

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION
STORMWATER SITE INSPECTION REPORT

CEM-2030 (REV 3/2014)

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PROJECT INFORMATION NAME AND SITE ADDRESS	CONTRACT NUMBER/CO/RTE/PM
	PROJECT IDENTIFIER NUMBER
	WDID NUMBER
CONTRACTOR NAME AND ADDRESS	PROJECT SITE RISK LEVEL <input type="checkbox"/> Risk Level 1 <input type="checkbox"/> N/A. WPCP <input type="checkbox"/> Risk Level 2 <input type="checkbox"/> N/A. Project resides in The Lake Tahoe Hydrologic Unit and is regulated under Order No. R6T-2011-019, NPDES No. CAG616002 <input type="checkbox"/> Risk Level 3
Submitted by contractor (print and sign name)	Date
Water Pollution Control Manager name and company name	Phone number
	Emergency (24/7) phone number

General Information

Inspector's Name	Accompanied by Caltrans staff? <input type="checkbox"/> YES <input type="checkbox"/> NO If Yes, Name/Initials: _____	Date of Inspection
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Weather Condition <input type="checkbox"/> Clear <input type="checkbox"/> Partly cloudy <input type="checkbox"/> Cloudy	Precipitation Condition <input type="checkbox"/> None <input type="checkbox"/> Misty <input type="checkbox"/> Heavy rain <input type="checkbox"/> Light rain <input type="checkbox"/> Hail <input type="checkbox"/> Rain <input type="checkbox"/> Snow	Wind Condition <input type="checkbox"/> None <input type="checkbox"/> Less than 5 mph <input type="checkbox"/> Greater than 5 mph
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Construction Phase <input type="checkbox"/> Highway construction <input type="checkbox"/> Plant establishment <input type="checkbox"/> Suspension of work (inactive site)	Site Information Total project area: _____ acres Total project disturbed soil area: _____ acres Current phase disturbed soil area: _____ acres Current phase inactive disturbed soil: _____ acres
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Inspection Type <i>Check appropriate box(es)</i>	Storm Information	
<input type="checkbox"/> Weekly	Time elapsed since last storm _____ days	Precipitation amount from last storm _____ inches
<input type="checkbox"/> Quarterly non-stormwater		
<input type="checkbox"/> Pre-storm	Time storm is expected _____ (time) _____ (date)	Expected precipitation amount _____ inches
<input type="checkbox"/> During storm event	Time elapsed since storm began _____ hours-minutes	Precipitation amount from storm recorded from site rain gauge _____ inches
<input type="checkbox"/> Post storm	Time elapsed since storm _____ hours-minutes	Precipitation amount from storm recorded from site rain gauge _____ inches

Date	Daily Site Inspection of Best Management Practices (BMP) List Daily inspections for previous calendar week. Do not include weekly inspection.	Daily inspection performed by	Any corrective actions identified as completed or new?		If yes, were the actions added or verified on CEM-2035, as appropriate?		Date shown on corrective action form
			YES	NO	YES	NO	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Site Inspection of Best Management Practices, continued
For project specific BMPs, insert the BMP name and additional inspection requirements below.

Temporary Linear Sediment Barriers <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Right location?		Properly installed or cross barriers installed?		Maintenance performed when 1/3 height or repair needed?		Photos?	Comments and Required Actions	Action No.		
	Yes	No	Yes	No	Yes	No	Yes				
Location 1											
Location 2											
Location 3											
Storm Drain Inlet Protection <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	All inlets protected?		Properly installed?		Maintenance or repair needed?		Photos?	Comments and Required Actions	Action No.		
	Yes	No	Yes	No	Yes	No	Yes				
Location 1											
Location 2											
Location 3											
Stockpile Management <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date stockpile created	Is the stockpile listed as a location on stockpile management inactive stockpiles? If yes, stop here.		Is there a storm event forecasted? If yes, stop here and take action.		Is stockpile being actively used? If yes, stop here.		If no to previous question, what is the last day stockpile was actively used?	How long since stockpile actively used?	Has it been 3 days since the stockpile has been actively used? If yes, take action.	
	Date	Yes	No	Yes	No	Yes	No	Date	Days	Yes	No
Location 1											
Location 2											

- Notes:**
1. If it has been 3 days (72 hours) since a stockpile has been active then the stockpile is inactive and must be reported as a location on stockpile management inactive stockpiles.
 2. Stockpiles must be covered and have perimeter control installed prior to a storm event.

Location Number	Comments / Corrective Actions	Photos?	Action No.
		Yes	
1			
2			

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Inactive Stockpile Management <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Type of Material or Waste	Is the stockpile properly located?		Is the stockpile covered?		Does the stockpile have a perimeter control?		Does the stockpile need maintenance or repair?		
		Yes	No	Yes	No	Yes	No	Yes	No	
Location 1										
Location 2										
Location Number	Comments / Corrective Actions								Photos?	Action No.
1									Yes	
2										

Sediment and Desilting Basins <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are basin inlets, outlets, and spillways in working order?		Is water contained in basin?		Is maintenance needed to provide required retention or detention?		Photos?	Comments and Required Actions	Action No.
	Yes	No	Yes	No	Yes	No	Yes		
Location 1									
Location 2									
Location 3									

