9:00
Inspector's Name(s)	Rachel Boston		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Water Line Testing		
Type of Inspection:			
<input type="checkbox"/> Regular <input checked="" type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:		Storm Duration (hrs):	Approximate Amount of Precipitation (in):
7/1/14 ~ 4:30			.25
Weather at time of this inspection?			
<input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
Other:		Temperature: 75	
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	Wattles	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	exit	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Rachel Dostas President

Signature:  Date: 7/2/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	7/17	Start/End Time	10:30
Inspector's Name(s)	RACHEL		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	No Work Just Testing		
Type of Inspection:			
<input type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input checked="" type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
7/16/14 8:00		1"	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input checked="" type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: 80			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	Nothing Opened Up	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Everything is backfilled	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Rachel Bustos President

Signature:  Date: 7/17/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	7/31/14	Start/End Time	9:15
Inspector's Name(s)	Raquel Bustos		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Clean up / Ph I Complete		
Type of Inspection:			
<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds <input type="checkbox"/> Other: _____ Temperature: 71			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Raenei Bustos President

Signature:  Date: 7/31/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	8/1/14	Start/End Time	3:15
Inspector's Name(s)	Raenel Bustos		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	No work Wait for CO		
Type of Inspection:			
<input type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
8/1/14		.3"	
Weather at time of this inspection?			
<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: 75			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

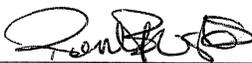
Non-Compliance

Describe any incidents of non-compliance not described above:

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: Rachel Bustos President

Signature:  Date: 8/1/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	8/14/14	Start/End Time	9:15
Inspector's Name(s)	Rachel Bustos		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Curb Replacement		
Type of Inspection:			
<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
8/13 - 8/14		.20"	
Weather at time of this inspection?			
<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: 72°			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	Sweep College	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sweep Street
2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Streets Need to be Sweeeped
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Racnel Bustos President

Signature:  Date: 8/14/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	8/22/14	Start/End Time	4:30
Inspector's Name(s)	Raquel Bostas		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Alt. WL Installation		
Type of Inspection:			
<input type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input checked="" type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
8/21-8/22		.25	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: _____			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	Sweep Sam Steele	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sweep daily
2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sweep
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Raonel Bustos President

Signature:  Date: 8/22/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	9/5	Start/End Time	4:30
Inspector's Name(s)	Rachel Bastos		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	WL Complete - Patching Today		
Type of Inspection:			
<input type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input checked="" type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
9/5		.5	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: 80			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	None - WL	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Complete	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	General Site Cleanup
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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: Racnel Bustos President

Signature:  Date: 9/5/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	9/19	Start/End Time	9:15
Inspector's Name(s)	Raquel Bostas		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Last Tie In @ Well 10		
Type of Inspection:			
<input type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input checked="" type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
9/16-9/19		2.75"	
Weather at time of this inspection?			
<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: 67			
Have any discharges occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	Clean Road	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Clean Site - Not from const tracking but Heavy Rainfall washed out areas.
2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	NIA
4	Are discharge points and receiving waters free of any sediment deposits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	NIA
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	NIA

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

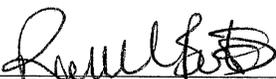
Non-Compliance

Describe any incidents of non-compliance not described above:

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: Ricnel Bustos President

Signature:  Date: 9/19/14

Stormwater Construction Site Inspection Report

General Information			
Project Name	NMSU Well Transmission Line Ph II		
NPDES Tracking No.	NMR12AT04	Location	Jobsite
Date of Inspection	10/31/14	Start/End Time	11:00
Inspector's Name(s)	Raquel Bostas		
Inspector's Title(s)	Project Manager		
Inspector's Contact Information	(575)526-4421		
Inspector's Qualifications	SWPPP Certified		
Describe present phase of construction	Nothing at this time / NMSU WL Break		
Type of Inspection:			
<input type="checkbox"/> Regular <input type="checkbox"/> Pre-storm event <input type="checkbox"/> During storm event <input type="checkbox"/> Post-storm event			
Weather Information			
Has there been a storm event since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, provide:			
Storm Start Date & Time:	Storm Duration (hrs):	Approximate Amount of Precipitation (in):	
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snowing <input type="checkbox"/> High Winds			
<input type="checkbox"/> Other: _____ Temperature: 73			
Have any discharges occurred since the last inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, describe:			
NMSU WL Break flooded area water ran towards Pond			
Are there any discharges at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

Site-specific BMPs

- Number the structural and non-structural BMPs identified in your SWPPP on your site map and list them below (add as many BMPs as necessary). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required BMPs at your site.
- Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.

#	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
1	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Install waddles / Silt Fence @ Pond
2		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	BMP	BMP Installed?	BMP Maintenance Required?	Corrective Action Needed and Notes
14		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Overall Site Issues

Below are some general site issues that should be assessed during inspections. Customize this list as needed for conditions at your site.

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
1	Are all slopes and disturbed areas not actively being worked properly stabilized?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2	Are natural resource areas (e.g., streams, wetlands, mature trees, etc.) protected with barriers or similar BMPs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3	Are perimeter controls and sediment barriers adequately installed (keyed into substrate) and maintained?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
4	Are discharge points and receiving waters free of any sediment deposits?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
5	Are storm drain inlets properly protected?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Is the construction exit preventing sediment from being tracked into the street?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	N/A
7	Is trash/litter from work areas collected and placed in covered dumpsters?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Sweep
8	Are washout facilities (e.g., paint, stucco, concrete) available, clearly marked, and maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A

	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed and Notes
9	Are vehicle and equipment fueling, cleaning, and maintenance areas free of spills, leaks, or any other deleterious material?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10	Are materials that are potential stormwater contaminants stored inside or under cover?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11	Are non-stormwater discharges (e.g., wash water, dewatering) properly controlled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12	(Other)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Non-Compliance

Describe any incidents of non-compliance not described above:

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:

Rachel Bustos President

Signature:



Date:

10/3/14

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8505 Paseo Alameda NE
 Albuquerque, NM 87113
 www.superiorstormwater.com

Storm Water Compliance Inspection Form

Inspection Type: Visual walk

Date: Jan. 22 2015 Time: 9:30
 8:43 am

Permit Tracking #: NMR 12A416

Name: Jeff Garcia

Inspector
 Qualifications:

Current Weather Conditions: Cloudy & snow

Date and Amount of Last Recordable Storm Event: Jan. 22nd 2015 3" snow

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<u>7-16-2014</u>	
Clearing and Grubbing	<u>9-8-2014</u>	
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>Jan 14th 2015</u>	
Final Stabilization	<u>7-16-2014</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?	<input checked="" type="checkbox"/>			
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



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Storm Water Compliance Inspection Form

Inspection Type: *Visual walk*

Date: *Jun 30, 2015* Time: *7:00 A.M*
8:43 am

Permit Tracking #: *WMR 12A716*

Name: *Jeff Garcia*

Inspector
 Qualifications:

Current Weather Conditions: *Cloudy*

Date and Amount of Last Recordable Storm Event: *Jun 30 2015 1/4" Rain*

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<i>7-16-2014</i>	
Clearing and Grubbing	<i>9-8-2014</i>	
Utility Installation	<i>TBD</i>	
Construction of Structure	<i>Jun 14th 2015</i>	
Final Stabilization	<i>7-16-2014</i>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?				
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?	<input checked="" type="checkbox"/>			
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



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Storm Water Compliance Inspection Form

Inspection Type:

Date: 5-5-15 Time: 7:30 AM Permit Tracking #: NM R 120000

Name: TC Inspector: Tim Coughenour
 Qualifications: Trained

Current Weather Conditions: Clear, Sunny

Date and Amount of Last Recordable Storm Event: 4-12-15 1/8"

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation		<u>7/16/14</u>
Clearing and Grubbing	<u>TBD</u>	
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>9/22/14</u>	
Final Stabilization	<u>TBD</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



Corrective Action Log

Location	Corrective Action Needed	Date and Time Noted	Date Completed	Initials
Fence	Fixed Waddies	5-5-15	5-5-15	SG

"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."

