**DRAFT PHASE II MS4 AUDIT TEMPLATE**

**For permits issued prior to 2019**

***Edit yellow highlighted items to be specific to the MS4 being audited.***

**MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4)**

**PROGRAM AUDIT REPORT**

**NPDES PERMIT NO. NCS000XXX**

CITY, NORTH CAROLINA

Address

**Audit Date: DATE**

**Report Date: DATE**

**North Carolina Department of Environmental Quality**

**Division of Energy, Mineral & Land Resources Stormwater Program**

**512 N. Salisbury Street, 9th floor**

**1612 Mail Service Center**

**Raleigh, NC 27699-1612**

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***DISCLAIMER***

*This audit consists of an evaluation of program compliance with the issued permit and implementation of the approved Stormwater Management Plan. This audit report does not include a review of all program components, and program deficiencies in addition to those noted may be present. The permittee is required to assess program progress and permit compliance, and to implement the approved Stormwater Management Plan in accordance with the issued permit.*

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| Audit Details | |
| **Audit ID Number:**  **NCS000XXX\_City MS4 Audit\_2019MODAY** | **Audit Date(s):** |
| **Minimum Control Measures Evaluated:**  Program Implementation, Documentation & Assessment  Public Education & Outreach  Public Involvement & Participation  Illicit Discharge Detection & Elimination  Construction Site Runoff Controls – No delegated Sediment and Erosion Control Program  Construction Site Runoff Controls – Delegated Sediment and Erosion Control Program  Post-Construction Site Runoff Controls  Pollution Prevention and Good Housekeeping for Municipal Operations  Total Maximum Daily Loads (TMDLs)  **Field Site Visits:**  Municipal Facilities. Number visited: Choose an item.  MS4 Outfalls. Number visited: Choose an item.  Construction Sites. Number visited: Choose an item.  Post-Construction Stormwater Runoff Controls. Number visited: Choose an item.  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Number visited: Choose an item.  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Number visited: Choose an item. | |
| **Inspector(s) Conducting Audit** | |
| **Name, Title** | **Organization** |
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| **Audit Report Author:**  *Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | **Date:** |
| **Audit Report Author:**  *Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | **Date** |

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| Permittee Information | | | | |
| **MS4 Permittee Name:** | | **Permit Effective Date:** | | **Permit Expiration Date:** |
| **City, State, ZIP:** | | **Date of Last MS4 Inspection/Audit:** | | |
| **Co-permittee(s), if applicable:** | | | | |
| **Permit Owner of Record:** | | | | |
| **Primary MS4 Representatives Participating in Audit** | | | | |
| **Name, Title** | **Organization** | | | |
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| **MS4 Receiving Waters** | | | | |
| **Waterbody** | **Classification** | | **Impairments** | |
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| Supporting Documents | | |
| **Item Number** | **Document Title** | **When Provided**  **(Prior to/During/After)** |
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| Program Implementation, Documentation & Assessment | | | |
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| **Staff Interviewed:**  **(Name, Title, Role)** |  | | |
| **Permit Citation** | **Program Requirement** | **Status** | **Supporting Doc No.** |
| **II.A.1**  **Staffing and Funding** | The permittee maintained adequate funding and staffing to implement and manage the provisions of the Stormwater Plan and meet all requirements of the permit. | Choose an item. | **---** |
| The Stormwater Plan identifies a specific position(s) responsible for the overall coordination, implementation, and revision to the Plan. | Choose an item. | **---** |
| Responsibilities for all components of the Stormwater Plan are documented and position(s) assignments provided. | Choose an item. | **---** |
| The permittee is current on payment of invoiced administering and compliance monitoring fees (*see stormwater e-payments on* [*DEMLR MS4 web page*](https://deq.nc.gov/about/divisions/energy-mineral-land-resources/energy-mineral-land-permits/stormwater-program/stormwater-epayments)). | Choose an item. | **---** |
| ***Comments (Briefly describe funding mechanism, number of staff, etc.)*** | | | |
| **II.A.2 Stormwater Plan Implementation and Evaluation** | The permittee evaluated the performance and effectiveness of the program components at least annually. | Choose an item. | **---** |
| If yes, the permittee used the results of the evaluation to modify the program components as necessary to accomplish the intent of the Stormwater Program. | Choose an item. | **---** |
| Did the permitted MS4 discharges cause or contribute to non-attainment of an applicable water quality standard? | Choose an item. | **---** |
| If yes, did the permittee expand or better tailor its BMPs accordingly to address the non-attainment? | Choose an item. | **---** |
| ***Comments*** | | | |
|  | | | |
| **II.A.3**  **Keeping the Stormwater Plan Up to Date** | The permittee kept the Stormwater Plan up to date. | Choose an item. | **---** |
| The permittee notified DEMLR of any updates to the Stormwater Plan. | Choose an item. | **---** |
| ***Comments (Indicate the date of latest Stormwater Plan and describe the nature of any updates, if applicable).*** | | | |
| **II.A.4 Availability of the Stormwater Plan** | The permittee kept an up-to-date version of its Stormwater Plan available to the Division and the public online. | Choose an item. | **---** |
| The online materials included ordinances, or other regulatory mechanisms, or a list identifying the ordinances, or other regulatory mechanisms, providing the legal authority necessary to implement and enforce the requirements of the permit. | Choose an item. | **---** |
| ***Comments (Note what materials are available on line)*** | | | |
| **II.A.3 & II.A.5 Stormwater Plan Modifications** | Did DEMLR require a modification to the Stormwater Plan? | Choose an item. | **---** |
| If yes, did the permittee complete the modifications in accordance with the established deadline? | Choose an item. | **---** |
| ***Comments (Note date of DEMLR notification, modifications required, and date modifications were completed, as applicable)*** | | | |
| **II.A.6 Sharing Responsibility** | Are any control measures implemented by an entity other than the permittee? | Choose an item. | **---** |
| If yes, is there a written agreement in place? | Choose an item. | **---** |
| ***Comments (List the specific control measures implemented by others that do not have adequate written agreements, if applicable)*** | | | |
| **II.A.7**  **Written Procedures** | The permittee maintained written procedures for implementing the six minimum control measures. | Choose an item. | **---** |
| Written procedures identified specific action steps, schedules, resources and responsibilities for implementing the six minimum measures. | Choose an item. | **---** |
| ***Comments (List the specific minimum measures that do not have adequate written procedures, if applicable)*** | | | |
| **III. A**  **Program Documentation** | The permittee maintained documentation of all program components including, but not limited to, inspections, maintenance activities, educational programs, implementation of BMPs, enforcement actions etc., on file for a period of five years. | Choose an item. | **---** |
| ***Comments (List the specific program components that do not have adequate documentation on file and why, if applicable)*** | | | |
| **III.B**  **Annual Report Submittal** | The permittee submitted annual reports to the Department within twelve months from the effective date of the permit (*See Section III.B. for the annual reporting period specific to this MS4*). | Choose an item. | **---** |
| The permittee submitted subsequent annual reports every twelve months from the scheduled date of the first annual report submittal. | Choose an item. | **---** |
| The Annual Reports included appropriate information to accurately describe the progress, status, and results of the permittee’s Stormwater Plan, including, but not limited the following: | | |
| 1. A detailed description of the status of implementation of the Stormwater Plan as a whole. This will include information on development and implementation of each major component of the Stormwater Plan for the past year and schedules and plans for the year following each report. | Choose an item. | **---** |
| 1. An adequate description and justification of any proposed changes to the Stormwater Plan. This will include descriptions and supporting information for the proposed changes and how these changes will impact the Stormwater Plan (results, effectiveness, implementation schedule, etc.). | Choose an item. | **---** |
| 1. Documentation of any necessary changes to programs or practices for assessment of management measures implemented through the Stormwater Plan. | Choose an item. | **---** |
| 1. A summary of data accumulated as part of the Stormwater Plan throughout the year along with an assessment of what the data indicates in light of the Stormwater Plan. | Choose an item. | **---** |
| 1. An assessment of compliance with the permit, information on the establishment of appropriate legal authorities, inspections, and enforcement actions. | Choose an item. | **---** |
| ***Comments (Note dates that annual reports cover under current permit and generally describe report deficiencies, if any)*** | | | |
| **IV.B**  **Annual Reporting** | The Annual Reports document the following: | | |
| 1. A summary of past year activities, including where applicable, specific quantities achieved and summaries of enforcement actions. | Choose an item. | **---** |
| 1. A description of the effectiveness of each program component. | Choose an item. | **---** |
| 1. Planned activities and changes for the next reporting period, for each program component or activity. | Choose an item. | **---** |
| 1. Fiscal analysis. | Choose an item. | **---** |
| ***Comments (Note dates that annual reports cover under current permit and generally describe report deficiencies, if any)*** | | | |

