

Construction Site Inspection Report (TPDES General Permit, TXR150000)

Contractor Name:
 Address:
 Phone and Fax Number:

GENERAL INFORMATION

PROJECT NAME / DESCRIPTION		DATE OF INSPECTION
PROJECT LOCATION		
OPERATOR (Operational Control of Plans and Specifications)		OPERATOR (Day-to-Day Operational Control)
CURRENT WEATHER CONDITIONS (Temperature, Precipitation, Cloud Cover, Wind, etc.)		TYPE OF SITE (circle)
		Large Small
7 DAY INSPECTION OCCURRING EVERY: _____ (day)	PERMIT # (for large sites, 5 or more acres)	ACRES CONSTRUCTION SUPPORT ACTIVITIES (if any)

RECORDS REVIEW

Copy of Site Notice or NOI posted? YES NO	Copy of Site Notice or NOI provided to MS4(s) (DPW-ENV)? YES NO
Date of Site Notice or NOI:	Type of Site Notice: Part II.D.2. Part II.D.1 (low erosivity waiver) N/A
MS4's (Municipal Separate Storm Sewer System) receiving discharge from construction site:	
Copy of NOC(s) or NOT provided to MS4(s) (DPW-ENV, only if submitted an NOI)? YES NO N/A	
Construction Start Date:	Deadline for obtaining authorization met? YES NO (see Comments)

NUMERIC EFFLUENT LIMITATIONS

Is a concrete batch plant included in the coverage of this permit? YES NO
If yes to above, has required monitoring been performed? YES NO N/A
If yes to above, are results recorded on a Discharge Monitoring Report, DMR? YES NO N/A

CONSTRUCTION SITE OBSERVATIONS

Locations of discharges of sediments or other pollutants from site (to include off-site sediment tracking from vehicles): (1) _____ (2) _____ (3) _____ (4) _____ (5) _____
Locations of BMPs (Best Management Practices: i.e. silt fence, rock berms, etc.) that need to be maintained: (1) _____ (2) _____ (3) _____ (4) _____ (5) _____
Locations of BMPs that failed to operate as designed, were improperly installed or proved inadequate: (1) _____ (2) _____ (3) _____ (4) _____ (5) _____
Locations where additional BMPs are needed: (1) _____ (2) _____ (3) _____ (4) _____ (5) _____

Locations where site has been temporarily stabilized:

(1) _____

(2) _____

(3) _____

(4) _____

(5) _____

Are any other discharges at this site authorized by a separate permit? NO YES (describe)

NO DEFICIENCIES FOUND

I certify that this site is in compliance with TPDES Construction General Permit, TXR150000, and the Storm Water Pollution Prevention Plan. Inspector's Initials: _____

DEFICIENCY FOLLOW-UP SCHEDULE

Deficiency and Corrective Action	Date to be Corrected	Initials

COMMENTS (site POC, severe weather conditions, resolution of discrepancies from previous inspections, etc.)

Name of Inspector (print)

Job Title of Inspector

Signature of Inspector

Date