Owner: _____
 Name Signature Date

Operator: J. [Signature] _____
 Name Signature Date



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Storm Water Compliance Inspection Form

Inspection Type: . . .

Date: 5/27/15 Time: 7:00 am Permit Tracking #: NMR 120000

Name: TC

Inspector: Tim Coughenour
 Qualifications: Trained

Current Weather Conditions: Clear

Date and Amount of Last Recordable Storm Event: 5/12/15 1/2"

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation		7/16/14
Clearing and Grubbing	TBD	}
Utility Installation	TBD	
Construction of Structure	9/22/14	
Final Stabilization	TBD	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



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Storm Water Compliance Inspection Form

Inspection Type: *Visual walk*

Date: *FEB 19th 15* Time: *9:00 A.M* Permit Tracking #: *NM12 124416*
 8:43 am

Name: *Jeff Garcia* Inspector
 Qualifications:

Current Weather Conditions: *clear*

Date and Amount of Last Recordable Storm Event: *Jan 30th 2014*

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<i>7-16-2014</i>	
Clearing and Grubbing	<i>9-8-2014</i>	
Utility Installation	<i>TBD</i>	
Construction of Structure	<i>Jan 14th 2015</i>	
Final Stabilization	<i>7-16-2014</i>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			<i>sw process of Demo Asphalt and we are going to Rep Rep new Area</i>
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?	<input checked="" type="checkbox"/>			<i>sw process of Relocating wash out</i>
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



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Storm Water Compliance Inspection Form

Inspection Type: . . .

Date: 6-11-15

Time: 10:00 am

Permit Tracking #: NM R 120000

Name: Tim

Inspector: Tim Coughenour
 Qualifications: Trained

Current Weather Conditions: Clear

Date and Amount of Last Recordable Storm Event: 5/12/15 1/2"

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation		<u>7/16/14</u>
Clearing and Grubbing	<u>TBD</u>	}
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>9/22/14</u>	
Final Stabilization	<u>TBD</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



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Storm Water Compliance Inspection Form

Inspection Type: VISUAL / WALK

Date: 9/11/2014 Time: 10 AM Permit Tracking #: NMR12AY16
 8:43 am

Name: HEIDI FROTHWAPPEL Inspector
 Qualifications:

Current Weather Conditions: 70's
CLOUDY

Date and Amount of Last Recordable Storm Event: 9/4, .75" OF RAIN

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<u>7/16/2014</u>	
Clearing and Grubbing	<u>9/8/2014</u>	
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>TBD</u>	
Final Stabilization	<u>7/16/2015</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?	<input checked="" type="checkbox"/>			<u>SOME DIRT ALONG THE DRIVE PAST THE IPP CONSTRUCTION SIGN</u>
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?			<input checked="" type="checkbox"/>	
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		

BMP's:

Question	Yes	No	N/A	Comments
Were all BMP's Inspected?	✓			
Are there any BMP's in need of repair?		✓		
Are current BMP's effective?	✓			
Are additional BMP's needed?	✓			ADDITIONAL WASTES TO BE PLACED AROUND REMAINING SITE (South End)
Were previous corrections made prior to this inspection?		✓		SAND FROM SANDBAGS STILL NEEDED CLEANED UP

SWPPP Information:

Question	Yes	No	N/A	Comments
Is the SWPPP kept on site?	✓			
Was the SWPPP updated at the time of the insp	✓			
Are all certification pages signed?	✓			
Are inspector quals in the SWPPP?			✓	
Is there a copy of the NOI and Ackn letter?	✓			
Is there a delegation letter in the SWPPP?	✓			
Was the last inspection/CAL certified?			✓	

"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."