| Public Education and Outreach | | | |
| --- | --- | --- | --- |
| **Staff Interviewed:**  **(Name, Title, Role)** |  | | |
| **Permit Citation** | **Program Requirement** | **Status** | **Supporting Doc No.** |
| **II.B.2.a**  **Goals and Objectives** | The permittee defined goals and objectives of the Local Public Education and Outreach Program based on community wide issues. | Choose an item. | **---** |
| ***Comments (Generally describe process for establishing goals/objectives)*** | | | |
| **II.B.2.b**  **Target Pollutants** | The permittee maintained a description of the target pollutants and/or stressors and likely sources. | Choose an item. | **---** |
| ***Comments (List target pollutants, note any that are missing or not appropriate)*** | | | |
| **II.B.2.c**  **Target Audiences** | The permittee identified, assessed annually and updated the description of the target audiences likely to have significant storm water impacts and why they were selected. | Choose an item. | **---** |
| ***Comments (Describe any changes made, if applicable)*** | | | |
| **II.B.2.d Residential and Industrial/**  **Commercial Issues** | The permittee described issues, such as pollutants, the likely sources of those pollutants, potential impacts, and the physical attributes of stormwater runoff in their education/outreach program. | Choose an item. | **---** |
| ***Comments (Generally describe the residential/industrial/commercial issues addressed)*** | | | |
| **II.B.2.e Informational Web Site** | The permittee promoted and maintained an internet web site designed to convey the program’s message. | Choose an item. | **---** |
| ***Comments (list web page address and general contents, or attach screen shot of landing page)*** | | | |
| **II.B.2.f**  **Public Education Materials** | The permittee distributed stormwater educational material to appropriate target groups. | Choose an item. | **---** |
| ***Comments (List distributed materials and quantity, message, distribution mechanism, target audience for each if not included in program documentation/annual reporting)*** | | | |
| **II.B.2.g Hotline/Help Line** | The permittee promoted and maintained a stormwater hotline/helpline for the purpose of public education and outreach. | Choose an item. | **---** |
| ***Comments (Note hotline contact information and method(s) for advertising it)*** | | | |
| **II.B.2.h**  **Public Education and Outreach Program** | The permittee’s outreach program, including those elements implemented locally or through a cooperative agreement, included a combination of approaches designed to reach the target audiences. | Choose an item. | **---** |
| For each media, event or activity, including those elements implemented locally or through a cooperative agreement the permittee estimated and recorded the extent of exposure. | Choose an item. | **---** |
| ***Comments (Generally describe approaches, extent of exposure. Note any cooperating entities, agreements and scope of services, or reference comments in Section II.A.6. above.)*** | | | |
| **Additional Comments:** |  | | |

| Public Involvement and Participation | | | |
| --- | --- | --- | --- |
| **Staff Interviewed: (Name, Title, Role)** |  | | |
| **Permit Citation** | **Program Requirement** | **Status** | **Supporting Doc No.** |
| **II.C.2.a Volunteer Community Involvement Program** | The permittee included and promoted volunteer opportunities designed to promote ongoing citizen participation. | Choose an item. | **---** |
| ***Comments (Note opportunities promoted and date(s) of volunteer events)*** | | | |
| **II.C.2.b Mechanism for Public Involvement** | The permittee provided and promoted a mechanism for public involvement that provides for input on stormwater issues and the stormwater program. | Choose an item. | **---** |
| ***Comments (Note mechanism(s) for input and how promoted)*** | | | |
| **II.C.2.c Hotline/Help Line** | The permittee promoted and maintained a hotline/helpline for the purpose of public involvement and participation. | Choose an item. | **---** |
| ***Comments (Note hotline contact information and how it is promoted)*** | | | |
| **Additional Comments:** |  | | |

| Illicit Discharge Detection and Elimination (IDDE) | | | |
| --- | --- | --- | --- |
| **Staff Interviewed: (Name, Title, Role)** |  | | |
| **Permit Citation** | **Program Requirement** | **Status** | **Supporting Doc No.** |
| **II.D.2.a**  **IDDE Program** | The permittee maintained a written IDDE Program. | Choose an item. | **---** |
| If yes, the written program includes provisions for program assessment and evaluation and integrating program. | Choose an item. | **---** |
| ***Comments (Note any deficiencies)*** | | | |
| **II.D.2.b**  **Legal Authorities** | The permittee maintained an IDDE ordinance or other regulatory mechanism(s) that provides the legal authority to prohibit illicit connections and discharges to the MS4. | Choose an item. | **---** |
| If yes, the ordinance applies throughout the corporate limits of the permittee. *[Permit Part I.D]* | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.D.2.c**  **Storm Sewer System Map** | The permittee maintained a current map showing major outfalls**\*** and receiving streams. | Choose an item. | **---** |
| ***Comments***  ***\*Major outfalls are discharges from > 36” diameter pipes or drainage areas of > 50 acres. In areas zoned for industrial activity, major outfalls are > 12” or drainage area > 2 acres.*** | | | |
| **II.D.2.d**  **Dry Weather Flow Program** | The permittee maintained a program for conducting dry weather flow field observations in accordance with written procedures. | Choose an item. | **---** |
| ***Comments (Generally summarize program, including frequency of observations and # or % of outfalls screened)*** | | | |
| **II.D.2.e Investigation Procedures** | The permittee maintained written procedures for conducting investigations of identified illicit discharges. | Choose an item. | **---** |
| ***Comments (Generally describe what procedures are documented)*** | | | |
| **II.D.2.f**  **Track and Document Investigations** | For each case of an illicit discharge or potential illicit discharge, the permittee documented and tracked the following: | | |
| 1. The date(s) the illicit discharge was observed | Choose an item. | **---** |
| 1. The results of the investigation | Choose an item. | **---** |
| 1. Any follow-up of the investigation | Choose an item. | **---** |
| 1. The date the investigation was closed | Choose an item. | **---** |
| ***Comments (Note whether a standard inspection form is utilized to capture consistent information and a tracking mechanism is used)*** | | | |
| **II.D.2.g Employee Training** | The permittee implemented and documented a training program for appropriate municipal staff who, as part of their normal job responsibilities, may come into contact with or otherwise observe an illicit discharge or illicit connection. | Choose an item. | **---** |
| ***Comments (Generally describe the staff training program, including frequency and which staff are trained)*** | | | |
| **II.D.2.h**  **Public Education** | The permittee informed public employees of hazards associated with illegal discharges and improper disposal of waste. | Choose an item. | **---** |
| The permittee informed businesses of hazards associated with illegal discharges and improper disposal of waste. | Choose an item. | **---** |
| The permittee informed the general public of hazards associated with illegal discharges and improper disposal of waste. | Choose an item. | **---** |
| ***Comments (Note how each sector was informed, if applicable)*** | | | |
| **II.D.2.i**  **Public Reporting Mechanism** | The permittee promoted, publicized, and facilitated a reporting mechanism for the public to report illicit discharges. | Choose an item. | **---** |
| The permittee promoted, publicized, and facilitated a reporting mechanism for staff to report illicit discharges. | Choose an item. | **---** |
| The permittee established and implemented response procedures for citizen requests/reports. | Choose an item. | **---** |
| ***Comments (Generally describe reporting mechanisms and how promoted/publicized/facilitated/established)*** | | | |
| **II.D.2.j Enforcement** | The permittee implemented a mechanism to track the issuance of notices of violation and enforcement actions administered by the permittee. | Choose an item. | **---** |
| If yes, the mechanism includes the ability to identify chronic violators for initiation of actions to reduce noncompliance. | Choose an item. | **---** |
| ***Comments (Generally describe the established tracking mechanism, if applicable)*** | | | |

| Construction Site Runoff Controls | | | | |
| --- | --- | --- | --- | --- |
| **Staff Interviewed: (Name, Title, Role)** |  | | | |
| **Program Delegation Status:**  **The permittee has a delegated Sediment and Erosion Control Program and implements the** North Carolina Sedimentation Pollution Control Act (SPCA) of 1973 **components of this minimum measure (*complete the permit citation and SPCA citation sections*).**  **The permittee does not have a delegated Sediment and Erosion Control Program and relies on DEMLR to comply with the** North Carolina Sedimentation Pollution Control Act (SPCA) of 1973 **components of this minimum measure (*complete only the permit citation section*).** | | | | |
| **Permit Citation** | **Program Requirement** | **Status** | | **Supporting Doc No.** |
| **II.E.3 Construction Site Runoff Controls**  ***[NPDES Permit No. NCS000435]*** | The permittee provides and promotes a means for the public to notify the appropriate authorities of observed erosion and sedimentation problems (e.g., promoting the existence of the DEQ DEMLR “Stop Mud” hotline). | Choose an item. | **---** | |
| ***Comments (Describe how provided and promoted)*** | | | | |
| **SPCA Citation** | **Delegated Program Requirement** | **Status** | **Supporting Doc No.** | |
| **§ 113A-60 Local erosion and sedimentation control programs (a)** | The permittee has adopted an ordinance or other regulatory mechanism to enforce the erosion and sedimentation control program. | Choose an item. | **---** | |
| If yes, the ordinance meets or exceeds the minimum requirements of the SPCA. | Choose an item. | **---** | |
| If yes, the ordinance applies throughout the corporate limits of the permittee. *[Permit Part I.D]* | Choose an item. | **---** | |
| ***Comments (Provide regulatory mechanism reference or Supporting Documentation number)*** | | | | |
| **§ 113A-60 Local erosion and sedimentation control programs (d)** | The permittee collects a fee paid by each person who submits an erosion and sedimentation control plan. | Choose an item. | **---** | |
| ***Comments (indicate the fee amount, if applicable)*** | | | | |
| **§ 113A-60 Local erosion and sedimentation control programs (e)** | Has any person initiated a land-disturbing activity (within the permittee’s jurisdiction) for which an erosion and sedimentation control plan is required in the absence of an approved plan? | Choose an item. | **---** | |
| If yes, the permittee has notified the North Carolina Sedimentation Control Commission of all such cases. | Choose an item. | **---** | |
| Has the permittee determined that a person engaged in a land-disturbing activity has failed to comply with an approved erosion and sedimentation control plan? | Choose an item. | **---** | |
| If yes, has the permittee referred any such matters to the North Carolina Sedimentation Control Commission for inspection and enforcement? | Choose an item. | **---** | |
| ***Comments*** | | | | |
| **§ 113A-61 Local approval of erosion and sedimentation control plans** | The permittee reviews each erosion and sedimentation control plan submitted to them and notifies the person submitting the plan that it has been approved, approved with modification, or disapproved within 30 days of receipt. | Choose an item. | **---** | |
| The permittee only approves an erosion and sedimentation control plan upon determining that it complies with all applicable State and local regulations. | Choose an item. | **---** | |
| The permittee has disapproved of an erosion and sedimentation control plan in order to protect riparian buffers along surface waters. | Choose an item. | **---** | |
| If yes, the permittee notified the Director of the Division of Energy, Mineral, and Land Resources within 10 days of the disapproval. | Choose an item. | **---** | |
| ***Comments*** | | | | |
| **§ 113A-61.1 Inspection of land-disturbing activity; notice of violation (a)** | The certificate of approval of each erosion and sedimentation control plan approved by the permittee includes a notice of the right to inspect. | Choose an item. | **---** | |
| The permittee provides for inspection of land-disturbing activities to ensure compliance with the SPCA and to determine whether the measures required in an erosion and sedimentation control plan are effective. | Choose an item. | **---** | |
| ***Comments***  . | | | | |
| **§ 113A-61.1 Inspection of land-disturbing activity; notice of violation (c)** | When the permittee determines that a person engaged in land-disturbing activity has failed to comply with the SPCA, the Permittee immediately issues a notice of violation upon that person. | Choose an item. | **---** | |
| Each notice of violation issued by the permittee specifies the date by which the person must comply. | Choose an item. | **---** | |
| Each notice of violation issued by the permittee informs the person of the actions that need to be taken to comply. | Choose an item. | **---** | |
| ***Comments*** | | | | |
| **§ 113A-64 Penalties** | Does the permittee issue civil penalties as part of the erosion and sedimentation program? | Choose an item. | **---** | |
| ***Comments (indicate when/why a civil penalty is issued, and the amount, if applicable)*** | | | | |

| Post-Construction Site Runoff Controls | | | |
| --- | --- | --- | --- |
| **Staff Interviewed: (Name, Title, Role)** |  | | |
| **Implementation (check all that apply):**  The permittee implements the components of this minimum measure.  The permittee relies upon another entity to implement the components of this minimum measure: name of entity  The permittee implements the following deemed-compliant program(s), which meet NPDES MS4 post-construction requirements for the areas where implemented and in compliance with the specific program requirements as provided in 15A NCAC and noted below (*Complete Session Law 2006-246* *section* *below*):  Water Supply Watershed I (WS-I) – 15A NCAC 2B .0212  Water Supply Watershed II (WS-II) – 15A NCAC 2B .0214  Water Supply Watershed III (WS-III) – 15A NCAC 2B .0215  Water Supply Watershed IV (WS-IV) – 15A NCAC 2B .0216  Freshwater High Quality Waters (HQW) – 15A NCAC 2H .1006  Freshwater Outstanding Resource Waters (ORW) – 15A NCAC 2H .1007  Neuse River Basin Nutrient Sensitive (NSW) Management Strategy – 15A NCAC 2B .0235  Tar-Pamlico River Basin Nutrient Sensitive (NSW) Management Strategy – 15A NCAC 2B .0258  Randleman Lake Water Supply Watershed Nutrient Management Strategy – 15A NCAC 2B .0251  Universal Stormwater Management Program – 15A NCAC 2H .1020  **Ordinance(s) (check all that apply):**  The permittee utilizes the following ordinances and/or regulatory authority to fulfill post construction minimum measure program requirements throughout the MS4 permitted area (check all that apply):  DEQ model ordinance  MS4 designed post-construction practices that meet or exceed 15A NCAC 02H .1000.  DEQ approved comprehensive watershed plan  DEQ approved ordinance for a deemed-compliant Program (see list above)  **Instructions:**  *For MS4s not implementing a S.L. 2006-246 deemed-compliant program, complete only the Permit Citation section below.*  *For MS4s implementing a S.L. 2006-246 deemed-compliant program, complete the Session Law 2006-246 section below. If the MS4 does not implement a deemed-compliant program throughout the entire MS4 permitted area, then complete the Permit Citation section below for the permitted area(s) not covered under the S.L. 2006-246 deemed-compliant program.* | | | |
| **Session Law 2006-246** | **Program Requirement** | **Status** | **Supporting Doc No.** |
| **Deemed-Compliant Program(s)** | The permittee implements deemed-compliant Program requirements in accordance with the applicable 15A NCAC rules. | Choose an item. | **---** |
| The permittee implements deemed-compliant Program requirements throughout the entire MS4 area (*If not, also complete the Permit Citation section below.*) | Choose an item. | **---** |
| The permittee applies deemed-compliant Program requirements to all federal, state and local government projects within the permitted MS4 area who do not have their own NPDES stormwater permit. | Choose an item. | **---** |
| The permittee included deemed-compliant Program reporting in their MS4 Annual Reports. |  |  |
| The permittee included deemed-compliant Program implementation in their Stormwater Management Plan. | Choose an item. | **---** |
| ***Comments*** | | | |
| **Permit Citation** | **Program Requirement** | **Status** | **Supporting Doc No.** |
| **II.F.2.a**  **Legal Authority** | The permittee maintained an ordinance or other regulatory mechanism designed to meet the objectives of the Post-Construction Site Runoff Controls Stormwater Management Program. | Choose an item. | **---** |
| If yes, the ordinance applies throughout the corporate limits of the permittee (*Verify permit coverage area listed in Part I.D of permit and modify accordingly).* | Choose an item. | **---** |
| The permittee has the authority to review designs and proposals for new development and redevelopment to determine whether adequate stormwater control measures will be installed, implemented, and maintained. | Choose an item. | **---** |
| The permittee has the authority to request information such as stormwater plans, inspection reports, monitoring results, and other information deemed necessary to evaluate compliance with the Post-Construction Stormwater Management Program. | Choose an item. | **---** |
| The permittee has the authority to enter private property for the purpose of inspecting at reasonable times any facilities, equipment, practices, or operations related to stormwater discharges. | Choose an item. | **---** |
| ***Comments (If the permittee relies upon another entity, specifically note the legal authority that allows that entity to implement the program within the MS4 area)*** | | | |
| **II.F.2.b**  **Stormwater Control Measures (SCMs)** | The permittee utilizes strategies which include SCMs appropriate for the MS4. | Choose an item. | **---** |
| SCMs comply with 15A NCAC 02H .1000. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.F.2.c**  **Plan Reviews** | The permittee conducted site plan reviews of all new development and redeveloped sites that disturb greater than or equal to one acre (including sites that disturb less than one acre that are part of a larger common plan of development or sale). | Choose an item. | **---** |
| If yes, the site plan reviews addressed how the project applicant meets the performance standards. | Choose an item. | **---** |
| If yes, the site plan reviews addressed how the project will ensure long-term maintenance. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.F.2.d**  **Inventory of Projects** | The permittee maintained an inventory of projects with post-construction structural stormwater control measures installed and implemented at new development and redeveloped sites. | Choose an item. | **---** |
| The inventory included both public and private sector sites located within the permittee’s corporate limits that are covered by its post-construction ordinance requirements. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.F.2.e**  **Deed Restrictions and Protective Covenants** | The permittee provided mechanisms such as recorded deed restrictions and protective covenants that ensure development activities will maintain the project consistent with approved plans. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.F.2.f**  **Mechanism to Require Long-term Operation and Maintenance** | The permittee implemented or required an operation and maintenance plan for the long-term operation of the SCMs required by the program. | Choose an item. | **---** |
| The operation and maintenance plan required the owner of each SCM to perform and maintain a record of annual inspections of each SCM. | Choose an item. | **---** |
| Annual inspection of permitted structural SCMs are required to be performed by a qualified professional. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.F.2.g**  **Inspections of Structural Stormwater Control Measures** | The permittee conducted and documented inspections of each project site covered under performance standards, at least one time during the permit term (*Verify this is a permit condition in Part II.F.2.g of permit and modify accordingly).* | Choose an item. | **---** |
| Before issuing a certificate of occupancy or temporary certificate of occupancy, the permittee conducted a post-construction inspection to verify that the permittee’s performance standards have been met or a bond is in place to guarantee completion(*Verify this is a permit condition in Part II.F.2.g of permit and modify accordingly*. | Choose an item. | **---** |
| The permittee developed and implemented a written inspection program for SCMs installed pursuant to the post-construction program(*Verify this is a permit condition in Part II.F.2.g of permit and modify accordingly*. | Choose an item. | **---** |
| The permittee documented and maintained records of inspections. | Choose an item. | **---** |
| The permittee documented and maintained records of enforcement actions. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.F.2.h**  **Educational Materials and Training for Developers** | The permittee made available through paper or electronic means, ordinances, post-construction requirements, design standards checklists, and other materials appropriate for developers.  *Note: New materials may be developed by the permittee, or the permittee may use materials adopted from other programs and adapted to the permittee’s new development and redevelopment program.* | Choose an item. | **---** |
| ***Comments (If the permittee has adopted materials from other programs, indicate here which materials they are using)*** | | | |
| **II.F.2.i Enforcement** | The permittee tracked the issuance of notices of violation and enforcement actions. | Choose an item. | **---** |
| If yes, the tracking mechanism included the ability to identify chronic violators for initiation of actions to reduce noncompliance. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.F.3.b**  **New Development** | The permittee fully complies with post construction program requirements on its own publicly funded construction projects. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.F.3.c**  **Nutrient Sensitive Waters** | Does the MS4 have areas draining to Nutrient Sensitive Waters (NSW) pursuant to 15A NCAC 02H .0150? | Choose an item. | **---** |
| If yes, does the permittee use SCMs that reduce nutrient loading in order to meet local program requirements. | Choose an item. | **---** |
| If yes, does the permittee also still incorporate the stormwater controls required for the project's density level. | Choose an item. | **---** |
| If yes, does the permittee also require documentation where it is not feasible to use SCMs that reduce nutrient loading. | Choose an item. | **---** |
| ***Comments (Provide reference for local requirements)*** | | | |
| **II.F.3.d**  **Design Volume** | The permittee ensured that the design volumes of SCMs take into account the runoff at build out from all surfaces draining to the system. | Choose an item. | **---** |
| Where “streets” convey stormwater, the permittee designed SCMs to be sized to treat and control stormwater runoff from all surfaces draining to the SCM including streets, driveways, and other impervious surfaces. | Choose an item. | **---** |
| ***Comments*** | | | |

