					Indu			Ť	Storm V	Vater	Disc Re	charq port	ge G ing F	ener Perio	al Pod: _	ermi	t Coi	mpli	ce Evaluance (IG	P) (	Orde	r No.				DWC	Q)								
District name and facil	ity ad	dress:							Dat	te:	Time:						(a.m.)(p.m.)																		
	The purpose of this inspection form is to evaluate the permit compliance performance of the Facility over the course of the current monitoring period. This form satisfies the requirement of Section XV in the IGP.															e																			
											I	. Aı	าทน	al Ev	valu	atio	n Q	ues	tions																
<ol> <li>Have you reviewed</li> <li>Have you inspected polllutants entering to a support the pollutants and the pollutants entering to a support the pollutants and the pollutants are support to a support the pollutants and the pollutants are support to a support supp</li></ol>	all are the sto all dra the ed your and as pollute	eas of orm was ainage quipm Facilit ssess ant so orever	indicater e are ent y's E ed the ource nting	ustria conv eas p need SMP ne et es to	al ac veya orevided t s? () ffection det utan	etivity ince : ously to imp KV.E ivene erminuts in	y and syste y ide plem ) ess c ne if indu	I assem? ntification of all the	sociated? (XV.B ed as h your F I BMPs BMPs al storn	d pot naving acilti for e are p	g no iy's E each prop ter d	al po exp BMP are erly	oosu s? ( a of des arge	ant s re to XV.I indu igne	o ind D) ustriand a	ces flustral	for e	evide activi	ence of, ities and and , and are SWDs?	ortima	he pateria	oten	tial f	or,	A)				Yes See S Yes Yes ction II	l on	ion  the	No No e ne	ext p	age	
				II.	Vis	ual (	Obse	erva	ation of	f Ind	ustr	ial <i>I</i>	Activ	vitiy	and	d As	SOC	ciate	ed Poter	ntia	l Po	lluta	nt S	our	ces	(XV	'.B)								
	Disch Obse	•			C	Odor of	f Disch	narge		Color					of Discharge					Turbidity of Discharge				Floatables in Discharge					Deposits/Stains on Ground Surface						
Location	No	Non-Storm Water	Musty	Sewage	Sulfur	Sour Milk	Oily	None	¥ O	ther	Red	Yellow	Brown	Green	Gray	Rainbow	None	NA	Other	Cloudy	Opaque	Suspended Solids	Olear	NA	Garbage/Sewage	Leaves/Twigs	None	NA	Other	Sediment	Garbage	Oil	Fuel	None	Other
1) Fueling Facility																																			
Vehicle/Bus Washing & Steam Cleaning     Maintenance Shop																																			
4) Materials Storage - 1																																			
5) Materials Storage - 2																																			
6) Sampling Point #1  7) Sampling Point #2			_																														$\rightarrow$		
8) Bus Parking																																	$\overline{}$		
9) Other																																	$\dashv$		

										II. BN	IP As	sessr	nent a	and l	nspec	tion (	XV.E	and )	(V.F)			
		(a)			(b)			(c)			(d)			(e)			(f)			(g)		Notes / Calley you Descriptors and for all !!No!! analys
	Yes	No	NA	Yes	No	NA	Yes	No	NA	Yes	No	NA	Yes	No	NA	Yes	No	NA	Yes	No	NA	Notes / Follow-up Requirements for all "No" answers
1) Fueling Facility																						
2) Vehicle/Bus Washing & Steam Cleaning																						
3) Maintenance Shop																						
4) Materials Storage 1																						
5) Materials Storage 2																						
6) Sampling Point #1																						
7) Sampling Point #2																						
8) Bus Parking																						
9) Other																						

(a) Good House Keeping?

(d) Metal Parts on Pallets & Covered?

(f) Spill Kit in Place?

(b) Secondary Containment?

(e) Dry Mop Stains as Needed?

(g) Oil/Water Separator or Sump in Working Order?

(c) Drip Pans in Place?

IV.	Certification
Preparer's Name:	Title:
Signature:	Date: