

EROSION PREVENTION AND SEDIMENT CONTROL SITE INSPECTION FORM

INSPECTION DATE: 1-28-09 INSPECTOR NAME: Chris Brabham QUALIFICATIONS: CEPSCI

PROJECT DATA

Project Name: Low Country Retreat Ph 2 Project ID: 1177.1.1 Permit # SCR10I103
Contractor Name: Upstate Utilities
On-site Responsible Person (if applicable):
Notice of Construction Filed [X] Yes [] No
Pre-construction Inspection [X] Yes [] No
Pre-construction Conference [X] Yes [] No

PROJECT INITIATION

[X] Yes [] No Are perimeter controls installed?
[X] Yes [] No Are perimeter BMP's installed correctly?
[] Yes [] No [X] NA Detention/sediment basin installed as the first land disturbing activity if applicable?

EROSION PREVENTION

[X] Yes [] No Is construction following the phasing and sequencing plan?
[X] Yes [] No Are Erosion Prevention measures located in the proper places?
[X] Yes [] No Are Erosion Prevention measures installed correctly?
[X] Yes [] No Are Erosion Prevention measures protecting disturbed areas?
If Erosion Prevention measures are protecting disturbed areas, what are the types of protection:
[] Surface Roughening [X] Outlet Protection [] Sodding [X] Riprap or Aggregate
[] Topsoiling [] Bench Terracing [] Seeding [] Hydro-seeding
[X] Ground Cover Plants [] Mulching [] Clearwater Diversion [] Stream Bank Stabilization
[] Temporary Stabilization [] Berms [] RECPs (Rolled Erosion Control Products)
[X] Yes [] No [] NA Are drainage conveyances stabilized with vegetation and/or a channel lining if applicable?
[X] Yes [] No [] NA Are previously stabilized areas being maintained if applicable?
[X] Yes [] No [] NA Has activity on the site been temporarily ceased for 21 days or more?
[X] Yes [] No [] NA If activity has ceased for 21 days or more, have temporary stabilization measures been installed within 14 days?
[X] Yes [] No Photo Documentation

SEDIMENT CONTROL

[X] Yes [] No [] NA Are Sediment Control practices located properly?
[X] Yes [] No [] NA Are Sediment Control practices installed properly?
[X] Yes [] No [] NA Are all soil stockpiles adequately contained?
[X] Yes [] No [] NA Are Sediment Control measures protecting off site areas?
If Sediment Control measures are protecting off site areas, what are the types of protection:
[] Sediment Pond [X] Sediment Trap [X] Silt Fence [] Ditch Check
[X] Inlet Protection [] Vegetated Filter Strips [] Polyacrylamide Flocculates [] Sediment Berms/Dikes
[] Other
[] Yes [X] No Photo Documentation
[] Yes [X] No Are any additional Erosion Prevention or Sediment Control practices required?
[] Yes [X] No Are any corrective actions required to on-site or perimeter practices? If yes, fully describe in NOTES section below

OFFSITE IMPACT

- Yes No Are there BMP's installed in streams or active channels?
If Yes, have them removed unless specified on the plans and check for permits.
- Yes No Is there evidence of work outside the limits of the approved plan?
- Yes No NA Is construction being de-watered properly if applicable?
- Are there off-site impacts? Yes No If yes, provide exact location and complete details in NOTES section below.

| | | | | |
|--|-------------------------------|----------------------------------|--|---------------------------------|
| <input type="checkbox"/> Waterbody | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Roadway | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Adjacent Property | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Air/Dust | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
| <input type="checkbox"/> Storm Sewer | <input type="checkbox"/> None | <input type="checkbox"/> Minimal | <input type="checkbox"/> Needs Attention | <input type="checkbox"/> Severe |
- Yes No Photo Documentation

DOCUMENTATION BY THE PERMITTEE

- Current weather conditions: Rain
- Yes No Is there a functional rain gauge located on the project site?
Recorded rainfall since previous inspection: 1/4 inches
 - Yes No Do the logs show inspections every 7 calendar days or every 14 days and within 24 hours of any 1/2 inch or greater storm event?
 - Yes No Do EP&SC logs show that action has been taken regarding any current deficiencies?

ENFORCEMENT ACTIVITY

- Yes No NA Have the proper actions been taken regarding previous deficiencies or violations if applicable?
- What, if any, enforcement activity is required as a result of this inspection?
- No action
 - Negotiated compliance
 - Notice of violation
 - Stop work order
- } Required Actions: _____
- Compliance Date: _____

FINAL STABILIZATION

- Yes No Have all land disturbing activities at the site ceased?
 - Yes No Are there any areas of active erosion evident?
 - Yes No Is there perennial vegetative cover with a density of at least 70% of cover established for the area OR have equivalent measures such as mulches, RECPs, etc. been employed?
- Follow-up inspection: _____ (date)
- Yes No Photo Documentation

NOTES

Some mulching on road, Road is blocked off. No problems