| Pollution Prevention and Good Housekeeping for Municipal Operations | | | |
| --- | --- | --- | --- |
| **Staff Interviewed: (Name, Title, Role)** |  | | |
| **Permit Citation** | **Program Requirement** | **Status** | **Supporting Doc No.** |
| **II.G.2.a**  **Facility Inventory** | The permittee maintained a current inventory of facilities and operations owned and operated by the permittee with the potential for generating polluted stormwater runoff. | Choose an item. | **---** |
| ***Comments (Note number of facilities, typical inventory data and any facilities that are not inventoried that should be)*** | | | |
| **II.G.2.b**  **Operation and Maintenance (O&M) for Facilities** | The permittee maintained and implemented an O&M program for municipally owned and operated facilities with the potential for generating polluted stormwater runoff. | Choose an item. | **---** |
| If yes, the O&M program specifies the frequency of inspections. | Choose an item. | **---** |
| If yes, the O&M program specifies the frequency of routine maintenance requirements. | Choose an item. | **---** |
| If yes, the permittee evaluated the O&M program annually and updated it as necessary. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.G.2.c**  **Spill Response Procedures** | The permittee had written spill response procedures for municipal operations. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.G.2.d Streets, Roads, and Public Parking Lots Maintenance** | The permittee evaluated existing and new BMPs that reduce polluted stormwater runoff from municipally-owned streets, roads, and public parking lots within its corporate limits annually. | Choose an item. | **---** |
| If yes, the permittee evaluated the effectiveness of existing and new BMPs based on cost and the estimated quantity of pollutants removed. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.G.2.f**  **O&M for Catch Basins and Conveyance Systems** | The permittee maintained and implemented an O&M program for the stormwater sewer system including catch basins and conveyance systems that it owns and maintains. | Choose an item. | **---** |
| ***Comments (Briefly describe O&M program)*** | | | |
| **II.G.2.g**  **Structural Stormwater Controls** | The permittee maintained a current inventory of municipally-owned or operated structural stormwater controls installed for compliance with the permittee’s post-construction ordinance. | Choose an item. | **---** |
| ***Comments (Describe inventory information and number of controls in inventory)*** | | | |
| **II.G.2.h**  **O&M for Structural Stormwater Controls** | The permittee maintained and implemented an O&M program for municipally-owned or maintained structural stormwater controls installed for compliance with the permittee’s post-construction ordinance. If yes, then: | Choose an item. | **---** |
| The O&M program specified the frequency of inspections and routine maintenance requirements. | Choose an item. | **---** |
| The permittee documented inspections of all municipally-owned or maintained structural stormwater controls. | Choose an item. | **---** |
| The permittee inspected all municipally-owned or maintained structural stormwater controls in accordance with the schedule developed by permittee. | Choose an item. | **---** |
| The permittee maintained all municipally-owned or maintained structural stormwater controls in accordance with the schedule developed by permittee. | Choose an item. | **---** |
| The permittee documented maintenance of all municipally-owned or maintained structural stormwater controls. | Choose an item. | **---** |
| ***Comments***  . | | | |
| **II.G.2.i**  **Pesticide, Herbicide and Fertilizer Application Management** | The permittee ensured municipal employees are properly trained in pesticide, herbicide and fertilizer application management. | Choose an item. | **---** |
| The permittee ensured contractors are properly trained in pesticide, herbicide and fertilizer application management. | Choose an item. | **---** |
| The permittee ensured all permits, certifications, and other measures for applicators are followed. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.G.2.j**  **Staff Training** | The permittee implemented an employee training program for employees involved in implementing pollution prevention and good housekeeping practices. | Choose an item. | **---** |
| **Comments** | | | |
| **II.G.2.k**  **Vehicle and Equipment Cleaning** | The permittee described and implemented measures that prevent or minimize contamination of stormwater runoff from all areas used for vehicle and equipment cleaning. | Choose an item. | **---** |
| ***Comments*** | | | |

