



**Alameda Countywide
Clean Water Program**
A Consortium of Local Agencies

Using ACCWP's Inspection Checklist for Construction Stormwater Controls

The Inspection Checklist for Construction Stormwater Controls is intended for ACCWP's member agencies to use when inspecting construction best management practices (BMPs) at active construction sites. The purpose of this checklist is to help agency inspectors enforce the use of sediment and erosion controls and other construction-phase BMPs, to prevent erosion and keep sediment and other pollutants out of the storm drain system and local creeks. This purpose is different from that of ACCWP's Construction-Phase Inspection Checklists for Permanent, Post-Construction Treatment Measures, which are intended to help agency staff verify that permanent, post-construction stormwater treatment measures are constructed properly.

Member agencies can customize the Inspection Checklist for Construction Stormwater Controls to include their municipality's logo and department contact information. The BMPs listed on the checklist can be changed or removed if they are not typically used in an agency's jurisdiction.

It's recommended that the checklist be printed in duplicate so that site superintendents can receive a copy of the checklist at the time of the inspection. The completed checklist will indicate specific BMPs in need of maintenance or correction, and the deadline (the follow-up inspection date) to bring the site into compliance.

When inspectors return to a site to conduct follow-up inspections, it is helpful to refer to the previously-completed checklist to identify areas of concern. During these inspections, however, they should use a new, unmarked checklist to document the current conditions at the site.

ACCWP

INSPECTION CHECKLIST FOR CONSTRUCTION STORMWATER CONTROLS

Inspection Date: _____ Inspector: _____

1. Inspection Type: Routine Pre-Wet Season Pre-Storm During Storm After Storm
 Complaint Agency Referral Follow-up Other: _____

2. Project Name: _____ 2a. Project No./Permit No.: _____
 Location: _____

3. Site Contact: _____ 3a. Site Phone No.: _____

4. Mailing Address: _____

5. Developer: _____ 5a. Developer Phone No.: _____

6. Developer Mailing Address: _____

7. Permit Type: Building Permit Grading Permit Site Development Capital Improvement

8. Project Type: Commercial/Industrial Residential Landscaping Public Improvement
 Utility (water/sewer/PG&E) Grading Demolition Other: _____

9. Verification of Compliance with Statewide Construction Activity NPDES Permit

Does the project disturb 1 acre of land, or more? Yes No NOI filed? Yes No
 SWPPP dated: ____ / ____ / ____ SWPPP on site? Yes No
 Comments/Follow up to Regional Water Board:

Adequate Non-Compliant Comments/Date for Correction

10. Temporary Erosion & Sediment Control Measures:

<input type="checkbox"/> Jute Netting / Fiber Blankets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Mulch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Hydroseed / Soil Binders / Compost Blankets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Earth Dikes / Drainage Swales	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Check Dams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Stabilized construction entrance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Dust Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Street Sweeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Dewatering system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Fiber Rolls / Wattles / Compost Socks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Silt Fences / Compost Berms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Sedimentation Basin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Inlet filters (Bags, sand, gravel)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

Adequate Non-Compliant Comments/Date for Correction

11. Site Materials Handling and Storage:

- | | | | | |
|---|--------------------------|--------------------------|--------------------------|-------|
| <input type="checkbox"/> Construction Materials (wood,cement,etc) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Petroleum Products (oil, fuel) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Hazardous materials (paint,solvents) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Concrete washout area | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Waste Systems | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Soil Stockpiles | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Vehicle Servicing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Sampling is conducted, if required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Other:_____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Adequate Non-Compliant Comments/Date for Correction

12. Preservation of Existing Vegetation:

- | | | | | |
|---|--------------------------|--------------------------|--------------------------|-------|
| <input type="checkbox"/> Mark Areas to be Preserved | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Tree Protection Fencing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Riparian Area Barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> Other:_____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

13. Are the discharge points free of any evidence of illicit discharge? Yes No Comments: _____

14. Describe sediment discharge from site: _____

15. Enforcement /Follow-Up Follow-up inspection date: ____ / ____ / ____.

Corrective action(s) to be taken to remedy problems and date for completion: _____

Comments: _____

Enforcement Actions: None/In compliance Verbal Notice Notice to Comply Notice of Violation

Administrative fine Referred to (check one): Regional Water Board

Other:_____

Enforcement Action No.: _____

16. Inspector's Signature: _____ Date: _____

17. Name of Site Superintendent (Print): _____

18. Signature of Site Superintendent: _____ Date: _____