Owner: Heidi Frohnepfel Heidi Frohnepfel 9/11/2014
Name Signature Date

Operator: Jeff Garcia [Signature] 9-11-2014
Name Signature Date

Additional Comments:

RON TARAZOFF Ron Tarazoff 9-11-2014
NMSU



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 Albuquerque, NM 87113
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Storm Water Compliance Inspection Form

Inspection Type: VISUAL/WALK

Date: 9/5/2015 Time: 9 AM Permit Tracking #: NMR12AT16
 8:43 am

Name: HEIDI FROHNAPFEL Inspector
 Qualifications:

Current Weather Conditions: 66° , cloudy

Date and Amount of Last Recordable Storm Event: .75 RAINFALL NIGHT BEFORE

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<u>7/16/2014</u>	
Clearing and Grubbing	<u>9/8/2014</u>	
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>TBD</u>	
Final Stabilization	<u>7/16/2015</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?			<input checked="" type="checkbox"/>	
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?	<input checked="" type="checkbox"/>			

A SMALL AMOUNT OF SAND IS ON THE NORTH SIDE FROM BROKEN SAND BAG & A SMALL AMOUNT OF SAND IS ON THE SOUTHWEST CORNER. - Please clean SIDEWALK JUST OUTSIDE OF PERIMETER FENCE.

BMP's:

Question	Yes	No	N/A	Comments
Were all BMP's Inspected?	✓			
Are there any BMP's in need of repair?		✓		
Are current BMP's effective?	✓			
Are additional BMP's needed?		✓		
Were previous corrections made prior to this inspection?	✓			

SWPPP Information:

Question	Yes	No	N/A	Comments
Is the SWPPP kept on site?	✓			
Was the SWPPP updated at the time of the insp				It will be once this report is scanned
Are all certification pages signed?	✓			
Are inspector quals in the SWPPP?	✓		✓	
Is there a copy of the NOI and Ackn letter?	✓			
Is there a delegation letter in the SWPPP?	✓			
Was the last inspection/CAL certified?			✓	

"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."

Owner: HEIDI FROHNATTEL Heidi M. Frohnatfel 9/5/15
 Name Signature Date

Operator: _____
 Name Signature Date

Additional Comments:



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 Albuquerque, NM 87113
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Storm Water Compliance Inspection Form

Inspection Type: . . .

Date: 6/25/15 Time: 8:00 Permit Tracking #: NM R 120000

Name: Tim Inspector: Tim Coughenour
 Qualifications: Trained

Current Weather Conditions: Cloudy

Date and Amount of Last Recordable Storm Event: Overnight 1/2"
6/24/15

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation		7/16/14
Clearing and Grubbing	TBD	}
Utility Installation	TBD	
Construction of Structure	9/22/14	
Final Stabilization	TBD	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



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Storm Water Compliance Inspection Form

Inspection Type: VISUAL/WALK

Date: 9/17/2014 Time: 10:30 AM Permit Tracking #: NMR12416
8:43 am

Name: HEIDI FROHNAPFEL Inspector
 Qualifications:

Current Weather Conditions: 73° CLOUDY

Date and Amount of Last Recordable Storm Event: 9/16/14, 1/4"

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<u>7/16/2014</u>	
Clearing and Grubbing	<u>9/8/2014</u>	
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>TBD</u>	
Final Stabilization	<u>7/16/2015</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?			<input checked="" type="checkbox"/>	
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		

BMP's:

Question	Yes	No	N/A	Comments
Were all BMP's Inspected?	✓			
Are there any BMP's in need of repair?		✓		
Are current BMP's effective?	✓			
Are additional BMP's needed?	✓			still unable to be delivered & installed on the south side.
Were previous corrections made prior to this inspection?	✓			

SWPPP Information:

Question	Yes	No	N/A	Comments
Is the SWPPP kept on site?	✓			
Was the SWPPP updated at the time of the insp	✓			
Are all certification pages signed?	✓			
Are inspector quals in the SWPPP?			✓	
Is there a copy of the NOI and Ackn letter?	✓			
Is there a delegation letter in the SWPPP?	✓			
Was the last inspection/CAL certified?		✓		

"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."