| Total Maximum Daily Loads (TMDLs) | | | |
| --- | --- | --- | --- |
| **Staff Interviewed: (Name, Title, Role)** |  | | |
| Program Status:  **The permittee is not subject to an approved TMDL (*skip the rest of this section*).**  **The permittee is subject to an approved TMDL for: name of parameter(s) and date(s) approved**  There is is not a Waste Load Allocation (WLA) in the approved TMDL (*If there is a WLA, then complete items II.H.1-5 below. If there is not a WLA, skip to item II.H.6 below*) | | | |
| **Permit Citation** | **Program Requirement** | **Status** | **Supporting Doc No.** |
| **II.H.3 TMDLs** | Within 12 months of final TMDL approval, the permittee’s annual reports included a description of existing programs, controls, partnerships, projects and strategies to address impaired waters. | Choose an item. | **---** |
| Within 12 months of final TMDL approval, the permittee’s annual reports provided a brief explanation as to how the programs, controls, partnerships, projects and strategies address impaired waters. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.H.4 TMDLs** | Within 24 months of final TMDL approval, the permittee’s annual reports included an assessment of whether additional structural and/or non-structural BMPs are necessary to address impaired waters. | Choose an item. | **---** |
| Within 24 months of final TMDL approval, the permittee’s annual reports included a brief explanation as to how the programs, controls, partnerships, projects and strategies address impaired waters. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.H.5 TMDLs** | Within 36 months of final TMDL approval, the permittee’s annual reports included a description of activities expected to occur and when activities are expected to occur. | Choose an item. | **---** |
| ***Comments*** | | | |
| **II.H.6 TMDLs** | If there is no Waste Load Allocation in the approved TMDL, the permittee evaluated strategies and tailored and/or expanded BMPs within the scope of the six minimum measures to enhance water quality recovery strategies in the watershed(s) to which the TMDL applies. | Choose an item. | **---** |
| The permittee described strategies and tailored and/or expanded BMPs in their Stormwater Management Plan and annual reports | Choose an item. | **---** |
| ***Comments*** | | | |

| Site Visit Evaluation: Municipal Facility No. 1 | |
| --- | --- |
| **Facility Name:** | **Date and Time of Site Visit:** |
| **Facility Address:** | **Facility Type (Vehicle Maintenance, Landscaping, etc.):** |
| **Name of MS4 inspector(s) evaluated:** | **Most Recent MS4 Inspection (*List date and name of inspector*):** |
| **Name(s) and Title(s) of Facility Representative(s) Present During the Site Visit:** | |
| **Name** | **Title** |
|  |  |
| **Observations** | |
| **Facility Documentation/Training** | |
| Does the facility have a Stormwater Pollution Prevention Plan (SWPPP) or similar document? Is it facility-specific? | |
| What type of stormwater training do facility employees receive? How often? | |
| **Inspector Training/Knowledge** | |
| What type of stormwater training does the MS4 inspector receive? How often? | |
| Did the MS4 inspector appear knowledgeable about Permit requirements for pollution prevention and good housekeeping? | |
| Did the MS4 inspector appear knowledgeable about stormwater pollution prevention and good housekeeping? | |
| **Inspection Procedures** | |
| Does the MS4 inspector’s process include the use of a checklist or other standardized form? | |
| Does the MS4 inspector’s process include taking photos? | |
| Does the MS4 inspector’s process include reviewing the facility’s SWPPP (or similar document)? | |
| Does the MS4 inspector’s process include walking the entire facility and inspecting all points of discharge? | |
| Did the MS4 inspector miss any obvious areas of concern? If so, explain: | |
| Does the MS4 inspector’s process include presenting the inspection findings to the facility contact? | |
| **Inspection Results** | |
| Did the facility inspection result in any corrective actions to be implemented? If so, for what issue(s)? | |
| If compliance corrective actions were identified, what timeline for correction/follow-up was provided? | |
| **Notes/Comments/Recommendations** | |
|  | |

