



Department of Environment and Conservation
 Division of Water Pollution Control

Construction Storm Water Inspection Certification

(Twice weekly inspections are required for all sites.)

Construction Site Information **Outfall No. _____ (or station no. or other identifier of drainage area represented)**

NPDES Permit No. TNR _____ Notice of Coverage (NOC) Date: _____ County: _____

Name of Project: _____

Developer and/or Contractor Name: _____

| Month/Year | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 |
|-----------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| | <i>Yes or No / Initials</i> | <i>Yes or No / Initials</i> | <i>Yes or No / Initials</i> | <i>Yes or No / Initials</i> | <i>Yes or No / Initials</i> |
| _____, _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ |
| Inspections Performed | / | / | / | / | / |
| E&S Controls in Order | / | / | / | / | / |
| _____, _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ |
| Inspections Performed | / | / | / | / | / |
| E&S Controls in Order | / | / | / | / | / |
| _____, _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ |
| Inspections Performed | / | / | / | / | / |
| E&S Controls in Order | / | / | / | / | / |
| _____, _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ |
| Inspections Performed | / | / | / | / | / |
| E&S Controls in Order | / | / | / | / | / |
| _____, _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ | Date: _____ |
| Inspections Performed | / | / | / | / | / |
| E&S Controls in Order | / | / | / | / | / |

Provide the following information for the person(s) who have performed and initialed the above inspections. If more than two persons have performed these inspections, give information for the two persons who performed the most numbers of inspections.

| | | |
|-----------------|-------------|-----------------|
| Initials: _____ | Name: _____ | Phone No. _____ |
| Initials: _____ | Name: _____ | Phone No. _____ |

Quarterly Inspection Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated information presented. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that inspections of storm water discharge points (outfalls) and of erosion and sediment controls have been performed as recorded in the table above. I certify that erosion prevention and sediment controls in the drainage area of the identified outfall were installed as planned and designed and in working order as recorded in the table above. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name _____ Title _____ Signature _____

Company _____ Date _____

Environmental Field Offices - Division of Water Pollution Control - Addresses

| EFO | Street Address | Zip Code | EFO | Street Address | Zip Code |
|-----------|-----------------------------------|------------|--------------|--------------------------------|------------|
| Memphis | 2510 Mt. Moriah Road, Suite E-645 | 38115-1520 | Cookeville | 1221 South Willow Ave. | 38506 |
| Jackson | 1625 Hollywood Drive | 38305 | Chattanooga | 540 McCallie Avenue, Suite 550 | 37402-2013 |
| Nashville | 711 R.S. Gass Blvd | 37243 | Knoxville | 3711 Middlebrook Pike | 37921 |
| Columbia | 2484 Park Plus Drive | 38401 | Johnson City | 2305 Silverdale Road | 37601 |

Information and Instructions

The purpose of this form is to certify that inspections of storm water discharge points and erosion prevention and sediment controls (E&S Controls) at the construction site have been performed. You are required to record your twice-weekly inspections for all sites, but you are only required to record your twice-weekly inspections on this form if discharges from the construction site enter waters that have been identified as being impaired by siltation, or if they enter high quality waters. You can determine whether you are discharging to an impaired or high quality stream by looking at the Notice of Coverage (NOC) returned to you after you applied for coverage under the TNCGP. You may also call your local Environmental Field Office (EFO) at the toll-free number of 1-888-891-TDEC.

You are required to inspect outfall points (where discharges leave the site or enter waters of the state) to ascertain whether your erosion prevention and sediment control measures are effective in preventing soil from leaving the construction site and entering nearby streams. You are also required to inspect the erosion prevention and sediment control measures being used at the site, whether these controls have been installed according to the storm water pollution prevention plan (SWPPP), and whether these controls are in working order. These inspections must be performed at the frequency indicated in the appropriate section of the permit.

To record the inspections and observations, write the date that inspections were performed, in the appropriate week's column; write *Yes* or *No* to indicate if the inspections, both of the outfall points and of the erosion prevention and sediment control measures, were performed; and write *Yes* or *No* to indicate whether or not erosion prevention and sediment controls are installed and in working order. Sign your initials under the date for that week and to the right of the Yes or No. Certification of inspections is required at the end of each quarter and covers all inspections performed during the quarter.

The inspection results shall be kept at the construction site with a copy of the SWPPP. Use a new form for each quarter until the Notice of Termination is filed.