Tracking Controls <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Do all entrances and exits have tracking controls?		Is pavement free from visible sediment tracking?		Does sediment need to be removed from rock or ribbed plates?		Is daily sweeping done?		Photos?	Comments and Required Actions	Action No.
	Yes	No	Yes	No	Yes	No	Yes	No	Yes		
Location 1											
Location 2											
Location 3											

Wind Erosion Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Water trucks on-site?		Visible dust?		Photos?	Comments and Required Actions	Action No.
	Yes	No	Yes	No	Yes		
Location 1							
Location 2							
Location 3							

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Dewatering Operations <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Dewatering currently active?		Dewatering conforms with RWQCB permit?		Dewatering discharge within discharge specified limitations?		Photos?	Comments and Required Actions	Action No.
	Yes	No	Yes	No	Yes	No	Yes		
Location 1									
Location 2									
Location 3									

Temporary Stream Crossing <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Constructed as shown on the plan?		Conforms to 404 permit and 1601 agreement requirements?		Maintenance or repair required?		Photos?	Comments and Required Actions	Action No.
	Yes	No	Yes	No	Yes	No	Yes		
Location 1									
Location 2									
Location 3									

Material Storage <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Located away from drainage courses and water courses?		Areas protected from run on and runoff?		Bagged and boxed materials stored on pallets?		Areas reasonably clean and free of spills, leaks, and other material?		Is material inventory up to date?		Liquid materials in secondary containment?		Photos?
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes
Location 1													
Location 2													
Location 3													

Comments and Required Actions													Action No.
Location 1													
Location 2													
Location 3													

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Waste Management Sanitation Facilities <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Located away from drainage courses and water courses?		Secured to ground or foundation?		Clean and has adequate capacity?		Ground checked for any spills or leaks?		Any spills or leaks found?		Photos?	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	
Location 1												
Location 2												
Location 3												

Location Number	Comments / Corrective Actions	Action No.
1		
2		
3		

Project-specific BMP <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Properly located?		Properly installed?		Maintenance or repair needed?		Photos?	Comments and Required Actions	Action No.
	Yes	No	Yes	No	Yes	No	Yes		
Location 1									
Location 2									
Location 3									

Project-specific BMP <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Properly located?		Properly installed?		Maintenance or repair needed?						Photos?	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	
Location 1												
Location 2												
Location 3												

	Comments and Required Actions	Action No.
Location 1		
Location 2		
Location 3		

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Site Inspection Report General Comments

Are the BMPs installed as required by the Stormwater Pollution Prevention Plan for the phase of construction?

Yes No

Does the SWPPP need to be amended?

Yes No

Does the SWPPP currently reflect the current site conditions and contractor operations?

Yes No

Is hazardous waste stored on the jobsite?

Yes No

Are there water pollution control concerns on the project site not addressed by the comments and required actions shown above for BMPs, based on the field review of the jobsite?

Yes No

If yes, provide details, comments, and required actions below for each location.

Location	Water Pollution Control Concern	Comments and Required Actions	Action No.

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Stormwater Inspection Report Certification

I certify under penalty of law that this Stormwater Inspection Report was performed in accordance with the General Permit. The information contained in this inspection report was gathered from a field site inspection. I am aware that Section 309 (c)(4) of the Clean Water Act provides for significant penalties, including fines and imprisonment for knowingly submitting a false material statement, representation, or certification.

Stormwater Inspector (Name)	Date Report Completed
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Stormwater Inspector (Signature)

I certify under penalty of law that this Stormwater Inspection Report was performed in accordance with the General Permit by me or under my direction or supervision. The information contained in this inspection report was gathered and evaluated by qualified personnel prior to submittal. Based on my review of the information and inquiry of those who gathered and evaluated the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

I am aware that Section 309 (c)(4) of the Clean Water Act provides for significant penalties, including fines and imprisonment for knowingly submitting a false material statement, representation, or certification.

Water Pollution Control Manager (Name)	Date
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Water Pollution Control Manager (Signature)

Stormwater Inspection Report Acceptance

If hazardous waste is stored on the jobsite, the resident engineer should notify the district hazardous waste coordinator.

Was the District Hazardous Waste Coordinator notified?

- N/A, no hazardous waste stored on the jobsite
- YES, Date _____ Time _____
- NO

Accepted by Resident Engineer (Print Name)	Date
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Resident Engineer (Signature)

STORMWATER SITE INSPECTION REPORT

Instructions

General Information

- Construction General Permit attachments C, D, and E, Section G.5. require the information on this form.
- If the inspection form does not contain enough lines to report all locations on a jobsite, click on the "Add Item" button so that all locations are inspected and reported.
- Obtain forecasted precipitation information from the National Weather Service Forecast Office website, <http://www.srh.noaa.gov/forecast>.
- Weather information should be the best estimate of the beginning of the storm event, duration of the event, and time elapsed since the last storm.
- Rainfall amounts should be recorded from the project site rain gauge.
- "Daily Site Inspection of Best Management Practices" section is to be filled out by the water pollution control manager.

Storm Visual Inspections

- For non-visible pollutant inspections, report on all locations shown in the Stormwater Pollution Prevention Plan.

Required Actions

- All corrective actions identified in this report must also be recorded on Form CEM-2035, "Stormwater Corrective Actions Summary."
- Locations identified where BMPs are failing or have other shortcomings require implementation of repairs or design changes within 72 hours of identification, and BMP repairs or other changes must be completed as soon as possible.