| Site Visit Evaluation: Municipal Facility No. 2 | |
| --- | --- |
| **Facility Name:** | **Date and Time of Site Visit:** |
| **Facility Address:** | **Facility Type (Vehicle Maintenance, Landscaping, etc.):** |
| **Name of MS4 inspector(s) evaluated:** | **Most Recent MS4 Inspection (Date and Entity):** |
| **Name(s) and Title(s) of Facility Representative(s) Present During the Site Visit:** | |
| **Name** | **Title** |
|  |  |
| **Observations** | |
| **Facility Documentation/Training** | |
| Does the facility have a Stormwater Pollution Prevention Plan (SWPPP) or similar document? Is it facility-specific? | |
| What type of stormwater training do facility employees receive? How often? | |
| **Inspector Training/Knowledge** | |
| What type of stormwater training does the MS4 inspector receive? How often? | |
| Did the MS4 inspector appear knowledgeable about Permit requirements for pollution prevention and good housekeeping? | |
| Did the MS4 inspector appear knowledgeable about stormwater pollution prevention and good housekeeping? | |
| **Inspection Procedures** | |
| Does the MS4 inspector’s process include the use of a checklist or other standardized form? | |
| Does the MS4 inspector’s process include taking photos? | |
| Does the MS4 inspector’s process include reviewing the facility’s SWPPP (or similar document)? | |
| Does the MS4 inspector’s process include walking the entire facility and inspecting all points of discharge? | |
| Did the MS4 inspector miss any obvious areas of concern? If so, explain: | |
| Does the MS4 inspector’s process include presenting the inspection findings to the facility contact? | |
| **Inspection Results** | |
| Did the facility inspection result in any corrective actions to be implemented? If so, for what issue(s)? | |
| If compliance corrective actions were identified, what timeline for correction/follow-up was provided? | |
| **Notes/Comments/Recommendations** | |
|  | |

| Site Visit Evaluation: MS4 Outfall No. 1 | | |
| --- | --- | --- |
| **Outfall ID Number:** | | **Date and Time of Site Visit:** |
| **Outfall Location:** | | **Outfall Description (Pipe Material/Diameter, Culvert, etc.):** |
| **Receiving Water:** | | **Is Flow Present? If So, Describe (Color, Approximate Flow Rate, Sheen, Odor, Floatables/Debris, etc.):** |
| **Most Recent Outfall Inspection/Screening (Date):** | |
| **Days Since Last Rainfall:** | **Inches:** |
| **Name of MS4 Inspector(s) evaluated:** | | |
| **Observations** | | |
| **Inspector Training/Knowledge** | | |
| What type of stormwater training does the MS4 inspector receive? How often? | | |
| Did the MS4 inspector appear knowledgeable about illicit discharge indicators and investigations? | | |
| **Inspection Procedures** | | |
| Does the inspector’s process include the use of a checklist or other standardized form? | | |
| Does the inspector’s process include taking photos? | | |
| Did the MS4 inspector miss any obvious potential illicit discharge indicators or maintenance issues? If so, what were they? | | |
| **Inspection Results** | | |
| Did the outfall inspection result in any work orders or maintenance requests? If so, for what issue(s)? | | |
| Will a follow-up outfall inspection be conducted? If so, for what reason? | | |
| **Notes/Comments/Recommendations** | | |
|  | | |

| Site Visit Evaluation: MS4 Outfall No. 2 | | |
| --- | --- | --- |
| **Outfall ID Number:** | | **Date and Time of Site Visit:** |
| **Outfall Location:** | | **Outfall Description (Pipe Material/Diameter, Culvert, etc.):** |
| **Receiving Water:** | | **Is Flow Present? If So, Describe (Color, Approximate Flow Rate, Sheen, Odor, Floatables/Debris, etc.):** |
| **Most Recent Outfall Inspection/Screening (Date):** | |
| **Days Since Last Rainfall:** | **Inches:** |
| **Name of MS4 Inspector(s):** | | |
| **Observations** | | |
| **Inspector Training/Knowledge** | | |
| What type of stormwater training does the MS4 inspector receive? How often? | | |
| Did the MS4 inspector appear knowledgeable about illicit discharge indicators and investigations? | | |
| **Inspection Procedures** | | |
| Does the inspector’s process include the use of a checklist or other standardized form? Obtain copy. | | |
| Does the inspector’s process include taking photos? | | |
| Did the MS4 inspector miss any obvious potential illicit discharge indicators or maintenance issues? If so, what were they? | | |
| **Inspection Results** | | |
| Did the outfall inspection result in any work orders or maintenance requests? If so, for what issue(s)? | | |
| Will a follow-up outfall inspection be conducted? If so, for what reason? | | |
| **Notes/Comments/Recommendations** | | |
|  | | |

| Site Visit Evaluation: Construction Site No. 1 | | |
| --- | --- | --- |
| **Site/Project Name:** | **Date and Time of Site Visit:** | |
| **Site/Project Address:** | **Operator:** | |
| **Project Type (Commercial, Industrial, Residential, CIP, Roadway, etc.):** | |
| **NCG Permit ID Number:** | **Disturbed Acreage:** |
| **Recent Enforcement Actions (Include Date):** | |
| **Name of MS4 Inspector(s) evaluated:** |
| **Name(s) and Title(s) of Site Representative(s) Present During the Site Visit:** | | |
| **Name** | **Title** | |
|  |  | |
| **Observations** | | |
| **Site Documentation/Training** | | |
| Does the site have a Stormwater Pollution Prevention Plan (SWPPP) or similar document? Is it site-specific? | | |
| Does the site have approved erosion and sedimentation control plans onsite? Are they representative of current site conditions? | | |
| What type of stormwater training do site employees receive? How often? | | |
| **Inspector Training/Knowledge** | | |
| What type of stormwater training does the MS4 inspector receive? How often? | | |
| Did the MS4 inspector appear knowledgeable about MS4 and NCG010000 requirements for construction sites? | | |
| Did the MS4 inspector appear knowledgeable about erosion and sedimentation control/stormwater pollution prevention BMPs? | | |
| **Inspection Procedures** | | |
| Does the MS4 inspector’s process include the use of a checklist? | | |
| Does the MS4 inspector’s process include taking photos? | | |
| Does the MS4 inspector’s process include reviewing approved plans (erosion and sedimentation control and/or SWPPP)? | | |
| Does the MS4 inspector’s process include walking the entire site and inspecting all points of discharge? | | |
| Did the MS4 inspector miss any obvious violations? If so, explain: | | |
| Does the MS4 inspector’s process include presenting the inspection findings to the site contact in writing? | | |
| Does the MS4 inspector’s process include providing construction stormwater educational materials to the site contact? | | |
| **Compliance/Enforcement** | | |
| What, if any, enforcement actions (verbal warnings, NOV, etc.) did the inspection result in? | | |
| If compliance issues were identified, what timeline for correction/follow-up was provided? | | |
| **Notes/Comments/Recommendations** | | |
|  | | |

