



# **APPENDIX L**

## **INSPECTOR CHECKLIST**

**Robert Lewis**

Successfully Completed Certification Requirements for:

**Erosion Prevention & Sediment Control Inspector**



*Ann R. Clark*

EXPIRATION DATE  
**6/30/2011**  
REG. NO.  
**1251**

Ann R. Clark

Manager, Storm Water & Agricultural Permitting

## STORM WATER CONSTRUCTION COMPLIANCE INSPECTION REPORT

LAND DISTURBANCE PERMIT NO.:

NPDES PERMIT NO.:

Permit Owner:

Project Name:

DATE OF INSPECTION:

**PROJECT DESCRIPTION (check one):**  Residential  Commercial  Other:

**HAVE LAND-DISTURBING ACTIVITIES BEGUN FOR THIS PROJECT?**  Yes  No (if No, complete Comments Section only)

**TYPE OF INSPECTION:**  Initial  Follow-up  Final  Other:

### SECTION I: SITE REVIEW

- 1) **Are the following required items available?** A) SWPPP:  Yes  No  
B) Copy of the General Permit:  Yes  No C) NOI:  Yes  No D) DHEC Coverage Letter:  Yes  No
- 2) **Does the SWPPP include an updated list of co-permittee agreements or contractor certification statements?**  
 Yes  No
- 3) **Verify which inspection schedule the permittee follows.**  A. At least once every 7 calendar days, or  
 B. At least once every 14 calendar days and within 24 hrs of the end of a storm event of 0.5 inches or greater.
- 4) **Are inspection forms being retained with the SWPPP?**  Yes  No  N/A
- 5) **Are inspections being conducted by "qualified personnel" for 2 acres or more?**  Yes  No  N/A
- 6) **Were any major modifications made to the SWPPP and/or site since last County inspection?**  No  if Yes, please describe what modifications were made and did the modifications receive County approval:

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### SECTION II: FIELD OBSERVATIONS

Are litter, construction debris, oils, fuels, building products & construction chemicals being properly addressed and/ or removed?  Yes  No  N/A:

- 1) **Are all sediment & erosion control devices (as indicated on the plans) installed and maintained throughout the site, such as silt fence, rock check dams, sediment traps and basins, etc.?**  Yes  Needs improvements  No (Please indicate deficiencies and/ or improvements to be made):

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2) Are all storm water control devices (as indicated on the plans) installed and maintained throughout the site, such as detention ponds, swales, outlet protection, etc.?  Yes  \*Needs improvements  \*No (\*Please indicate deficiencies and/ or improvements to be made): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) Disturbed areas grassed and/ or stabilized within 14 days?  Yes  N/A  No, describe which areas need stabilization:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) For areas of final stabilization, has 70% uniform coverage been achieved?  Yes  No,  N/A identify the deficient areas:

\_\_\_\_\_

**SECTION III. OFFSITE IMPACTS FROM PROJECT**

1) Were there any offsite impacts?  No  Yes, please specify:  Public Right of Way  Adjoining Property Owner  Wetlands  Creek/River  Lake/Pond  Other (please specify):

2) Were there any onsite impacts?  No  Yes, please specify:  Catch Basin  Drainage Line  Roads  Other (please specify):

3) If answering "Yes" to any of the previous question, describe the impact (Note: Please include pictures upstream and downstream of impacts):

**SECTION IV: CONSTRUCTION OBSERVATIONS:**

Are there any deficiencies are changes noted with construction of the roads and/or drainage system?  Yes  No If Yes, explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION V: RECOMMENDATION(S)**

Any Enforcement Action to be taken against the Permittee?  No  Yes, explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION VI: DEFICIENCIES/C CORRECTIVE ACTIONS:**

Corrective Action for this inspection to be completed by the following date: \_\_\_\_\_

Name of Representative(s) present during inspection: \_\_\_\_\_

Inspector's Contact Number: \_\_\_\_\_

Photos taken during inspection:  No  Yes (include Inspector's name, date, time, location & brief description on each photo)