Heidi M. Fratzmager
 Owner: Heidi M. Fratzmager Signature [Signature] Date 2/17/2014
 Operator: Tommy Cooper Name [Signature] Signature [Signature] Date 9-17-14

Additional Comments:



8505 Paseo Alameda NE
 Albuquerque, NM 87113
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Storm Water Compliance Inspection Form

Inspection Type: VISUAL / WALK

Date: 9/25/2014 Time: 10AM Permit Tracking #: NMR12AT16

Name: HEIDI FROHNAPFEL Inspector
 Qualifications:

Current Weather Conditions: 80's, sunny

Date and Amount of Last Recordable Storm Event: 9/22 1/2"

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	7/16/2014	
Clearing and Grubbing	9/8/2014	
Utility Installation	TBD	
Construction of Structure	TBD	
Final Stabilization	7/16/2015	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?			<input checked="" type="checkbox"/>	
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		

BMP's:

Question	Yes	No	N/A	Comments
Were all BMP's Inspected?	✓			
Are there any BMP's in need of repair?		✓		
Are current BMP's effective?	✓			
Are additional BMP's needed?	✓			
Were previous corrections made prior to this inspection?		✓		Additional waddle now in needs to be set

SWPPP Information:

Question	Yes	No	N/A	Comments
Is the SWPPP kept on site?	✓			
Was the SWPPP updated at the time of the insp	✓			
Are all certification pages signed?	✓			
Are inspector quals in the SWPPP?			✓	
Is there a copy of the NOI and Ackn letter?	✓			
Is there a delegation letter in the SWPPP?	✓			
Was the last inspection/CAL certified?			✓	

"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."

Owner: HEIDI FROHNAPFER Heidi M. Frohnapfer 9/26/2014
 Name Signature Date

Operator: _____
 Name Signature Date

Additional Comments:



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Storm Water Compliance Inspection Form

Inspection Type: Visual

Date: 9-19-14 Time: 7:00 A.M Permit Tracking #: NMB120000
 8:43 am

Name: _____ Inspector Qualifications: _____

Current Weather Conditions: Partly cloudy 63°

Date and Amount of Last Recordable Storm Event: 9-19-14 7:00 A.M 3/4" Rain

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<u>7-16-14</u>	<u>7-16-14</u>
Clearing and Grubbing	<u>Done</u>	
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>9-22-14</u>	
Final Stabilization	<u>TBD</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



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Storm Water Compliance Inspection Form

Inspection Type:

Date: 9-18-14 Time: 11:00 A.M Permit Tracking #: NMR 120000
 8:43 am

Name: _____ Inspector Qualifications: _____

Current Weather Conditions: Rainy,

Date and Amount of Last Recordable Storm Event: 11:00 A.M 9-18-14 7/8" Rain

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<u>7-16-14</u>	<u>7-16-14</u>
Clearing and Grubbing	<u>Done</u>	
Utility Installation	<u>TBD</u>	<u>TBD</u>
Construction of Structure	<u>9-22-14</u>	
Final Stabilization	<u>TBD</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



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Storm Water Compliance Inspection Form

Inspection Type: Visual walk

Date: 9-23-14 Time: 6:50 AM Permit Tracking #: NMR120000
 8:43 am

Name: _____ Inspector Qualifications: _____

Current Weather Conditions: partly cloudy 68°

Date and Amount of Last Recordable Storm Event: 9-22-14 overnite 1/2" Ra. N

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<u>7-16-14</u>	<u>7-16-14</u>
Clearing and Grubbing	<u>None</u>	
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>9-23-14</u>	
Final Stabilization	<u>TBD</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?	<input checked="" type="checkbox"/>			
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		



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Storm Water Compliance Inspection Form

Inspection Type: VISUAL WALK

Date: 9/19/2014 Time: 8:43 am Permit Tracking #: NMR12AY16

Name: HEIDI FROHNAPFEL Inspector Qualifications:

Current Weather Conditions: 65° cloudy

Date and Amount of Last Recordable Storm Event: 9/18 - 9/19 3/4" RAINFALL

Construction Time Line: 9/17 - 9/18 7/8" RAINFALL

Action	Start Date	Date Complete
Initial BMP Installation	<u>7/16/2014</u>	
Clearing and Grubbing	<u>9/18/2014</u>	
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>TBD</u>	
Final Stabilization	<u>7/16/2015</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?			<input checked="" type="checkbox"/>	
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?			<input checked="" type="checkbox"/>	
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		

BMP's:

Question	Yes	No	N/A	Comments
Were all BMP's Inspected?	✓			
Are there any BMP's in need of repair?		✓		
Are current BMP's effective?	✓			
Are additional BMP's needed?	✓			Waiting on delivery of
Were previous corrections made prior to this inspection?			✓	wattles for South Side

SWPPP Information:

Question	Yes	No	N/A	Comments
Is the SWPPP kept on site?	✓			
Was the SWPPP updated at the time of the insp	✓			
Are all certification pages signed?	✓			
Are inspector quals in the SWPPP?			✓	
Is there a copy of the NOI and Ackn letter?	✓			
Is there a delegation letter in the SWPPP?	✓			
Was the last inspection/CAL certified?			✓	

"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."

Owner: HEIDI FROTHWAPPEL Heidi M Frothwapfel 9/19/2014
Name Signature Date

Operator: JEFF GARCIA [Signature] 9-19-2014
Name Signature Date

Additional Comments:



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Storm Water Compliance Inspection Form

Inspection Type: VISUAL / WALK

Date: 9/30/14 Time: 2:00 PM Permit Tracking #: NMR12AT16

Name: HEIDI FROHNAPFEL Inspector
 Qualifications:

Current Weather Conditions: Sunny 79°F

Date and Amount of Last Recordable Storm Event: 9/22, 1/2"

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	7/16/2014	
Clearing and Grubbing	9/8/2014	
Utility Installation	TBD	
Construction of Structure	TBD	
Final Stabilization	7/16/2015	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?				CONC. WASH-OUT CONTAINER IS NOT WATERPROOF. SIGNS OF SILT SEEPING OUT
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?			<input checked="" type="checkbox"/>	
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			CONCRETE WASH-OUT CONTAINER IS NOT LABELED AS SUCH
Are all concrete and paint washouts properly marked and maintained?		<input checked="" type="checkbox"/>		
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		

BMP's:

Question	Yes	No	N/A	Comments
Were all BMP's Inspected?	✓			
Are there any BMP's in need of repair?		✓		
Are current BMP's effective?	✓			
Are additional BMP's needed?		✓		
Were previous corrections made prior to this inspection?	✓			Additional waddle has been set in place

SWPPP Information:

Question	Yes	No	N/A	Comments
Is the SWPPP kept on site?	✓			
Was the SWPPP updated at the time of the insp	✓			
Are all certification pages signed?	✓			
Are inspector quals in the SWPPP?			✓	
Is there a copy of the NOI and Ackn letter?	✓			
Is there a delegation letter in the SWPPP?	✓			
Was the last inspection/CAL certified?			✓	

"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."

Owner: HEIDI FROHNAPFEL Heidi M. Frohnappfel 9/30/2014
 Name Signature Date

Operator: _____
 Name Signature Date

Additional Comments:

The concrete wash-out container (dumpster) is not leak-proof as required by section 2.5.8 of the SWPPP. Please provide an effective means of eliminating the discharge of water from the washout of concrete (& other materials) — change out container for leak-proof container as required or provide a leak-proof pit.





