

Appendix M

Industrial Inspection Forms

U of A Annual Comprehensive Industrial Facility Inspection Report

This inspection report has been tailored to provide the U of A industrial facility team with an inspection form intended to comply with Part V. B. 6. a. i. of the Arizona Department of Environmental Quality small MS4 Permit for the inspection of U of A owned industrial facilities within the U of A boundary. There are currently no privately owned industrial facilities located within the U of A boundary.

This U of A annual comprehensive industrial facility inspection form should be filled out annually by the inspector with the observations relating to the implementation of control measures. Maintain these records with the SWMP.

ANNUAL COMPREHENSIVE INDUSTRIAL FACILITY INSPECTION INSPECTION REPORT

Date and Time of Inspection:		Date Report Written:	
Description of Weather			
Part I. General Information			
Site Information			
Facility Name:			
Facility Address:			
Photos Taken: (Circle one)	Yes	No	Photo Reference IDs:
Findings from the examination of facility areas with the potential to discharge stormwater and/or stormwater pollutants			
Provide an evaluation of the areas identified in the SWPPP as potential pollutant sources:		Provide an evaluation of the results of the past year's visual assessments and analytical monitoring (if applicable):	
Provide an evaluation of Industrial materials, residue, or trash that may have or could come into contact with stormwater:		Provide an evaluation of any leaks or spills from industrial equipment, drums, tanks, and other containers:	
Provide an evaluation of offsite tracking of industrial or waste materials, or sediment where vehicles enter or exit the site:		Provide an evaluation of tracking or blowing of raw, final, or waste materials from areas of no exposure to exposed areas;:	

ANNUAL COMPREHENSIVE INDUSTRIAL FACILITY INSPECTION INSPECTION REPORT

Provide an evaluation of control measures needing replacement, maintenance or repair:	Provide an evaluation of all observations relating to the implementation of the BMP control measures:
Note any required revisions to the SWPPP resulting from the inspection:	Note any incidents of non-compliance observed or a certification stating this facility is in compliance with this permit (if there is no noncompliance):
Inspector Information	
Qualified Inspector Name:	Qualified Inspector Title:
Signature:	Date:
Certification by Duly Authorized Representative:	
<p>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.</p>	
Signature by Duly Authorized Representative	
Name of Duly Authorized Representative:	Title of Duly Authorized Representative:
Signature:	Date:

U of A Quarterly Routine Industrial Facility Inspection Report

This inspection report has been tailored to provide the U of A industrial facility team with an inspection form intended to comply with Part V. B. 6. a. i. of the Arizona Department of Environmental Quality small MS4 Permit for the inspection of U of A owned industrial facilities within the U of A boundary. There are currently no privately owned industrial facilities located within the U of A boundary.

This U of A quarterly routine industrial facility inspection form should be filled out quarterly, at a minimum, by the inspector with the observations relating to the weather, housekeeping, preventative maintenance, spill and leak prevention and response, materials handling and waste management, erosion and sediment controls, exposure minimization, stormwater containment and discharge reduction, treatment control, and other best management practices in the SWMP. Maintain these records with the SWMP.

**QUARTERLY ROUTINE INDUSTRIAL FACILITY INSPECTIONS
BMP INSPECTION REPORT**

Date and Time of Inspection:		Date Report Written:	
Part I. General Information			
Site Information			
Facility Name:			
Facility Address:			
Photos Taken: (Circle one)	Yes	No	Photo Reference IDs:
Weather			
Estimate storm beginning: (date and time)		Estimate storm duration: (hours)	
Estimate time since last runoff from any drainage area: (days or hours)		Rain gauge reading and location: (in)	
Description of any discharges occurring at the time of the inspection:		Description of Evidence demonstrating that previously unidentified discharges of pollutants have occurred from the site:	
Exception Documentation (explanation required if inspection could not be conducted).			
Inspector Information			
Qualified Inspector Name:		Qualified Inspector Title:	
Signature:			Date:

**QUARTERLY ROUTINE INDUSTRIAL FACILITY INSPECTIONS
BMP INSPECTION REPORT**

Part II. BMP Observations. Describe deficiencies in Part III.			
BMPs (List and Inspect all BMPs Implemented)	Failures or other Deficiencies (yes, no, N/A)	Action Required (yes/no)	Action Implemented (Date)
Good Housekeeping			
Preventative Maintenance			
Spill and Leak Prevention and Response			
Materials Handling and Waste Management			
Erosion and Sediment Controls			

**QUARTERLY ROUTINE INDUSTRIAL FACILITY INSPECTIONS
BMP INSPECTION REPORT**

Part II. BMP Observations Continued. Describe deficiencies in Part III.			
BMPs (List and Inspect all BMPs Implemented)	Adequately designed, implemented and effective (yes, no, N/A)	Action Required (yes/no)	Action Implemented (Date)
Exposure Minimization BMPs			
Stormwater Containment and Discharge Reduction BMPs			
Treatment Control BMPs			
Other BMPs			

**QUARTERLY ROUTINE INDUSTRIAL FACILITY INSPECTIONS
BMP INSPECTION REPORT**

--	--	--	--

Part III. Descriptions of BMP Deficiencies		
Deficiency	Repairs Implemented: Note - Repairs must be completed as soon as possible.	
	Repaired (Y/N)	Corrective Action Implemented
1.		
2.		
3.		
4.		

Part IV. Additional Corrective Actions Required. Identify additional corrective actions not included with BMP Deficiencies (Part III) above. Identify BMPs that need more frequent inspection. Note if SWPPP change is required.	
Required Actions	Implementation Date

U of A Wet Weather Visual Assessment Report

This inspection report has been tailored to provide the U of A industrial facility team with an inspection form intended to comply with Part V. B. 6. a. i. of the Arizona Department of Environmental Quality small MS4 Permit for the inspection of U of A owned industrial facilities within the U of A boundary. There are currently no privately owned industrial facilities located within the U of A boundary.

This U of A wet weather visual inspection form should be filled out, at a minimum, twice during each wet season (summer wet season: June 1-October 31 & winter wet season: November 1–May 31) by the inspector with the observations relating to the weather, and a visual assessment of runoff for the listed water quality characteristics. Maintain these records with the SWMP.

WET WEATHER VISUAL ASSESSMENTS – TWO (2) ASSESSMENTS PER WET SEASON

Summer Wet Season: June 1-October 31 & Winter Wet Season: November 1–May 31

WET WEATHER VISUAL ASSESSMENT REPORT

Date and Time of Inspection:		Date Report Written:	
Circle One:			
Summer Wet Season			
Winter Wet Season			
Part I. General Information			
Site Information			
Facility Name:			
Facility Address:			
Photos Taken: (Circle one)	Yes	No	Photo Reference IDs:
Weather, Sample Collection, and Visual Inspection Criteria			
Estimate storm beginning: _____ (date and time)		Estimate sample collection time: _____ (time should be within 30 minutes of an actual discharge)	
Estimate time since last runoff from any drainage area: _____ (days or hours – assessment should occur at least 72 hours from a previous discharge)		Visual assessment date and time: _____	
Nature of discharge (i.e., runoff or snowmelt):		If applicable, why it was not possible to take samples within the first 30 Minutes	
Visually inspect and comment on all of the following water quality characteristics: <ul style="list-style-type: none"> • Color • Odor • Clarity • Floating solids • Settled solids • Suspended solids • Foam • Oil sheen • Other obvious indicators of stormwater pollution 		Visual inspection notes for each criterion:	

**WET WEATHER VISUAL ASSESSMENTS – TWO (2) ASSESSMENTS PER
WET SEASON**

Summer Wet Season: June 1-October 31 & Winter Wet Season: November 1–May 31

WET WEATHER VISUAL ASSESSMENT REPORT

Results of observations of the stormwater discharge:	Probable Sources of any observed stormwater contamination:
Exception Documentation (explanation required if visual assessment could not be conducted).	
Inspector Information	
Qualified Inspector Name:	Qualified Inspector Title:
Signature:	Date: