

**CONSTRUCTION STORM WATER POLLUTION PREVENTION PLAN  
FIELD INSPECTION AND MAINTENANCE REPORT**

<b>Project Information:</b>		
Controlling CSJ: _____ Controlling Project: _____ Controlling Highway: _____ Controlling County: _____	Inspection Cycle Option: <input type="checkbox"/> 1. At least every 14 calendar days or within 24 hours after 0.5 inches or more of rainfall. <input type="checkbox"/> 2. At least every 7 calendar days. <input type="checkbox"/> 3. At least monthly [Engineer approved revision to SWP3 required.]	Inspection Date: _____ TCEQ Authorization Number: (If Applicable) _____ Date of Last Rainfall: _____ Amount of Last Rainfall: _____

<b>Areas Inspected:</b>					
Area:	Inspected? (Y/NA)	Area:	Inspected? (Y/NA)	Area:	Inspected? (Y/NA)
Disturbed Soil Areas		Structural Controls		Entrance(s) & Exit(s)	
Material Storage Areas		Sediment & Erosion Controls		Other _____	

Describe how the inspection was conducted.

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**Best Management Practices (BMPs) Inspected:**

Except those listed below, all BMPs have been inspected and found to be in functioning as intended and do not require maintenance, upgrading or additional controls? (If multiple highways or project locations are involved, identify the highway or project location for the BMP requiring maintenance or improvement.)

BMP Type	Approximate Station		Lt or Rt of Centerline	BMP Required Maintenance or Improvement (Describe required corrective actions needed and taken or directions given to the contractor.)
	From:	To:		

**Additional BMPs Needed (Any BMPs not shown on the SWP3 must be approved by the Engineer. If multiple highways or project locations are involved, identify the highway or project location for the additional BMP.):**

Approximate Station		Lt or Rt of Centerline	BMP to be Installed (Describe required corrective actions needed and taken or directions given to the contractor.)
From:	To:		

**Temporarily or Permanently Ceased Construction Activities:** Where construction activities (grading, excavating, embankment, or other land disturbing activities) have temporarily or permanently ceased, describe why stabilization measures were not initiated within 14 days of when the construction activities ceased or if additional construction activities will not occur within 21 days of when construction activities were temporarily ceased. (Include the general location of the area involved if it is only part of the site.)

**Actions to be taken as a result of this inspection.**

Furnish a copy of this inspection report to the contractor so necessary maintenance or improvement actions can be taken. Document all changes to the SWP3 after the Engineer has approved them.

Contractor's Representative Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Compliance Certification (Check only one):**

With the maintenance and improvements actions noted, the site is in compliance with the SWP3 and the CGP regulations.

The site is in potential non-compliance with the SWP3 or the CGP regulations. Complete the following "Potential Non-Compliance Issues" section of this inspection report.

TxDOT's Representative Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

TxDOT's Representative Signature: \_\_\_\_\_

**Potential Non-Compliance Issues:**

Describe potential non-compliance issues (repeated failure of a BMP, failure to install a required BMP, off-site discharges [silt, gravel, sand, oily water, other pollutant], potential off-site discharges, etc.)	Location on-site where discharge occurred

**Forward this inspection report to your Supervisor immediately if any potential non-compliance issues are listed.**

**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 gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, 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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

TxDOT's Certifying Representative Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

1. Temporary Seeding	8. Hay Bales	15. Rock Bed at Construction Exit	22. Curbs and gutters
2. Permanent Plant, Sod or Seed	9. Rock Berm	16. Timber Mat at Construction Exit	23. Storm Sewers
3. Mulch	10. Diversion Dike	17. Channel Liner	24. Velocity Control Devices
4. Soil Retention Blanket	11. Diversion Swale	18. Sediment Trap	25. Excess Dirt removed from Rdwy Daily
5. Buffer Zone	12. Diversion Dike/Swale	19. Sediment Basin	26. Haul Roads Dampened for Dust Control
6. Preserve Natural Resource	13. Pipe Slope Drain	20. Storm Inlet Sediment Trap	27. Cleanup of Possible Contaminants
7. Silt Fence	14. Paved Flume	21. Stone Outlet Structure	28. _____