

Annual Comprehensive Site Compliance Evaluation Report Form

District Maintenance Supervisor (or equivalent) Conducting Comprehensive Site Compliance Evaluation: _____

Facility: _____ Inspection Date: _____ Report Date: _____

This Comprehensive Site Compliance Evaluation Report Form will be completed annually by a member of the facility's Pollution Prevention Team that has not typically performed the quarterly inspections. All areas associated with industrial activities which have the potential for pollutants to enter storm water runoff will be inspected.

- **Upon completion, this form must be faxed to the Regional Environmental Coordinator by no later than January 15 of every year. This sheet will also be placed in Appendix 8 of the SWPPP.**

- | | |
|---|--|
| <input type="checkbox"/> storage of raw metals | <input type="checkbox"/> storage sheds |
| <input type="checkbox"/> waste accumulation areas | <input type="checkbox"/> vehicle/equipment cleaning areas |
| <input type="checkbox"/> drainage from roofs | <input type="checkbox"/> fueling areas |
| <input type="checkbox"/> salt storage | <input type="checkbox"/> material storage areas |
| <input type="checkbox"/> salt brine storage | <input type="checkbox"/> loading/unloading areas |
| <input type="checkbox"/> calcium chloride storage | <input type="checkbox"/> all equipment storage areas |
| <input type="checkbox"/> transformers | <input type="checkbox"/> storm water outfalls |
| <input type="checkbox"/> generators | <input type="checkbox"/> detention basin |
| <input type="checkbox"/> used oil tanks | <input type="checkbox"/> sediment and erosion control measures |

Major Observations:

Facility Name: _____

CSCE

Incidents of Non-Compliance with SWPPP:

Problem	Location	Comments (If problem does not exist write NA)
Leaking calcium chloride, brine, or deicing tanks or pipes.		
Leaking vehicles or equipment with no drip pans, absorbents, or Oil-Dri.		
Material stockpiles not controlled or damaged controls (ex. silt fencing).		
Reporting documents not completed.		
Equipment malfunctions with wash pad.		
Raw metal stored in storm water path.		
Material storage areas and their contents are exposed to storm water.		
Spill reports not being maintained with issues observed on site.		
Damage, debris, or staining near outfalls.		
<u>Other</u>		

Recommended Revisions to the SWPPP:

Facility Name: _____

CSCE

Recommended Corrective Actions (include target dates for the completion of the Corrective Actions that are within 12 weeks of the date of this CSCE Report):

If the results of the CSCE show that the facility is in compliance with the SWPPP and there are no incidents of non-compliance, then the District Maintenance Supervisor will sign and date below, certifying compliance of the facility with the SWPPP. If the results of the CSCE find instances of non-compliance with the SWPPP, these issues will be noted on the form above and recommended corrective actions will be prescribed.

Signature certifies that the Comprehensive Site Compliance Evaluation has been completed and that the subject facility is functioning in compliance with this SWPPP at the time of the evaluation.

Signature

Date

- ▶ **Upon completion, this form must be e-mailed or faxed to the Regional Environmental Coordinator by no later than January 15 each year. This sheet will also be placed in Appendix 8 of the SWPPP.**