



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF CLEAN WATER

CHAPTER 102 VISUAL SITE INSPECTION REPORT

GENERAL INFORMATION

Project Site Name: _____ Permit No.: _____

Permit Type: PAG-01 PAG-02 Individual NPDES Individual E&S ESCGP

Approval Date: _____ Expiration Date: _____

Permittee Name: _____ Municipality: _____

Inspector Name: _____ County: _____

Inspector Firm: _____ Inspector Title: _____

Inspector Email: _____ Inspector Phone: _____

- The inspector named above is qualified (*check the appropriate box below*)
- DEP's Clean Water Academy Program CPESC CESSWI Other (equivalent)

INSPECTION INFORMATION

Inspection Date: _____ Inspection Time: _____ AM / PM Inspection No.: _____

Precipitation (Previous 24 hrs): _____ inch(es) Source: _____

Current Site Conditions: Active Earth Disturbance Fully Stabilized Snow Covered Other

Current Weather Conditions: Rain/Sleet/Snow Overcast Sunny/Partly Sunny

Inspection Type: Routine (Weekly) Post-Storm (≥ 0.25 inch) Corrective Action

INSPECTION CHECKLIST

Inspect all of the following areas of the project site. Check the box to certify these areas have been inspected and describe problems or deficiencies identified, if any. Use a separate sheet as necessary.

1. Areas that have been cleared and grubbed, graded, excavated, or otherwise disturbed and are not yet stabilized.

These areas have been inspected N/A (no areas on-site meet these conditions)

Areas are dormant for four (4) days or longer and are not temporarily stabilized.

Areas have been final graded but have not yet been stabilized.

All disturbances are being actively graded and are not yet ready for temporary or permanent stabilization.

2. BMPs/SCMs installed to comply with the permit (including site perimeter BMPs).

BMPs/SCMs have been inspected N/A (there are no BMPs/SCMs on-site at the time of inspection)

Photographs of BMPs/SCMs on-site are attached with a date/time stamp.

Photographs of all observed deficiencies are attached with a date/time stamp.

A BMP/SCM Inspection checklist has been completed and is attached for one or more BMPs/SCMs.

Description of problems or deficiencies identified: _____ No deficiencies identified

16. Have construction dewatering activities occurred since the last inspection? Yes No
 If Yes, have discharges been treated by a series of at least two BMPs? * Yes No N/A

17. Explain all answers of "No" below or on a separate sheet for questions marked with asterisks (*).

18. Identify the names and addresses of all new operators that have commenced work on the project site since the last inspection was conducted (see 25 Pa. Code § 102.1 for the definition of "operator").

Name: _____	Name: _____
Address: _____	Address: _____
City, State, ZIP: _____	City, State, ZIP: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
Responsibilities: _____	Responsibilities: _____

19. Identify the names and addresses of all operators that have ceased work on the project site since the last inspection was conducted.

Name: _____	Name: _____
Address: _____	Address: _____
City, State, ZIP: _____	City, State, ZIP: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
Responsibilities: _____	Responsibilities: _____

20. **Corrective Action** – Describe any corrective actions that will be or have been taken by the permittee to comply with the permit and the date the corrective actions will be or have been completed.

21. Are additional pages attached to this report? Yes No

I certify under penalty of law (see 18 Pa.C.S. § 4904 (relating to unsworn falsification)) that the information reported herein was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the information, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

 Inspector Signature

 Date of Signature

PHOTOGRAPHS

(CAPTION)

(CAPTION)