

GENERAL INFORMATION

A. Site Owner Information

OWNER NAME		OWNER CONTACT	
OWNER ADDRESS		EMAIL	PHONE
CITY	STATE	ZIP CODE	

B. Site Information

SITE BUSINESS NAME		SITE CONTACT	
SITE WDID NUMBER		EMAIL	PHONE
PHYSICAL ADDRESS	CITY	STATE	ZIP CODE

FORM 1

C. STORMWATER POLLUTION PREVENTION PLAN (SWPPP)

- C.1. Has a SWPPP been prepared by a Qualified SWPPP Developer (QSD) for the construction project? YES NO
 If NO, explain: _____
- C.2. Does the SWPPP include a Construction Site Monitoring Program (CSMP) section/element? YES NO
 If NO, explain: _____
- C.3. Are these documents kept on-site? YES NO
 If NO, explain: _____

D. GOOD SITE MANAGEMENT (i.e. HOUSEKEEPING)

- D.1. Were good site management (i.e. housekeeping) measures for construction materials implemented on-site in accordance with Construction General Permit (CGP) and SWPPP? YES NO
 If NO, explain: _____
 D.1.a. Was an inventory of the products used and/or expected to be used conducted? YES NO
 If NO, explain: _____
- D.2. Were required good site management (i.e. housekeeping) measures for waste management implemented on-site in accordance with CGP and SWPPP? YES NO
 If NO, explain: _____
 D.2.a. Is there a spill response and implementation element for the SWPPP? YES NO
 If NO, explain: _____
- D.3. Were required good site management (i.e. housekeeping) measures for vehicle storage and maintenance implemented on-site in accordance with CGP and SWPPP? YES NO
 If NO, explain: _____
- D.4. Were required good site management (i.e. housekeeping) measures for landscape materials implemented on-site in accordance with CGP and SWPPP? YES NO
 If NO, explain: _____
- D.5. Was a list of potential pollutant sources developed? YES NO
 If NO, explain: _____
- D.6. Were required good site management (i.e. housekeeping) measures to control air deposition of site materials and from site operations implemented on-site? YES NO
 If NO, explain: _____

ADA Notice

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PROJECT STORMWATER ANNUAL REPORT

CEM-2075 (REV 12/2013)

E. NON-STORM WATER MANAGEMENT

E.1. Were measures to control all non-storm water discharges during construction implemented? YES NO

If NO, explain: _____

E.2. Were vehicles washed in such a manner as to prevent non-storm water discharges to surface waters or to MS4 drainage systems? YES NO NA

If NO, explain: _____

E.3. Were streets cleaned in such a manner as to prevent unauthorized non-storm water discharges from reaching surface waters or MS4 drainage systems? YES NO

If NO, explain: _____

F. EROSION CONTROLS

F.1. Were required erosion controls implemented on-site in accordance with CGP and SWPPP? YES NO

If NO, explain: _____

G. SEDIMENT CONTROLS

G.1. Were required sediment controls implemented on-site in accordance with CGP and SWPPP? YES NO

If NO, explain: _____

G.2. Were immediate access roads inspected on a daily basis? YES NO

If NO, explain: _____

H. RUN-ON AND RUN-OFF CONTROLS

H.1. Was all site run-on and run-off effectively managed? YES NO

If NO, explain: _____

H.2. Did Risk level 2 dischargers monitor and report run-on from surrounding areas if there was reason to believe run-on may have contributed to a Numeric Action Level (NAL) exceedance? YES NO NA

If NO, explain: _____

I. RAIN EVENT ACTION PLAN (REAP)

I.1. Were REAPs developed 48 hours prior to all likely precipitation events (50% or greater probability of producing precipitation)? YES NO

If NO, explain: _____

I.2. Did the REAPs developed meet the minimum criteria listed in the CGP? YES NO

If NO, explain: _____

J. INSPECTION, MAINTENANCE AND REPAIR

J.1. Were all site inspections, maintenance, and repairs performed or supervised by a Qualified SWPPP Practitioner (QSP)? YES NO

If NO, explain: _____

J.2. Were site inspections conducted weekly and at least once each 24-hour period during extended storm events? YES NO

If NO, explain: _____

J.3. Were post rain event inspections conducted? YES NO

If NO, explain: _____

J.4. Do your inspection forms/checklists meet the minimum criteria listed in the CGP? YES NO

If NO, explain: _____

J.5. During any site inspection was Best Management Practice (BMP) maintenance or repairs required? YES NO

If NO, explain: _____

J.6. If BMP maintenance/repair or design change was needed, did implementation begin within 72 hours? YES NO NA

If NO, explain: _____

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K. VISUAL MONITORING

K.1. Within 2 business days (48 hours) after each qualified rain event, were visual inspections conducted in compliance with the CGP? YES NO

If NO, explain: _____

K.2. Were all storm water discharges that occurred from storage or containment systems visually observed prior to discharge? YES NO

If NO, explain: _____

K.3. Were the time, date, and rain gauge reading recorded for each qualifying rain event? YES NO

If NO, explain: _____

K.4. Within 2 business days (48 hours) prior to each predicted rain event, were visual inspections conducted in compliance with the CGP? YES NO

If NO, explain: _____

K.5. Are all visual inspection records retained on-site? YES NO

If NO, explain: _____

L. WATER QUALITY SAMPLING AND ANALYSIS

L.1. How many qualifying storm events (producing precipitation of 0.5 inch or more at the time of discharge) occurred this past reporting year? _____

L.2. How many qualifying storm events (producing precipitation of 0.5 inch or more at the time of discharge) were sampled? _____

Explain un-sampled events: _____

L.3. For the sampled events, did you collect three samples, at minimum (representative of the flow and characteristics) each day of discharge per qualified event? YES NO NA

If NO, explain: _____

L.4. Were grab samples analyzed for pH and/or turbidity? (Analytical data must be entered in the RAW DATA tab in SMARTS) YES NO NA

If NO, explain: _____

L.5. Were Active Treatment System (ATS) effluent samples taken? (Applies to projects that deployed ATS) YES NO NA

If NO, explain: _____

M. NON-STORM WATER DISCHARGE MONITORING

M.1. Were all drainage areas monitored for authorized/unauthorized non-storm water discharges quarterly? YES NO

If NO, explain: _____

M.2. Did visual observations indicate any authorized/unauthorized non-storm water discharges? YES NO

If YES, complete Form 2.

M.3. Were effluent samples taken of the authorized/unauthorized non-storm water discharge? (Analytical data must be entered into the RAW DATA tab in SMARTS) YES NO NA

If NO, explain: _____

M.4. Were the effluent samples sent to a laboratory certified for such analyses by the California Department of Public Health? YES NO NA

If NO, explain: _____

M.5. Were unauthorized non-storm water discharges eliminated? YES NO NA

If NO, explain: _____

N. NON-VISIBLE POLLUTANT MONITORING

N.1. Were any breaches, malfunctions, leakages, or spills observed during a visual inspection? YES NO

N.2. How many potential discharges of non-visible pollutants were identified? _____

N.3. For each discharge event (of non-visible pollutants), were samples collected in compliance with the CGP? (Analytical data must be entered into the RAW DATA tab in SMARTS) YES NO NA

If NO, explain: _____

N.4. For each discharge event, was a comparison sample collected (uncontaminated sample that did not come into contact with the pollutant)? (Analytical data must be entered into the RAW DATA tab in SMARTS) YES NO NA

If NO, explain: _____

O. WATERSHED MONITORING

O.1. Are you part of a qualified regional watershed-based monitoring program approved by the Regional Water Board? YES NO

P. RECORDS

P.1. Are all records of all storm water monitoring information retained on-site? YES NO
If NO, explain: _____

Q. NAL EXCEEDANCES

Q.1. Were any NALs exceeded? YES NO
If NO or N/A, skip to next section

Q.2. Were corrective actions taken to address the NAL exceedances? YES NO NA
If NO, explain: _____
If YES, please provide information about the corrective actions taken on Form 3

Q.3. Were analytical results from any/all NAL exceedances submitted electronically to the State Water Board, no later than 10 days after the conclusion of the storm event? YES NO NA
If NO, explain: _____

Q.4. Were any NAL Exceedance Reports submitted to the Regional Water Board? YES NO NA

R. NEL EXCEEDANCES

R.1. Were any Numeric Effluent Limitations (NELs) exceeded? YES NO NA

R.2. Were any NEL exceedances due to a storm event equal to or larger than the Compliance Storm Event described in CGP? (On-site rain gauge and governmental rain gauge verification required) YES NO NA
If YES, describe: _____

R.3. Were corrective actions taken to address the NEL exceedances? YES NO NA
If YES, please provide information about the corrective actions taken on Form 3.
If NO, explain: _____

R.4. Were NEL Violation Reports submitted to the State Water Board within 24 hours after the NEL exceedance were identified? YES NO NA
If NO, explain: _____

R.5. Were analytical/sampling results from any/all NEL exceedances submitted electronically to the State Water Board, no later than 5 days after the conclusion of the storm event? YES NO NA
If NO, explain: _____

R.6. Were Suspended Sediment Concentration (SSC) analyses conducted? (Analytical data must be entered in the RAW DATA tab in SMARTS) YES NO NA
If NO, explain: _____

R.7. Were Receiving Water samples taken and analyzed? (Analytical data must be entered in the RAW DATA tab in SMARTS) YES NO NA
If NO, explain: _____

S. BIOASSESSMENT

S.1. Is the project over 30 acres? YES NO NA

S.2. Does the project have a direct connection to a freshwater wadeable (generally less than 0.5-1.0 meters deep, that can be sampled by field crews wearing chest waders) receiving water? YES NO NA

S.3. Have you already submitted bioassessment information in a previous annual report? YES NO NA
Note: If you have not already submitted your bioassessment information, please provide the information (electronically) from the group that did the assessment or a summary of the information. Please include what party conducted the assessment for the site.

S.4. Was the benthic macroinvertebrate bioassessment commenced in accordance to the instructions in Appendix 3 of the permit? YES NO NA
If NO, explain: _____

S.5. Was your site exempted by the Regional Water Board? YES NO NA
If NO, explain: _____

S.6. Were you required to pay into a comparable monitoring program (i.e. SWAMP)? YES NO NA
If NO, explain: _____

T. TRAINING

- T.1. Was a Qualified SWPPP Practitioner (QSP) in reasonable charge of SWPPP implementation? YES NO NA
If YES, provide name: _____
and certificate number: _____
If NO, explain _____
- T.2. Were all individuals conducting BMP installation, inspection, maintenance, and repairs trained appropriately? YES NO NA
If NO, explain _____
- T.3. Are complete training records kept on-site and available upon request? YES NO NA
If NO, explain _____

U. AUTHORIZED NON-STORMWATER DISCHARGE (NSWD) DISCHARGED

- U.1. Were any authorized NSWDs discharged/observed from July-September? YES NO
If YES, complete Form 2.
- U.2. Were any authorized NSWDs discharged/observed from October-December? YES NO
If YES, complete Form 2.
- U.3. Were any authorized NSWDs discharged/observed from January-March? YES NO
If YES, complete Form 2.
- U.4. Were any authorized NSWDs discharged/observed from April-June? YES NO
If YES, complete Form 2.

V. UNAUTHORIZED NON-STORMWATER DISCHARGE (NSWD) DISCHARGED

- V.1. Were any unauthorized NSWDs discharged/observed from July-September? YES NO
If YES, complete Form 2.
- V.2. Were any unauthorized NSWDs discharged/observed from October-December? YES NO
If YES, complete Form 2.
- V.3. Were any unauthorized NSWDs discharged/observed from January-March? YES NO
If YES, complete Form 2.
- V.4. Were any unauthorized NSWDs discharged/observed from April-June? YES NO
If YES, complete Form 2.

FORM 3

Enter a general summary of any BMP deficiencies identified for each quarter and the corrective actions taken. Maximum up to 1000 characters.

**July-Sept
Quarter**

**Oct-Dec
Quarter**

**Jan-March
Quarter**

**April-June
Quarter**

PROJECT STORMWATER ANNUAL REPORT

CEM-2075 (REV 12/2013)

Project Stormwater Annual Report

I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those person directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Water pollution control manager name

Date

Water pollution control manager signature

Resident engineer name

Date

Resident engineer signature

Instructions

General Information

The Contractor must prepare a Stormwater Annual Report each year. The resident engineer must ensure that an Annual Report is electronically submitted by September 1st of each year to the State Water Resources Control Board (SWRCB) for all projects enrolled for more than one continuous three month period.

A Stormwater Annual Report shall be prepared to document the stormwater monitoring information and training information.

The stormwater monitoring information listed below shall be included in the Stormwater Annual Report.

- A summary and evaluation of all sampling and analysis results, including copies of laboratory reports.
- The analytical method(s), method reporting unit(s), and method detection limit(s) of each analytical parameter.
- A summary of all corrective actions taken during the compliance year.
- Identification of any compliance activities or corrective actions that were not implemented.
- A summary of all violations of the CGP.
- The names of individual(s) who performed site inspections, sampling, site visual monitoring inspections and/or measurements.
- The date, place, and time of site inspections, sampling, site visual monitoring inspections, and/or measurements, including precipitation (rain gauge).
- Any site visual monitoring inspection and sample collection exception records.
- The stormwater training information listed below shall be included in the Stormwater Annual Report.
- Documentation of all training for individuals responsible for all activities associated with compliance with the CGP.
- Documentation of all training for individuals responsible for BMP installation, inspection, maintenance, and repair.
- File this form in SWPPP File Category 20.80.

Form

- Owner Name: Enter legally responsible person's name.
 - Owner Address: Use the district office address.
 - Owner Contact: Enter Authorized Signatory's name.
 - E-mail for Site Owner Information: Enter authorized signatory's e-mail address.
 - Site Business Name: Use Caltrans District XX to ensure consistency. For construction projects in a region, use the parent district number (either 03 or 06)
 - Site Contact: Enter resident engineer's name.
 - E-mail for Site Information: Enter resident engineer's e-mail address.
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