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Storm Water Compliance Inspection Form

Inspection Type:

Date: 10/20/14 Time: 7:00 am Permit Tracking #: NMR 12AY16
 -8:43 am

Name: Tim Coughenour

Inspector
 Qualifications:

Current Weather Conditions: Cloudy

Date and Amount of Last Recordable Storm Event: 0.5" 9/23/14
0.75" 10/19/14

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	7-16-14	
Clearing and Grubbing	9-8-14	
Utility Installation	FBD	
Construction of Structure	9-22-14	
Final Stabilization	7-16-15	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	✓			
Are there signs of pollutants leaving the site?		✓		
Are all materials stored properly?	✓			
Were all outfalls inspected?	✓			
Are there signs of a recent discharge?	✓			Dirt in gutter
Have all areas disturbed areas not under construction been properly stabilized?	✓			
Is construction trash and other debris managed properly?	✓			
Are all concrete and paint washouts properly marked and maintained?	✓			
Has there been a non storm water discharge?	✗	✓		



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Storm Water Compliance Inspection Form

Inspection Type: VISUAL WALK

Date: 11/20/14 Time: 12:00 PM Permit Tracking #: NMR12AT16

Name: HEIDI FROHNAPFEL Inspector Qualifications:

Current Weather Conditions: Sunny, 70°s

Date and Amount of Last Recordable Storm Event:

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	7/16/2014	
Clearing and Grubbing	9/8/2014	
Utility Installation	TBD	
Construction of Structure	TBD	
Final Stabilization	7/16/2015	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?			<input checked="" type="checkbox"/>	
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?	<input checked="" type="checkbox"/>			
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		

BMP's:

Question	Yes	No	N/A	Comments
Were all BMP's Inspected?	✓			
Are there any BMP's in need of repair?		✓		
Are current BMP's effective?	✓			
Are additional BMP's needed?		✓		
Were previous corrections made prior to this inspection?	✓			

SWPPP Information:

Question	Yes	No	N/A	Comments
Is the SWPPP kept on site?	✓			
Was the SWPPP updated at the time of the insp	✓			
Are all certification pages signed?	✓			
Are inspector quals in the SWPPP?			✓	
Is there a copy of the NOI and Ackn letter?	✓			
Is there a delegation letter in the SWPPP?	✓			
Was the last inspection/CAL certified?			✓	

"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."

Owner: HEIDI FROTHAPFER Heidi Frothapfer 11/20/14
Name Signature Date

Operator: Tim Conghenaw [Signature] 11/20/14
Name Signature Date

Additional Comments:



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Storm Water Compliance Inspection Form

Inspection Type: Visual / walk

Date: 11-3-14 Time: 2:00 P.M Permit Tracking #: NMR 12A 416
 8:43 am

Name: Jeff Garcia Inspector
 Qualifications:

Current Weather Conditions: Cloudy & Rain

Date and Amount of Last Recordable Storm Event: 1/4" Rain 11-3-14

Construction Time Line:

Action	Start Date	Date Complete
Initial BMP Installation	<u>7-16-2014</u>	
Clearing and Grubbing	<u>9-8-2014</u>	
Utility Installation	<u>TBD</u>	
Construction of Structure	<u>TBD</u>	
Final Stabilization	<u>7-16-2014</u>	

Site Walk:

Question	Yes	No	N/A	Comment
Is there a proper posting sign?	<input checked="" type="checkbox"/>			
Are there signs of pollutants leaving the site?		<input checked="" type="checkbox"/>		
Are all materials stored properly?	<input checked="" type="checkbox"/>			
Were all outfalls inspected?	<input checked="" type="checkbox"/>			
Are there signs of a recent discharge?		<input checked="" type="checkbox"/>		
Have all areas disturbed areas not under construction been properly stabilized?	<input checked="" type="checkbox"/>			
Is construction trash and other debris managed properly?	<input checked="" type="checkbox"/>			
Are all concrete and paint washouts properly marked and maintained?	<input checked="" type="checkbox"/>			
Has there been a non storm water discharge?		<input checked="" type="checkbox"/>		

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Tenant Construction Site Inspection Schedule:

- Inspect new construction projects within 30 days of commencement of construction activities.
- Inspect new construction projects monthly for the duration of construction activities.
- Inspect new construction projects as-needed (to be determined by the NMSU SWMP Coordinator) for the duration of construction activities.

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