| Site Visit Evaluation: Construction Site No. 2 | | |
| --- | --- | --- |
| **Site/Project Name:** | **Date and Time of Site Visit:** | |
| **Site/Project Address:** | **Operator:** | |
| **Project Type (Commercial, Industrial, Residential, CIP, Roadway, etc.):** | |
| **NCG Permit ID Number:** | **Disturbed Acreage:** |
| **Recent Enforcement Actions (Include Date):** | |
| **Name of MS4 Inspector(s) evaluated:** |
| **Name(s) and Title(s) of Site Representative(s) Present During the Site Visit:** | | |
| **Name** | **Title** | |
|  |  | |
| **Observations** | | |
| **Site Documentation/Training** | | |
| Does the site have a Stormwater Pollution Prevention Plan (SWPPP) or similar document? Is it site-specific? | | |
| Does the site have approved erosion and sedimentation control plans onsite? Are they representative of current site conditions? | | |
| What type of stormwater training do site employees receive? How often? | | |
| **Inspector Training/Knowledge** | | |
| What type of stormwater training does the MS4 inspector receive? How often? | | |
| Did the MS4 inspector appear knowledgeable about MS4 and NCG010000 requirements for construction sites? | | |
| Did the MS4 inspector appear knowledgeable about erosion and sedimentation control/stormwater pollution prevention BMPs? | | |
| **Inspection Procedures** | | |
| Does the MS4 inspector’s process include the use of a checklist? Obtain copy. | | |
| Does the MS4 inspector’s process include taking photos? | | |
| Does the MS4 inspector’s process include reviewing approved plans (erosion and sedimentation control and/or SWPPP)? | | |
| Does the MS4 inspector’s process include walking the entire site and inspecting all points of discharge? | | |
| Did the MS4 inspector miss any obvious violations? If so, explain: | | |
| Does the MS4 inspector’s process include presenting the inspection findings to the site contact in writing? | | |
| Does the MS4 inspector’s process include providing construction stormwater educational materials to the site contact? | | |
| **Compliance/Enforcement** | | |
| What, if any, enforcement actions (verbal warnings, NOV, etc.) did the inspection result in? | | |
| If compliance issues were identified, what timeline for correction/follow-up was provided? | | |
| **Notes/Comments/Recommendations** | | |
|  | | |

| Site Visit Evaluation: Post-Construction Stormwater Control Measure No. 1 | |
| --- | --- |
| **Site Name:** | **Date and Time of Site Visit:** |
| **Site Address:** | **SCM Type:** |
| **Most Recent MS4 Inspection (Include Date and Entity):** |
| **Name of MS4 Inspector(s) evaluated:** | **Most Recent MS4 Enforcement Activity (Include Date):** |
| **Name(s) and Title(s) of Site Representative(s) Present During the Site Visit:** | |
| **Name** | **Title** |
|  |  |
|  |  |
| **Observations** | |
| **Site Documentation** | |
| Does the site have an operation and maintenance plan? | |
| Does the site have records of annual inspections? Are they performed by a qualified individual? | |
| **Inspector Training/Knowledge** | |
| What type of stormwater training does the MS4 inspector receive? How often? | |
| Did the MS4 inspector appear knowledgeable about MS4 requirements for post-construction site runoff controls? | |
| Did the MS4 inspector appear knowledgeable about post-construction BMPs (general purpose/function, components, O&M requirements, etc.)? | |
| **Inspection Procedures** | |
| Does the MS4 inspector’s process include the use of a checklist or other standardized form? What format? | |
| Does the MS4 inspector’s process include taking photos? | |
| Does the MS4 inspector’s process include reviewing the site’s operation and maintenance plan and records of annual inspections? | |
| Does the MS4 inspector’s process include walking the entire site and inspecting all points of discharge? | |
| Did the MS4 inspector miss any obvious operation and maintenance deficiencies? If so, explain: | |
| Does the MS4 inspector’s process include presenting the inspection findings to the site contact in writing? | |
| **Compliance/Enforcement** | |
| What, if any, enforcement actions (verbal warnings, NOV, etc.) did the inspection result in? | |
| If compliance issues were identified, what timeline for correction/follow-up was provided? | |
| **Notes/Comments/Recommendations** | |
|  | |

| Site Visit Evaluation: Post-Construction Stormwater Control Measure No. 2 | |
| --- | --- |
| **Site Name:** | **Date and Time of Site Visit:** |
| **Site Address:** | **SCM Type:** |
| **Most Recent MS4 Inspection (Include Date and Entity):** |
| **Name of MS4 Inspector(s) evaluated:** | **Most Recent MS4 Enforcement Activity (Include Date):** |
| **Name(s) and Title(s) of Site Representative(s) Present During the Site Visit:** | |
| **Name** | **Title** |
|  |  |
|  |  |
| **Observations** | |
| **Site Documentation** | |
| Does the site have an operation and maintenance plan? | |
| Does the site have records of annual inspections? Are they performed by a qualified individual? | |
| **Inspector Training/Knowledge** | |
| What type of stormwater training does the MS4 inspector receive? How often? | |
| Did the MS4 inspector appear knowledgeable about MS4 requirements for post-construction site runoff controls? | |
| Did the MS4 inspector appear knowledgeable about post-construction BMPs (general purpose/function, components, O&M requirements, etc.)? | |
| **Inspection Procedures** | |
| Does the MS4 inspector’s process include the use of a checklist or other standardized form? What format? | |
| Does the MS4 inspector’s process include taking photos? | |
| Does the MS4 inspector’s process include reviewing the site’s operation and maintenance plan and records of annual inspections? | |
| Does the MS4 inspector’s process include walking the entire site and inspecting all points of discharge? | |
| Did the MS4 inspector miss any obvious operation and maintenance deficiencies? If so, explain: | |
| Does the MS4 inspector’s process include presenting the inspection findings to the site contact in writing? | |
| **Compliance/Enforcement** | |
| What, if any, enforcement actions (verbal warnings, NOV, etc.) did the inspection result in? | |
| If compliance issues were identified, what timeline for correction/follow-up was provided? | |
| **Notes/Comments/Recommendations** | |
|  | |

**APPENDIX A: SUPPORTING DOCUMENTS**

**APPENDIX B: PHOTOGRAPH LOG**